

The United Republic of Tanzania



Ministry of Health and Social Welfare

Directorate of Human Resource Development

**Guideline for Data utilization of
Human Resource for Health Information System (HRHIS)
and Training Institution Information System (TIIS)**

“ For better planning, management, and development of HRH”

October 2011

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Acronyms

BMAF	Benjamin Mkapa HIV/AIDS Foundation
CHMT	Council Health Management Team
CCHP	Comprehensive Council Health Plan
DHR	Department of Human Resource
DHRO	District Human Resource Officer
HMT	Hospital Management Team
HRH	Human Resource for Health
HRHIS	Human Resource for Health Information System
HRM	Human Resource Management
HRP	Human Resource Planning
HRD	Human Resource Development
ICT	Information Communication Technology
JICA	Japan International Cooperation Agency
MOHSW	Ministry of Health and Social Welfare
MMAM	Mpango wa Maendeleo ya Afya ya Msingi
MS	Microsoft
PHSDP	Primary Health Services Development Program
PMORALG	Prime Minister's Office-Regional Administration and Local Government
POPSM	President Officer-Public Service Management
P4P	Pay for Performance
RHMT	Regional Health Management Team
RHRO	Regional Human Resource Officer
RS	Regional Secretariat
TIIS	Training Institution Information System

Forward

Accurate information is among the key factors in facilitating proper planning and management of both human resource for health and Training Institutions. The Ministry of Health and Social Welfare acknowledge this fact thus it has developed two systems. These are Human Resource for Health Information and Training Information System. Both systems are part of larger and integrated system of the Ministry known as Health Management Information System. The essence of developing these systems was to address limitations related to the availability of timely and accurate data for various needs such as retention rates, retirement trends, educational levels, enrollment, output, available material resources and the like. Some specific problems were:

- i) Lack of well established, comprehensive and reliable ICT based system for tracking HRH information and Training information in the country;
- ii) Gaps and limitations on available information in all sources such as Health Management Information System, Professional Councils Data Bases and other sources, for the purposes of proper planning and decision making;
- iii) Difficulties in coordination and ascertaining accuracy and reliability of information collected from multiple sources; and
- iv) Challenge in analyzing the then available information to forecast demands and supply.

The process of collecting information related to HRH and training information involves different levels of health service delivery and Training Institutions whereby each level has different roles and functions as follows:-

- i) Health facilities, which are responsible for HRH data collection and onwards forwarding the data to Council Health Management Team (CHMT), located at District.
- ii) District level where CHMT is responsible for routine data gathering, entry and analysis using HRHIS software for utilization purposes at the District level and below. Data collected and analyzed at District level are then electronically forwarded to Regional Management Team (RHMT) where the HRHIS system is also available.
- iii) Regional level where the RHMT is responsible for analysis of HRH data using HRHIS software from all Districts for utilization and thereafter electronically forwarded to the Ministry Headquarters.
- iv) Training Institution is responsible for routine data gathering, entry and analysis using TIIS software for utilization purposes at the Institution. Data collected and analyzed at are then electronically forwarded to MOHSW
- v) Ministry Headquarters where the compilation of data from all regions and training information is done and analyzed using HRHIS and TIIS software to generate various reports including status of health workforce where system exists.

Given the various levels of facilities involved in implementing both systems i.e HRHIS and TIS, development of guideline for data utilization is important. The idea behind is to ensure that the generated data are utilized right at the facilities.

Monitoring and evaluation of the mentioned systems in terms of implementation progress and data utilization rate requires to be re done regularly. Reports generated need to be presented and shared in relevant for such as HRH Working Group and the Joint Annual Health Sector Review Meetings. Furthermore sensitization of health managers to ensure that the system is functioning, the availability of “Functional HRHIS and TIS” at relevant level and its usage is one among the checklist item within the National Supportive Supervision.

Ministry acknowledge envisaged challenges particularly those associated with system sustainability particularly such as continual System maintenance, continual capacity building for the system operators at all levels given that there will be system updates when need arises, demand for seriousness and commitment from all stakeholders; and Financial and partnership consolidation.

The guideline manual is compressive, it is divided into eight chapters on the key issues, these are planning, management, development, and Training Institutions Planning and Management. Each chapter provides specific information related to specific key issue on how to generate information for decision making by using the systems.

