Mentorship to improve data quality and use to combat malaria in Kenya

Background

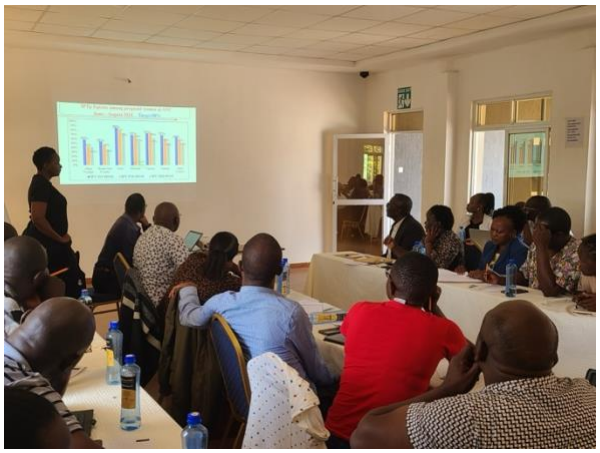
In the heart of the Ugenya community in Siaya County, Kenya Quinto Makoha is a beacon of dedication in the fight against malaria. As a sub-county pharmaceutical facilitator, Quinto has been busy implementing malaria surveillance interventions for over five years. In his work, he noticed how sub-optimal data quality and a lack of data use limited progress. However, the resources available to him were stretched too thin to effectively cover the 25 health facilities under his watch, meaning he could not visit every health facility regularly to provide the supportive supervision needed to ensure quality data.

Quinto Makoha mentors a health worker at Ligala Health Centre in Siaya County. Photo credit: George Wadegu, JSI.

Steps Taken

Kenya's Ministry of Health (MOH), with support from the U.S. President's Malaria Initiative (PMI), is committed to improving malaria surveillance, monitoring, and evaluation to inform evidence-based decision-making. Recognizing that training alone would not achieve the desired change, the MOH partnered with PMI's Measure Malaria program in 2021 to develop a mentorship approach, providing supportive supervision, coaching and creative problem solving to overcome data collection challenges. However, mentors like Quinto need specialized skills to effectively guide trainees.

Through the Country Health Information Systems and Data Use (CHISU) program, Quinto learned about new tools and skills designed to transform his approach to capacity building using PMI's mentorship approach. First came the malaria routine data quality assessment (mRDQA) tool, previously a spreadsheet that is now available as a mobile app on his phone. The app came with step-by-step instructions in a user-friendly interface, making the task clear and easier to carry out. He also joined a virtual academy course to learn more about the information provided through the national health information system, Kenya Health Information System (KHIS), and how to triangulate data from the mRDQA and KHIS to help health workers validate data quality assessments.



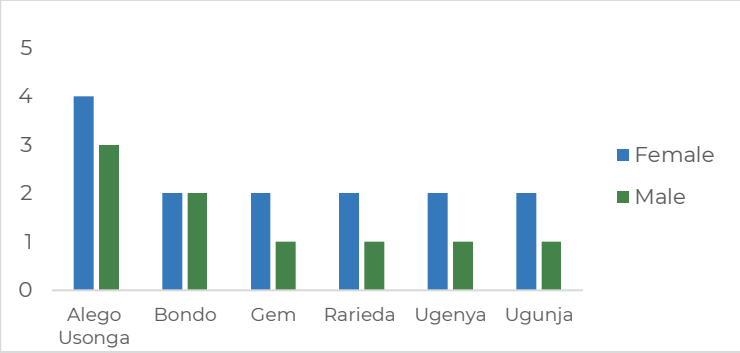
Health workers at Ligala Health Centre in Siaya County discuss data quality. Photo credit: George Wadegu, JSI.

Results + Next Steps

Using these new skills and tools, Quinto began to analyze the triangulated data and identified the health facilities most in need of mentorship. Rather than being spread thin across all 25 health facilities, he honed in on seven facilities with high malaria burden that exhibited the greatest gaps in data quality.

In July 2024, Quinto and his team embarked on a targeted mentorship mission in the seven health facilities. Drawing on his many years of experience and his new technical skills, Quinto led the team to address data discrepancies between departments. He was no longer just a pharmaceutical facilitator, but rather a data-driven strategist mentoring health workers to uncover insight. While data quality improvements took weeks to display in the KHIS, Quinto now had tools at his disposal to see changes in real time. The skills he gained in the virtual academy course gave him confidence to navigate the system and use the data while the mRDQA app made data analysis faster and more accurate, allowing him to pinpoint where improvements were most needed.

Number of mentors from Siaya County trained on the mRDQA digital app



“The mRDQA app, championed by CHISU, made the analysis of the assessment data much easier and faster,” Quinto explained. “This enabled the team to identify the facilities with poor data quality and quickly intervene. The newly acquired skills, coupled with my good understanding of malaria surveillance, enabled us to offer close monitoring and targeted mentorship to the health facilities.”

Quinto’s story is a testament to how strategic use of data can better focus time, resources, and effort for greater impact. CHISU will support the MOH to continue equipping mentors like Quinto with the tools and skills needed to improve malaria surveillance in their respective jurisdictions. “We are confident that data and indicators in these facilities will improve. Quinto said. “The approaches used are both resource and time-saving.” The success of these capacity strengthening efforts has broader implications for malaria surveillance nationwide and the overall goal of reducing malaria morbidity and mortality.

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