The 10th International congress on tropical paediatrics took place in August 24th in Nairobi, Kenya at the Kenyatta International Conference Center. The KEMRI - Wellcome Trust was present to provide updates on part of the work we are doing in the area of health systems research. This involves strengthening and improving hospital data collection and use of the same. It aims at improving the quality of care in maternal, newborn and child health.

Hospitals in the network continue to play a very important role in supporting improved data collection and there has been gradual improvement in the quality of data coming from these hospitals. Those currently on the networks are: Machakos, Embu, Kiambu, Kerugoya, Nyeri, Mama Lucy, Mbagathi, Kisumu, Kisumu East, Mbale, Vihiga, Kitale, Busia, Kakamega. The Ministry of health has equally been supportive towards seeing the implemention of CIN.

The chart on the left assesses how a given hospital has been performing in terms of level of documentation for particular indicators over time (in two months intervals for the entire study period). The coloured horizontal lines are the cutoff points indicating the levels of documentation i.e. poor documentation (< 60%), Some documentation (60 - 79%), Good documentation (80 - 90%) and Excellent documentation (> 90%). For instance from the chart it’s observed that documentation of weight indicator is excellent from the time this hospital was enrolled into the CIN study.
**KEMRI-Wellcome Trust** conducted a two day Clinical Information Network training on RedCap and Data analysis at their Nairobi offices on 28th-29th July 2014. A total of 16 participants from the CIN sites attended this training which covered topics on: Developing RedCap standard operating procedures and tools, generating reports, R in data management and visualization using R.

Speaking shortly after the training, Kipg’eno Byegon a data clerk based at the Kitale county hospital had the following to say:

‘Having taken part in this training, I am optimistic on improving the quality of data coming out of the Kitale county hospital, where I work closely with Dr Njauwe the Medical Officer who works at the children’s ward and has himself embraced the concept of CIN.' I found the training useful, I had never heard of R but now I know what R is and I think that in future KEMRI may need to extend the practical sessions after the training. The theory part was good, but we had little time to do practical work and I am glad that the reports being generated from Kitale county hospital are good according to my own assessment and from the guys at KEMRI offices in Nairobi.’

The graph above shows the no of records captured in redcap Sept 2013 to mid Oct ’14. Not all hospitals joined the CIN at the same time.