It is important that the system is supported as it has proved to be useful, furthermore it has received International acknowledgement that it is contributing to the achievement of Global Alliance objectives, which aims at facilitating the achievement of the Millennium Development Goal.

Dr. Deo Mtasiwa
Chief Medical Officer

Acknowledgement

The development of this guideline which is intended to guide and facilitate data utilization by using human resource for health information and training institutions information systems has been a result of concerted efforts by Ministry to ensure that data generated are used at the facility level. The need for such guideline is extremely important bearing in mind the expectation that is vested in the system, which includes the ability to generate information that will be used in planning and management of human resources.

The Ministry of Health and Social Welfare, therefore, appreciate the work done and wishes to recognize all those who contributed to completion of this guideline. In this regard I would like to acknowledge the support provided by Japan International Cooperation Agency (JICA). Firstly supporting the system design, installation and supportive supervision, secondly the support rendered in writing up the guideline. The input provided by some HRH Stakeholder is appreciated the great deal. The University of Dar es salaam had a major role in providing procedure as to how to generate information required as outlined in the guideline.

Furthermore the contribution provided by all Departments of Ministry and Social Welfare, National Institute for Medical Research, representatives from Training Institutions, representatives from I - TECH and Benjamin Mkapa HIV/AIDS Foundation. The inputs were extremely important as it provided basic information in which the guideline has evolved. It is my believe that since the guideline has been developed in a participatory manner its utilization will be easy particularly where it tells how to generate information from the system.

To all I say thank you.

Dr. Gilbert R. Mliga
Director Human Resource Development

Background Information

Human Resource for Health status is characterized by shortages in all health cadres, the shortage is estimated to be 62%. The described status has affected the access as well as quality of health services to the public due to the fact that health service delivery is labor intensive by nature. The magnitude of the disease burden due to new emerging diseases has made the HRH situation even worse. Ministry of Health and Social Welfare together with its stakeholders recognizes the importance of managing the limited number of human resource properly. One among strategies agrees to be established and implemented is the "Human Resource for Health Information System (HRHIS) and Training Institution Information System (TIIS):"

The need for the establishment a functional and compressive HRH information system was advocated as a priority area in a number of policy documents within the Ministry i.e. HRH Monitoring Guideline, 2003. It is in this document that HRHIS was planned and monitoring framework highlighted. Other documents are National Health Policy, 2007; Heath Sector Strategic Plan III, 2009; Council Comprehensive Health Plan Guideline, 2010; and the Five-Year Human Resource Strategic Plan, 2008. Its necessity was reiterated at the Joint Annual Health Sector Review Meeting held in 2008, which assessed the performance of the sector. It was at this meeting where a milestone decision was made requiring that "A functional Human Resource for Health Information System be established by September 2008." However, it was not until 2009 that the system became operational. So far, the system has been successfully rolled out to seven (8) regions out of twenty five (25) in the country and seven (7) Consultant Hospitals out of eight (8). A reliable data flow has been established (down from health facilities all the way to the national level).

These system is expected to facilitate, availability of a comprehensive and reliable HRH information in the country, Proper HRH planning and decision making, Coordination and linkage of HRH information collected from multiple sources; and Forecast demands and supply.

In order to ensure maximum and systematic utilization of the data generated by the systems, the data utilization guideline was seen as a necessary tool to enable the system user/ Health Managers to streamline HRH information from their health facilities as well as enabling Tutors to obtain information related to training. The information generated is expected to guide planning and management for quality health services at all level of health care. To achieve that, the guideline seeks to meet the following objectives:

- Using data to identify actual and potential problems of the Human Resource and Training institutions
- Assist in planning and budgeting at all level
- Improvement of information sharing between the health facilities, institutions and the central level
- Assist in monitoring academic progress

Brief description of the Systems and their features

The Ministry of Health and Social Welfare in effort to improve the management of human resource for health information developed two systems, which are: Human Resource for Health Information System (HRHIS) and Training Institution Information System (TIIS). The description of each system is as follows:

1. Human Resource for Health Information System (HRHIS)

The HRHIS is responsible for managing information related to the human resource for health. As most other systems, HRHIS inputs human resource data and processes them to output meaningful information for their management. The features within this system are meant for assisting the human resource managers in their human resource planning, management and development. The subsequent section gives a brief account of the system features.

