

Maternal & Perinatal Death Surveillance and Response (MPDSR)

*Data Analysis, Interpretation,
Reporting*



Learning objectives

By the end of this session, participants will :

- *Identify MPDSR reporting tools and periodicity of reporting*
- *Be familiar with MPDSR data flow and mechanisms of monitoring & ensuring data quality*
- *Perform basics of MPDSR data analysis, aggregation and interpretation*

Outline of the presentation

- *Introduction*
- *Classification of MPDSR reporting within PHEM*
- *Weekly Maternal and Perinatal deaths reporting*
- *MPDSR Case based reporting (MDRF&PDRF)*
- *MPDSR Data quality*
- *Data analysis- aggregation and interpretation*
- *Use of aggregated MPDSR data for programmatic response*

Introduction

Ensuring reliable reporting of *Maternal and Perinatal death surveillance data* throughout the system is important so that program managers, surveillance officers and other health care staff can use of this information to *respond with actions that will prevent future deaths*

Introduction(2)

It is not enough to *collect, record and report* information about Maternal and Perinatal deaths;

The data must also be analyzed closest to the community with the appropriate analytical skills; *minimum at the district level*

Analyzing data provides the information that is used to take *relevant, timely and appropriate public health action*

WRF_for HEWs

Section II. Summary for Immediately Reportable Diseases/Conditions:

Annex 5: Weekly Report Form for Health Extension Workers (WRF_HEW)

1. Record below the total number of cases for each disease/condition for the current week.

Indicator: Total malaria (confirmed by RDT + clinically diagnosed as malaria)
 Total malaria supported fever cases confirmed by RDT
 Number of fever cases positive for malaria
 Malaria (suspected)
 Shallow diarrhea
 Acute bloody diarrhea (other than malaria and meningitis)
 Severe Acute Malnutrition (SAM) * 11cm under 2 years
 SAM * 11cm under 5 years
 SAM * 11cm under 5 years
 SAM * 11cm under 5 years

2. Summary for Immediately Reportable Diseases/Conditions:

DISEASE	C	D	DISEASE	C	D
Measles			Fever + Rash		
Acute Diarrhea			Neonatal Tetanus		
Shallow Diarrhea			Influenza Like Illnesses		
Acute bloody Diarrhea			Other (specify): _____		
Severe Acute Malnutrition (SAM) * 11cm under 2 years					
Severe Acute Malnutrition (SAM) * 11cm under 5 years					
Severe Acute Malnutrition (SAM) * 11cm under 5 years					
Severe Acute Malnutrition (SAM) * 11cm under 5 years					

Look at the trends, abnormal increase in cases, improving trends? Action taken and Recommendations

Date received at Cluster Health Center/Health Post: _____
 Received by: _____
 Total: _____

C	D	DISEASE	C	D	DISEASE	C	D
		Fever + Rash			Hemorrhagic Diseases		
		Neonatal Tetanus			Guinea worm		
		Influenza Like Illnesses			Deaths of women of reproductive age (15-49) years		
		Other (specify): _____			Birth of a dead fetus or death of a newborn		
					Other (specify): _		

Data quality-Weekly reporting

Progress of completeness and timeliness of Maternal and Perinatal death reporting at all levels should be monitored

- *Actions can be taken to improve completeness and timeliness*
- *When the surveillance system is good, the rates these two indicators should approach 100%*
- *If no cases of death (maternal or perinatal death) have been identified during the week, a “zero” is actively reported*

Analysis – data aggregation and interpretation

Aim?

- To identify causes of death,
- Subgroups at highest risk,
- To identify factors contributing to maternal deaths,
- To assess the emerging data patterns
- prioritize the most important health problems to improve the public health response

It also helps to identify changes in reporting especially at initial stages of implementation

Analysis – data aggregation and interpretation

Steps

- Receive, handle and store data from reporting sites**
- Data entry, quality and completeness**
- Aggregating reported Weekly notifications and case based reports**
- Perform standard data analysis plan**
- Perform specialized complex analysis or sub analysis,**
- Analyze preventable factors**
- Translate data analysis for broader audience**
- Respond, disseminate results and recommendations, and implement M&E**

Analysis – data aggregation and interpretation

Basic MPDSR data analysis includes;

- Basic descriptive analysis by *person, place, and time*
- Medical cause of death,
- Contributing factors and preventability of death
- Patterns and trends , and

Analysis – data aggregation and interpretation

How ?

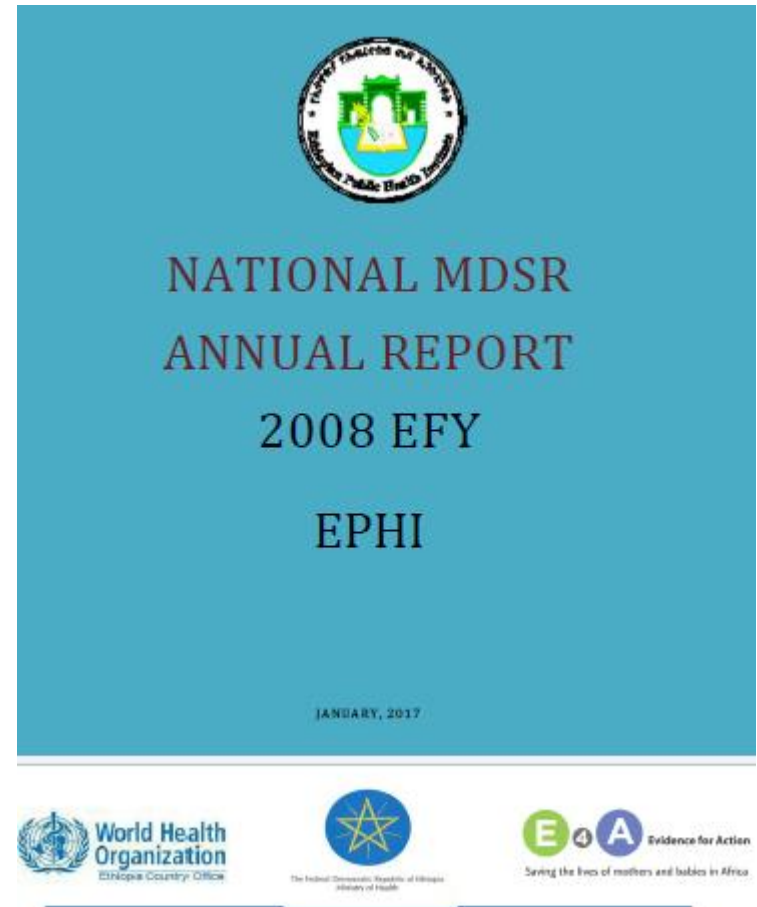
- **Tabulating reports manually and filling in a summary data sheet**
- **Using Microsoft excel (Pivot tables , charts and running formulas)**
- **Running a standard computer program to generate a summary report (EPI Info 7 database /dashboard ,or other standardized databases)**

Annual report

Regional and National MDSR TWGs will produce Annual reports which will demonstrate *trends in numbers, cause of death and contributory factors and geographical distribution*

A certain amount of basic *epidemiological data* will be included in these reports

The reports should be disseminated for wider utilization



Exercise on Data Analysis

