Addressing health worker absenteeism with new technology in Uganda

Pius Akankwasa, MD MPH
(Prime Minister’s Delivery Unit, Office of the Prime Minister, Uganda)
Impact of absenteeism on patients and quality of care

• A workforce with 40% absenteeism is effectively 40% smaller
• Prevents communities from accessing care
• Worsening health condition and trust in system
• Increased volume, Low morale, forced to perform tasks for which they are unqualified
• Reducing absenteeism is one of the key priorities of President
Biometric tracking system to reduce health worker absenteeism

Pilot in 20 districts in eastern Uganda starting Nov 2018
Preliminary results: 2018 vs 2019

Trend on Average Attendance of Health Workers 2018 Vs 2019

Percentage of Health Workers

Month of the year

January (JAN): 76%, 82%
February (FEB): 87%
March (MAR): 85%
April (APR): 83%
May (MAY): 86%, 90%
June (JUN): 87%
July (JUL): 85%
August (AUG): 84%
September (SEP): 86%
October (OCT): 85%
November (NOV): 90%
December (DEC): 85%

Average Attendance 2018
Average Attendance 2019
CHALLENGES

i. Integrating biometric data into the existing data system: HRIS

ii. Erratic power supply and poor network connectivity in remote districts

iii. Vandalism/intentional damage, theft of equipment

iv. Delayed and or lack of action by district supervisors
LESSONS

- Continuous monitoring improves performance
- Using and sharing data more helps to drive actions and improvements
- Follow through with districts is key
- Inter-ministerial Task Force ensures a joint approach to systemic improvement
OPPORTUNITIES FOR IMPACT EVALUATION

- Considerations to scale-up intervention to national level
- Use rigorous methods to understand impact of intervention on absenteeism, volume and quality of care
- Set up collaboration with CEGA fellows/students/interns
Thank you

Contact information:
Pius Akankwasa, MD, MPH
Email: drpius@gmail.com
Phone: +256 703 25 9253