Data Entry:

The system allows for the entry of the health personnel data for storage. Besides all other functionalities, this one already guarantees the repository of the human resource information in one place. In the data entry process, the system also provides mechanism for validation of the data before they are permanently stored. Validation of a single entry is very important in this case as it may have financial implications, welfares like security funds, retirements and others. The date of birth, for example, is a basis for the current age of staff, and it also provides the year of the staff's retirement.

Data Entry in the HRHIS case is in two folds;

Baseline Data Entry : Where all the employees are entered into the system. These are the basic employee's information including, names, date of birth, marital status, the unit of work, profession and others. These, provide the basis for Human Resource Planning.

Historical Tracking information: This is a section about keeping track of the employee regarding their movements from one unit to another, the different courses they have pursued, both long and short-term training.

Export and Import

This is a functionality that provides the users with the ability for information exchange. Exchange of data vertically, towards higher levels and horizontally, amongst each other, if need be. In the absence of guaranteed connectivity, this one helps to communicate data high up to the ministry. The mode is in such a way that it doesn't need extra resources. The system picks the selected data and compresses the file so that it can be easily attached with an email.

Data Analysis and Use

This is the basis of the system. It provides the users with the capabilities to analyze their data and make good use of it. It is in this part of the system that different aspects of the Human Resource management can be addressed including, attrition, retention, succession, projection and others. Different reports are generated by the system as will be seen in the later sections. These reports are categorized as whether they are record reports, aggregated reports or pivot tables' reports

Record Reports: These are reports related to individual staff in the health sector. They are useful when we want to know who is where and what their status is. It is very useful for individual staffs' management.

Aggregated Reports: These are reports, which aggregate staff information according to the required criteria. For example distribution of health staff by cadre or by designation or by employment status.

Pivot Table Reports: These are reports, which are some what outside the HRHIS software. They are developed to access the different parameters of human resource in different ways. Mult-dimension analysis

2. Training Institution Information System (TIIS)

Training Institutions Information Management System (TIIS) is a web based information system for management of training institution information, which includes collection, processing and dissemination of training institution data and information. The system aims to improve the way in which training institutions information is being collected, processed, analyzed and disseminated

TIIS has a number of modules including the administration modules, which allow the administrator to create system users, define and edit new cadres and courses and import data into the system. Data entry modules include course module, institution module for entering data related to contacts, lecturers, capacity, enrollment, assets and vehicles. Other data entry modules include the employee module with export and import functionalities to the Human Resource Health Information Systems (HRHIS), the student module that allows you to enter student information and monitor the progress of the students. The last but not the least, is the module related to reports generated from the system. This includes reports such as the overall health training institutions' contacts, courses, their capacities, employees, etc.

Main Objectives

The purpose of preparing this data utilization manual is to have in place a guide to assist users on how they can use data from HRHIS/TIIS in proper planning, development, management, for efficient and effective allocation and utilization of human resource at MoHSW, Training Institutions and at all levels of health service delivery.

This manual will assist users to obtain and use readily available data from the systems; to explain circumstances and HRH situation in a comparable way; to highlight challenges and areas that require more in-depth analysis; to aide in monitoring the HRH trends, students and institutions information in the country, and to communicate with and between policy-makers and stakeholders in the country.

Vision and Mission of the MoHSW

The Vision of the MoHSW is to have a health community, which will contribute effectively to an individual development and country as a whole. The mission is to facilitate provision of basic health services, which are proportional, equitable, quality, affordable, sustainable and gender sensitive. The Human Resource component in MKUKUTA requires to be fed by the national health policy.

