

# Using Organizational Development Approaches to Strengthen Health Information Systems

## SUMMARY

This concept paper summarizes an approach based on the principles of organizational development that is aimed at complementing health information systems (HIS) strengthening efforts to make them more effective. The approach is squarely aimed at effectively moving from the development of a strategic HIS plan by technical experts to effective implementation of the plan. The concept paper outlines a specific approach to strengthen the organizational capacity of the interagency coordinating committee that is usually formed to guide implementation of a strategic plan. While the approach is aimed at the national level entity, it is likely to be applicable to state or provincial level coordinating bodies. The paper concludes with a suggested set of next steps to implement the approach.

## PROBLEM STATEMENT

The widely accepted WHO framework identifies a well functioning health information system (HIS) as one of the six building blocks of a health system.<sup>1</sup> A country's HIS is made up of all the data and records about the population's health. The sources of data include civil and vital registration (recording births, deaths, and causes of death), censuses and surveys, individual medical records, service records, and financial

and resource tracking information. An integrated HIS is designed to pull together data from a range of sources, so that all information is stored in such a way that it can easily be accessed by users in different locations and in a format suited to their needs. HIS strengthening efforts are aimed at improving the availability, quality, and utilization of the information that such a system can produce to have a positive impact on patient services, program management, and policy review and development.

To respond to the need for strengthened HIS, many countries either have or are currently developing national strategies for improved HIS. The Health Metrics Network (HMN) developed a document in 2009 that provides clear guidance for developing HIS strategic plans.<sup>2</sup> An example of such a strategic plan is one developed in Kenya in 2009.<sup>3</sup> Approximately 30 of these plans are posted on the HMN website. The HMN framework for an HIS strategic plan includes an HIS vision, description of current and planned HIS strengthening efforts, HIS objectives and interventions, timeframe for phasing in the interventions, plan for activity implementation, costing of the strategy, and a monitoring and evaluation strategy.

<sup>2</sup> HMN. March 2009. *Guidance for the HIS Strategic Planning Process, Version 6.*

<sup>3</sup> Republic of Kenya, Health Sector. 2009-2014. *Strategic Plan for Health Information Systems.*

<sup>1</sup> WHO. 2007. *Everybody's Business: Strengthening Health Systems to Improve Health Outcomes: WHO's Framework for Action.*



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While such plans are often technically sound, they are often not implemented for a range of reasons, including lack of high-level support, lack of resources, lack of leadership, lack of demand for better information, and poor implementation capacity. In addition, plans are often heavily focused on the technical steps and pay inadequate attention to the institutional and behavioral aspects of strengthening the system. In a recent article in *Health Policy and Planning*, Aqil et al. propose a three-part framework for strengthening routine health information systems.<sup>4</sup> This framework proposes a triangle consisting of technical determinants, environmental/organizational determinants, and behavioral determinants. The message is essentially the same as the one in this concept paper: it is imperative to look beyond the technical requirements of HIS.

Coordinating committees are often formed with responsibility for leading the development of HIS strategic plans and overseeing and monitoring their implementation, but they often lack the authority, skills, and resources to be effective. These committees generally consist of technical experts and development partners, who focus primarily on the technical aspects of the HIS and often have limited understanding of the institutional or organizational development aspects of strengthening the HIS.

This concept paper summarizes an approach aimed at making HIS strengthening efforts more effective and making the technical inputs worth the investment. A focused approach based on the use of organizational development interventions as an explicit complement to the usual technical inputs has the potential to increase the likelihood of country strategies being successfully implemented.

## PRINCIPLES UNDERLYING THE APPROACH

The proposed approach is based on four underlying principles.

- **Country ownership** — making sure that the effort is country led and managed at all stages of the process.

- **Build on what already exists** — using existing structures for implementation as long as they are composed of the right people and have the appropriate mandate and authorities.
- **Stakeholder involvement** — involving other concerned national ministries, other ministry of health (MOH) stakeholders, regional and local government, implementing partners, and donors.
- **Managing for results** — designing an approach aimed at tangible and visible improvements that will build confidence in the HIS strengthening effort and ultimately result in demand for and increased utilization of health information.

## APPROACH

### A. STARTING POINT

The two fundamental starting points for strengthening a HIS are the following:

- National HIS strategic plan consistent with the resources available, developed in broad consultation with key stakeholders, and widely accepted. The strategic plan provides the direction that is the basis for implementation and coordination.
- Interministerial body for the HIS that will enable the collection, analysis, and use of health-related data for policy and program planning. The creation of this body or strengthening of an existing body would have the mandate and decision-making authority (or access to it) to coordinate, oversee implementation, and secure resources. Since the strengthening of HIS typically requires a multisectoral approach — MOH, telecommunications, local government, and statistics — the committee guiding the implementation process should have representation from all concerned national agencies. In Kenya, for example, this body is called the National Health Information Coordinating Committee. While the leadership of such a committee is likely to be provided by the MOH, entrusting implementation solely to the HIS unit within the MOH is not sufficiently high level nor broadly oriented enough. HIS experts tend to be too focused on the “system” and not on what is needed to enhance performance to ensure successful implementation.

