Why Strengthen Human Resources Information Systems?

Many low-resource countries face daunting obstacles to meeting the health care needs of their people. To ensure that the right health care provider is in the right place with the right skills, these countries need current, accurate data on human resources for health (HRH). A strong human resources information system (HRIS) helps health care leaders quickly answer the key policy questions affecting health care service delivery:

- **Workforce Planning**: Are enough health workers being trained to meet the projected need? How might policy changes affect the health workforce?
- **Training**: Are students discontinuing pre-service education before entering the workforce, and if so, why? Are health workers receiving in-service training? Do they have the training necessary for their jobs?
- **Qualifications**: Are health workers meeting continuing education requirements for licensure? Have workers been assessed competent in the qualifications required for their jobs?
- **Service Delivery**: Are health workers employed in posts that match their education and training? Are health workers optimally deployed in locations to meet national health priorities? How many workers need to be recruited to fulfill anticipated vacancies?
- **Retention**: How many health workers are leaving the workforce? What are the causes of attrition for health workers? What initiatives are effective in keeping them in priority posts, and how are they affecting attrition rates?

Recognizing the need for strong HRIS, the USAID-funded global Capacity Project (2005-2009) developed a program of technical assistance and tools to assist countries with strengthening HRIS. The global follow-on project, CapacityPlus, Capacity Project Associate Awards, and other IntraHealth International-led projects continue to support and build on this work.

**What Is an HRIS?**

An HRIS provides health sector leaders and managers with the information needed to assess HR problems, plan effective interventions, and evaluate those interventions. An HRIS can be as simple as a filing cabinet of paper personnel files or as complex as a multi-database system with the capacity to analyze workforce problems and possible solutions. The strength of an HRIS does not depend on technology but on its ability to generate information that is accurate, timely, and adaptable to address new HRH issues.

In our participatory approach, many stakeholders are involved. Ministries, licensing and certification bodies, private-sector organizations, and developers work together to develop a mature and complete HRIS that tracks health professionals from the time they enter training until they leave the health workforce. In each country, a Stakeholder Leadership Group is encouraged to assume ownership of the HRIS, and our efforts focus on developing their capacity to use, support, and improve the system after any project assistance has ended.

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What Tools Do We Offer?

- A comprehensive HRIS strengthening approach
- The iHRIS Suite of Open Source HRIS software (which can be downloaded for free and customized for local needs):
  - iHRIS Qualify tracks health worker training, certification, and licensure
  - iHRIS Manage maintains personnel deployment, performance, and attrition information
  - iHRIS Plan models long-term health workforce needs
- The iHRIS Appliance, a low-cost and low-maintenance alternative solution for implementing the iHRIS software where support for Open Source software is unavailable
- The HRIS Strengthening Toolkit, procedures and tools to facilitate applying the HRIS strengthening process and implementing the iHRIS software.

What Country Experience Do We Have?

Through the Capacity Project, its bilateral Associate Awards, and CapacityPlus, we have experience supporting HRIS strengthening in numerous countries (see map), using a combination of on-the-ground and remote approaches.

What Have We Learned?

- HRIS should be designed to meet country-specific needs and must be flexible and adaptable to meet emerging needs after they are identified.
- For HRIS to be successful and sustainable, country ownership, data use, and capacity-building must be priorities.
- Key issues for stakeholders to address are data ownership, data sharing, and policy questions.
- Data frequently exist in small datasets or paper files not necessarily accessible by all stakeholders. Convening HRIS stakeholders in the same room ensures that information is shared and helps them reach consensus for making good use of the data that do exist.
- A key step is creating a culture of routinely using data for decision-making. In countries where we have worked, data are being used to inform and cost HRH strategic plans, maintain up-to-date professional registries, eliminate ghost workers, address recruitment bottlenecks, and support improved service delivery.
- Capacity must be built at global, regional, and local levels and collaboration is critical. Capacity-building is often needed for developing strong data collection systems, using data for planning and management, and providing technical support for the system and its infrastructure.
- HRIS are part of a country’s larger health information system and must be aligned with other systems.