Utilization of Data from HRHIS and TIIS

The first purpose of the information systems is to keep records of basic information and data collected at all levels of health care delivery. Although the collection and record of information and data has already been done in some areas as well as analysis, interpretation and presentation but the usage of data generated are often still weak, leading to a dichotomy between the providers and potential users of information. As it has been stressed that Information is needed to improve the policy, planning, production and management of human resources for health; therefore acquiring it is not an end in itself. Generally the information or data that will be generated from the systems will assist to do the following:

1. Generate evidence needed for informed decision making and policy development.
2. Initiate forum and network for sharing concerns and best lessons and examples in tackling HRH issues and challenges.
3. Create in-country consensus and national synergy and engagement among stakeholders.
4. Strengthen HRH governance and regulatory capacity at the country level
5. Use of indicators to monitor and evaluate performance of health workforce

The users of HRHIS and TIIS will be able to utilise the generated information and data for proper planning and management of the following HR key functions

3. HRH Data collection and flow from health facility to central level

All HRH data collected at different levels are necessary to be entered into HRHIS/ TIIS. Those HRH data need to be sorted and analyzed at the level data collection, and forwarded to higher authority for HR planning, development, and management.

The diagram below is describing HRH data flow from health facility to respected health authority, district to central, and communication with other systems.

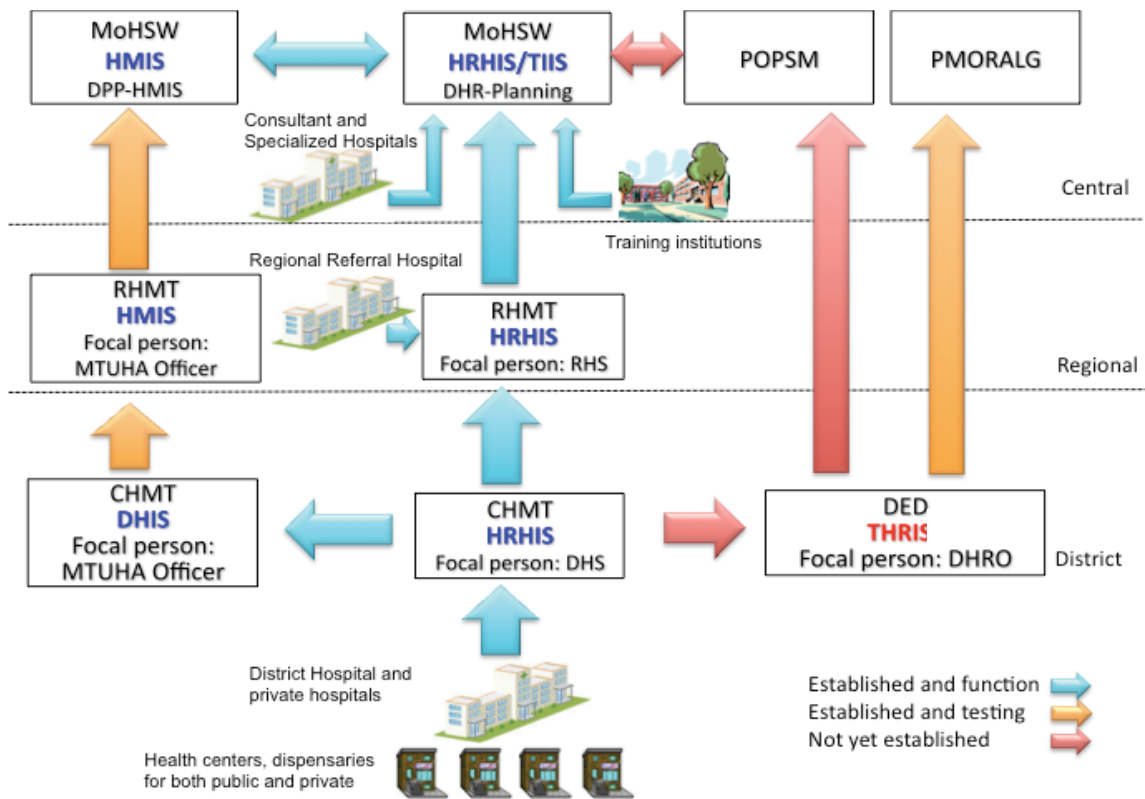


Diagram 1: HRH Data flow from districts to central

See ANNEX 1 and 2

4. Summarized table for Roles and Responsibilities on HRH Planning, Management and Development at each levels

This table describes the roles and responsibilities on HRH planning, management, and development at different levels. It is also describes What HRHIS can support those routine works at each levels. Clear understanding of the roles and responsibilities by authority at each level is important for HRH related activities regularly that contributes to improve HRH crisis in Tanzania.

