



# HA eRegister for Health Assistants

With support from USAID, four implementing partners: MEASURE Evaluation, icddr,b, the MaMoni Health Systems Strengthening (HSS) Project and the Systems for Improving Access to Pharmaceuticals and Services (SIAPS) Project have been providing technical assistance to the Management Information Systems (MIS) units of Directorate General of Health Services (DGHS) and Directorate General of Family Planning (DGFP) to strengthen their Routine Health Information System (RHIS) through the electronic Management Information System (eMIS) Initiative. As part of this, paper registers and other documents used by Health Assistants under the DGHS have been converted into a single electronic register known as the 'HA eRegister' using digital technology. HAs can perform all their activities from service delivery to administrative work from their tablet PCs using the HA eRegister. After the successful implementation of the HA eRegister in Tangail and Habiganj districts, it is now being scaled up nationally.



## Coverage (ongoing and scale-up)

7 Districts

53 Upazilas

Approximately 3.4 million household

Approximately 15.4 million population (under digital service)

More than 2,500 users (HA)

## What is the HA eRegister?

Health Assistants (HAs) are frontline community health workers under the DGHS. They are primarily responsible for providing door-to-door and outreach (EPI) services. One of the key activities of HAs is to conduct regular immunization sessions at eight EPI sub-blocks (catchment areas with a population of 6000, approximately). They are also responsible for collecting routine data on maternal and child health including nutrition, births/deaths, etc. The HA eRegister is an electronic version of the existing paper registers. It is a mobile application that works both online and offline. Data collected in course of service provision or as part of other activities is stored in the device as well as in a cloud database.

## How does the HA eRegister works?

Once a person is registered in the Population Registration System (PRS), the HA can retrieve particulars of that person from the hand-held device (tablet PC) by using the unique Health ID provided from the Open Shared Health Record (SHR) of the DGHS or by searching by different parameters. While conducting an EPI session,

HAs can access lists of children and women to be vaccinated and record immunization data. Using the HA e-Register, the Advance Workplan can be submitted to the supervisor (AHI) which is one of the important administrative tasks HAs have to perform regularly. The DGHS and DGFP's electronic systems are interlinked and they use the same population database, which eliminates duplication.



## Key components of the HA eRegister

### Registration of children and women for immunisation

Using records available in the Population Registration System (PRS) database, HAs are able to register children (0-23 months) and adolescent girls and women (15-49) in their respective catchment areas for immunization. The app interface guides the HA in this task so that those who have not been registered can be identified easily from the color on the list.

### EPI microplanning

The EPI program is managed through micro planning carried out at the beginning of the year. Web-based tools allows the Medical Technologist-EPI at the upazila level to enter data in the EPI microplan. Lists of EPI centers are downloaded from the server. There are eight EPI sub-blocks in any ward, which can be used for conducting sessions on a given date.

### Pregnancy, delivery, and post- delivery

The maternal and newborn module allows HAs to register pregnant women in a particular catchment area. HAs use the list to capture records of ANC care (at least four visits recommended). They also collect data on delivery, newborn, and PNC care provided to both mother and newborn.

### Child health (0-5 years)

The under-five module in the HA eRegister provides the recommended care to children below 5 years of age. Algorithms or built-in medical intelligence guides HAs to make decisions – e.g., counseling, preventive advice, referral, etc.

### EPI session management

Every month there are eight EPI sessions in a ward. The HA eRegister can be used to plan for a particular EPI session. HAs can access the list of children and women to be vaccinated. The EPI card in the HA eRegister records all dates of immunization which is also visible in the EPI modules for children and women.

### AEFI data collection

Collecting data on adverse effects following immunization (AEFI) is a regular activity of HAs. HAs collect details on incidence. Managers can access AEFI data and take necessary actions.

### Birth/deaths

HAs collect data on birth and deaths occurring in their catchment areas. The HA eRegister makes it possible to share data with relevant authorities (such as the Office of the Register of Birth and Death) through the Application User Interface (API) function.

### Advance Workplan

HAs need to submit monthly advance workplans to their supervisors (Assistant Health Inspector-AHI). This workplan is prepared on the basis of structured tasks and submitted online. The AHI is able to approve or suggest modifications. The approved workplan is available online and can be used by the supervisors or managers to monitor activities performed by HAs.

## Reports

Periodic reports on immunization, pregnant women, births and deaths prepared by HAs every month can now be generated automatically from the HA eRegister. The reports can be submitted online to the AHI for aggregation. Using the HA eRegister makes the preparation of reports easy and effortless, at the same time, increasing the accuracy and consistency of the report. These reports are also available in the DHIS2 format.

## Use and sharing of data

Data can be shared within and between the Directorates (DGHS and DGFP) with FWA, FWV, SACMO. Thus, it eliminates the likelihood of duplication or double reporting from same community. Data collection is easy, timely and effortless. This is pivotal in ensuring the quality of data.

The image displays two digital immunization cards from the Health ID system. The top card is for a child (Health ID: 94359855766) and the bottom card is for an adolescent/woman (Health ID: 96544816710). Both cards show a table of immunization dates for six vaccines: BCG, Penta, OPV, PCV, IPV, and MR. The dates are automatically generated by the system.

টিকার নাম	১ম বার	২য় বার	৩য় বার	৪র্থ বার	৫ম বার	৬ষ্ঠ বার
টিউবাকুলোসিস	22/01/2015	20/02/2015	25/03/2015	25/04/2015	08/09/2015	06/03/2016
পিপিআই	23/01/2015					
পেন্টোজেন্ট	24/01/2015	21/02/2015	21/03/2015			
এপিআই	24/01/2015	21/02/2015	---			
পিপিআই	24/01/2015	21/02/2015				
জাইনোসিডি						
এমজিআর						
একসেস বহু ডোজ						

The picture shows a child EPI card and adolescent/Women EPI card that are displayed in the HA eRegister. These are identical to the paper cards that are provided to the parents of immunized children. The EPI (Children) card shows the date of immunization and the dates for the next visits for six vaccines (BCG, Penta, OPV, PCV, IPV, MR). The dates are automatically generated from the system which helps the HAs to fill the dates in the paper card easily.

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