If a national HIS strategic plan and coordinating committee are not present, then both must be established.

<sup>4</sup> Aqil, Lippeveld, and Hozumi. March 2009. *PRISM framework: a paradigm shift for designing, strengthening, and evaluating routine health information systems. Health Policy and Planning.*

## B. GOAL

Strengthen the capacity of the interagency coordinating committee to more effectively guide the implementation of the strategic plan by developing the vision and skills to address all aspects of HIS strengthening. The suggested approach is targeted at the interagency body that has the mandate to guide implementation. The premise is that any major change effort such as strengthening a HIS requires a “guiding coalition”<sup>5</sup> to provide direction, oversee implementation, and communicate with key stakeholders. To be effective, this guiding body must have the capacity to lead the change process and take explicit actions beyond the mere technical steps.

## C. INTERVENTIONS

To strengthen the capacity of the coordinating committee, a range of organizational development interventions can be considered. These interventions should be put into practice in parallel with the implementation of the strategic plan.

- **Governance.** One of the first interventions is to ensure that the committee has the right (interministerial) membership, clearly delegated functions, authority to carry out these functions, and clearly established mechanisms to involve stakeholders, including development partners. Committee members must also have the time to engage in the work of the committee. This intervention is aimed at making sure the composition of the committee, its mandate, and its resources are appropriate to the challenge of strengthening a HIS. The committee must also receive the authority to provide leadership and coordinate across ministries including recommending the resources so individual agencies can each do their part. Since committees of this nature are usually formally established, such authority may require a ministerial decree or order that provides the official basis for operating.
- **Team-building for the committee.** It cannot be assumed that the committee will function effectively as a team. Even with strong leadership, a committee must clarify roles and responsibilities of team members, have a clear and workable structure, agree on operating procedures, (e.g., frequency of meeting, responsibility for developing meeting agendas, membership criteria),

develop communication norms that specify what and how information is shared, have effective meeting management skills, be capable of consensus decision-making, and be mutually accountable. Team-building typically requires several short two to three-day workshops.

- **Training for committee in change management and their role in leading change.** Strengthening the HIS is a large effort that can be viewed through the lens of change management. Explicit training of the committee in a change management framework such as the eight-step framework by John Kotter in *Leading Change*, can greatly increase the committee’s awareness of the change process and their role in guiding it.
- **Develop the capacity of the committee.** Below are five skill areas that the committee is likely to need. While this list is certainly not all encompassing, these skills are considered central in implementing a large scale HIS strengthening effort.
  - Strategic leadership — aligning partners and their activities with the strategy, setting standards, and building consensus with key stakeholders.
  - Stakeholder coordination — establishing coordination mechanisms, communicating across government agencies and partners including the use of electronic communication mechanisms, and running effective meetings.
  - Project management — planning, monitoring, reporting, and holding people accountable for results. This includes training in the use of basic project management tools.
  - Gaining commitment and support from decision makers — high-level advocacy and communication skills to ensure top-level support.
  - Establishing demand for health information — use of data for policy and decision-making and the establishment of a culture of data and information use.

## D. EXPECTED TIMING

While timing may vary, it is reasonable to assume that external assistance to the committee will be needed for a period of one to three years depending on the existing capacity of an appropriate interministerial body. The period of time should be long enough for the committee

<sup>5</sup> Kotter, John P. 1996. *Leading Change*.

to acquire the skills discussed above and not require any assistance to function at a high level. The length of time depends, of course, on the existing skills of the leadership and committee members and how fast they develop new skills.

## E. SKILLS REQUIRED TO IMPLEMENT THE APPROACH

Below is the set of skills that are required by external consultants to implement this approach. Countries may wish to draw upon international consultant assistance to assist in implementation. The skills listed do not include the technical skills related to data collection, analysis, and usage.

Skill Area	Specific Skills
Organizational development	Strategic planning, team-building, change management, negotiation, managing conflict, consensus decision-making, organizational culture, executive coaching
Communications	Use of communication tools, technology
Project management	Planning, monitoring, reporting
Advocacy skills	Presentation skills, using the media effectively
Facilitation skills	Meeting management, process facilitation

One consultant with skills in organizational development should be designated as the team leader to ensure close coordination of all inputs. To provide coverage of all skills, a team of several individuals is likely to be required. All consultants need to strike a balance between guidance and facilitation so that the client maintains leadership and the consultant does not take over ownership of the process.

## CONCLUSION

This approach is still very much at the concept stage. In order to move the process forward, the following road map is suggested:

- Vet the approach in several countries to test receptivity and to get feedback.
- Identify two countries that would be interested in pilot testing the approach. Pilot testing would require one to two years of actual implementation.
- Develop a set of indicators that can be used to measure the effectiveness of the approach.
- Set up a learning platform so that lessons can be captured.

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