	Central level	Regional level	District level	HRHIS/TIIS
HRH Planning				
HRH Projection	Setting Policies, standards and norms, Projection for MoHSW Departments, TIs, National HRH Plan through Strategic objective	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides HRH information for better planning and management
Staff balance	MoHSW Departments, TIs, follow up and evaluate Policies, standards and norms,	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provide HRH information for distribution of HRH
Succession	MoHSW Departments, TIs, National/ Consultants and specialized Hospitals.	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides HRH information for Succession planning
Registration	Registration of HRH professionals in the health sector. Follow – up on the professionals practices			The system can provides HRH information for professionals registration
Distribution	MoHSW Departments, TIs, follow up and evaluate Policies, standards and norms,	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides HRH information for distribution of HRH

	Central level	Regional level	District level	HRHIS/TIIS
Attrition	Oversees the trends of retention of all health professionals in the health sectors	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides information on the Attrition of Health professionals
HRH Management				
Allocation of budget for HRH employment	National/Consultant hospital staff	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides information on the Available HRH for evidence planning
Advertisement of posts	All health workers in the health sector	RHMTs, Regional Hospitals	CHMTs, District Health Facilities	The system can provides information on the HRH gaps
Recruitment of new HRH	Posting health workers to all levels as per approved permits Recruits health workers for the MoHSW departments and TIs	Receives posted health workers and recruits for the RHMTs and Regional Hospitals	Receives posted health workers and recruits for the CHMTs and District Health facilities	The system can provides information on the new hires and HRH gaps available
HRH promotion	Promotes health professionals in the MoHSW Departments and TIs	Promotes health professionals in the RHMTs and Regional Hospitals	Promotes health professionals in the CHMTs and District Health facilities	The system can provides information on the Staff promotion
HRH Development				
Running and Management of Training Institutions	Coordinate and provides resources (eg. HR, Finance) for the TIs Provides areas (eg. National Hospitals) for Practical Training	Provides areas (eg. Regional Hospitals) for Practical Training	Provides areas (eg. District Hospitals) for Practical Training	The system can provides information on the Tutors and students available in the TIs
Training/Production of HRH at pre-service training institution and universities	Provide trainings to health professions and production of health workers, provide capacity to the implementation of programmes, interventions to the health sector	Provide capacity to the implementation of programmes, interventions to the RHMT and Hospital employees	Provide capacity to the implementation of programmes, interventions to the CHMT and Health facilities	The system can provides HRH information trainings and HRH production

NATIONAL LEVEL

Introduction

The Ministry of Health and Social Welfare has been reforming the health sector for some time in order to realize the health vision that is to improve the health and wellbeing of all Tanzanians, with a focus to those at most risk and to encourage the health system to be more responsive to needs of the people.

Realization of the vision will be gradually be attained by the translation of the health policy into action through the implementation of Health Sector Strategic Plan. Among important dimension of the health sector reforms is the planning and management of human resource for health, which is in line with the ongoing reforms.

The Ministry of Health and Social Welfare is aware and recognize that HRH is a critical resource for the implementation of various program and intervention for the improvement of health. The planning and management of HRH will not be improved unless other initiatives such as development of a system that can track the trends of HR is in place. Based on the HRHIS and TIIS installed in health facilities, the systems will help users to plan and manage HRH in their respective stations.

Roles and Responsibilities of MoHSW on HRH Planning, Management and Development.

MOHSW has roles and responsibilities In Human Resource Planning, Management and Development as follows:

- Develop HR policies and strategies plans.
- Conduct advocacy on HR policies and strategic plans.
- Monitor and evaluate the implementation of the HR Policies and Strategic Plans.
- Collect HRH data from MOHSW (Vote 52), National/Consultant and Specialised Hospital staffs and enter into the HRHIS and TIIS.
- Encourage RHMT, CHMTs and TI's to collect HRH/TIIS data from all levels.
- Provide IT technical support to all levels (Central, Regional, District and TI's) by Central IT officer
- Provide supportive supervision to monitor usage and functionality of HRHIS and TIIS together with updating HR information/inventory and performs quality control on data collected and ensure good quality data produced.
- Compilation of various reports on status of health workforce from all regions and TI's, analyse and setting relevant indicators for different programmes on HRH.
- HRH planning and management of National/Consultant and Specialised Hospital staff.
- Prepare and publish annual HR Strategic Bulletin.
- Establish and maintains HRHIS and develop new and improve methods, ideas of data collection, processing, analysis and disseminations of data on HRH
- Assist in the training of directorate staff on M&E and data processing and analysis

