Updates to the SME Reference Manual



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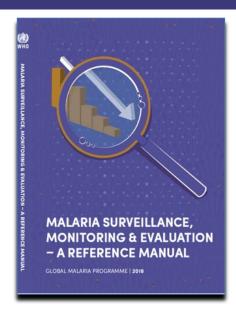
Global Malaria Programme



Section 1- Malaria surveillance as a core intervention



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1. Malaria surveillance as core intervention

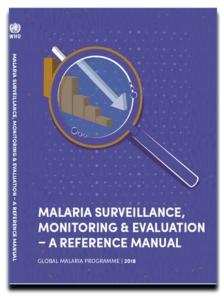
 No major changes but sections 1.2 and 1.3 need to be updated once there is one consolidated document



Section 2- Establishing malaria surveillance systems



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2.1 Requirements and processes

- monitoring data quality indicators at all health system levels such as completeness of, and consistency between core variables in reports
- 2.3 Table 1: Data recorded by level of the surveillance system and aim of the programme
 - Update indicators in line with final indicators defined for data repositories

• 2.4 Reporting

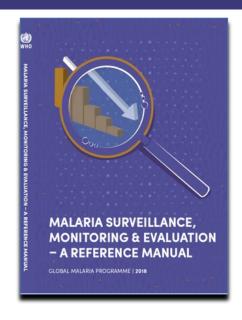
- Expand section on aggregate and case based DHIS2 modules with references to relevant documentation and websites for packages
- 2.9 Certification of elimination Updated in line with updated elimination guidelines
 - Include guidance from the urban malaria framework



Section 3- Concepts and practice of malaria surveillance



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3.5 Routine activities in malaria elimination

Include updated or new WHO recommended interventions for malaria elimination acceleration e.g.
 MDA, TDA, rIRS, etc.

3.7 Focus response

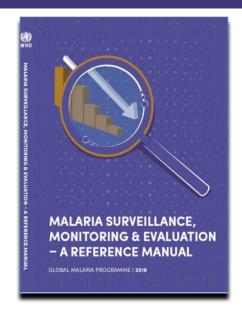
Add updated or new WHO recommendations for malaria elimination



Section 7- Monitoring and evaluation of national programmes



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7.4.1 Programme planning

Section to be added on SNT under stratification and population at risk

7.4.3 Monitoring and evaluation of information systems

Revised to include surveillance system assessments as a core activity in evaluating information systems

7.4.4 Malaria surveillance assessment toolkit

New section added which provides an overview of the toolkit

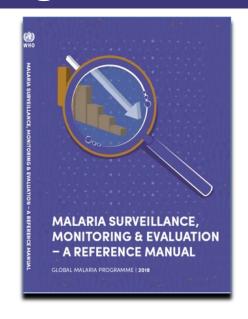


Section 7- Monitoring and evaluation of national programmes

Table 14: Recommended indicators for monitoring malaria programmes and implementation of the GTS

Update indicators based on:

- 1. Department review
- 2. GF and PSI Impact work
- 3. New indicators for surveillance systems assessments
- 4. Updates to WMR
- 5. Updates ento, IR, and hrp2/3 deletion surveillance







THE NEED FOR DATA-INFORMED DECISION-MAKING

 Introduction on why we need to use data for decision making and how it helps programmes to plan effectively to have impact on malaria burden

BARRIERS TO DATA-INFORMED DECISION-MAKING

- Individual level barriers
 - Individual level barriers are factors that are not supportive of, or prevent, individuals working at various levels in the health system from being able, willing or confident to use data to inform decisions related to their own daily responsibilities.
 - Examples are given of individual level barriers
 - Difference between data informed decision making and evidence-based decision making
- Health system barriers to decision making
 - Examples are given

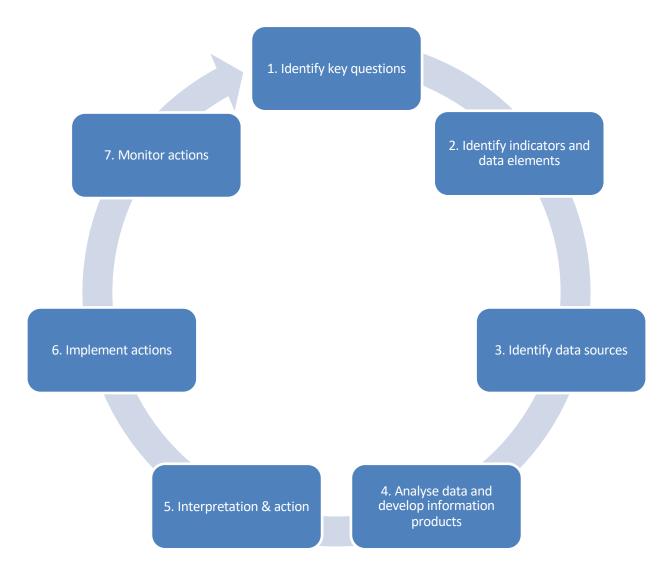
FACILITATORS TO DATA TO ACTION

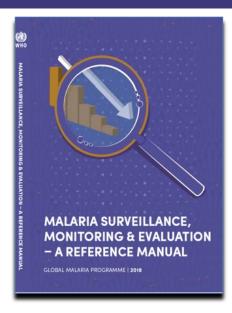
 A summary table for each facilitator including the definition, relation to data use, what does it mean in practice and an example





DATA TO ACTION CYCLE







IDENTIFY KEY QUESTIONS

- Key questions refer to the questions that are of concern to any individual working at any level of the health system in any burden setting, which may include high level strategic questions, operational questions or questions related to patient care.
- Examples are given of key questions

IDENTIFY INDICATORS AND DATA ELEMENTS

- List relevant indicators
 - The next step is to identify which indicators will inform the questions and will be used to make decisions.
- Identify data elements
 - A data element is a basic unit of information, collected about anything of interest, for example a hospital or a case of malaria. The data elements used as numerators and/or denominators for indicators need to be clearly defined and checked in advance to ensure that all data elements are available.

IDENTIFY DATA SOURCES

- Data sources
 - A data source is where the data originates from or where it can be obtained. For example, a register in a health facility, a health information database, or a national or regional survey. In this step of the process, you need to consider your data needs and where the data elements will come from.
 - Examples of data sources are given





DETERMINING YOUR DATA SOURCES

- When determining which data source to use for a particular indicator you need to consider the time period you are interested in and if the data exists for the population, geographical area and health system level of interest.
- Considerations for determining data sources

ANALYSE DATA AND DEVELOP INFORMATION PRODUCTS

- Analysis and visualization
 - Visualisation refers to how the data will be presented, for example in a graph, table or map. Data becomes more powerful when packaged in the right way for the right people at the right time.
 - Examples are given for different health system levels

INFORMATION PRODUCTS

- An information product is where data are structured in a specific format turning it into information. They support review, analysis and interpretation of data. Information products are designed to communicate to a group of stakeholders to increase their knowledge.
- Examples of information products are given





INTERPRETATION AND ACTION

- Interpreting data
 - Once the information product is designed, data can be interpreted and action plans made. This step links the interpretation of information products to potential future actions.
- Planning actions
 - Ensure you have at least one action to respond to each initial question and develop an action plan stating
 who is assigned to undertake each activity and a deadline or time period in which the action must take
 place.

IMPLEMENT ACTIONS

MONITOR ACTIONS





THANK YOU