1. HRH Planning at National level

1.1. Introduction

Different scholars, commentators and authors of management have come up with different definitions of HR Planning but according to HRH context, Human resource planning is the strategic and coherent approach to the management of an organization's most valued assets - the people working there who individually and collectively contribute to the achievement of the objectives of the Health service delivery. The HRH planning is one of the requirements of the implementation of MMAM (PHSDP). It aims at having the right number of qualified staff, skill mix, and right place at the right time and motivated staff. Expansion of training intake, recruitment and creating an enabling environment that will facilitate retention of health workers are some of the measures to be undertaken.

1.2. Background of HR Planning within the Health Sector

The health sector in Tanzania examine human resource planning with a view of identifying key issues and the main obstacles hindering improvements in the planning and development of human resources for the public service.

Human resources play critical roles in delivering public services and in achieving the socio-economic development goals. Accordingly Government planners, decision makers have to ensure that their countries have capable human capital - the right number of people, with the right skills, attitudes and ethics. The health sector must undertake human resource planning (HRP) and human resource development (HRD). The execution of human resources management in Tanzania, provide us with a number of lessons to be learned: Strategic Human Resource Planning at National Level is crucial to achieving national development agenda; Investment in human resources (HRD and HRP) need to be the key priority; Linking human resources planning and strategic plans is very essential; Improve organizational arrangement for HRP; The need to enhance planning and management capacity; Improved and standardized HRP methods; and the need for management support and commitment to HRD issues. The process of HR planning is as shown below:

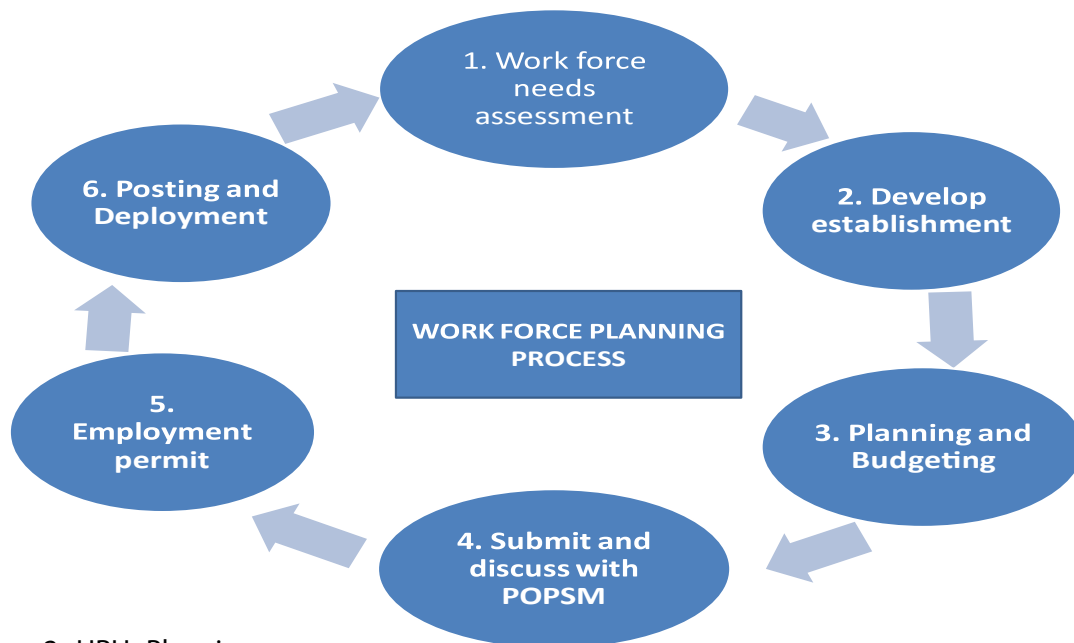


Diagram 2: HRH Planning process

1.3. HRH Projections

Human Resource Projection is the process by which an organization ensures that it has the right number and kinds of people capable of effectively and efficiently completing those tasks that are in direct support of the organization's mission and strategic goals. HRH projection in the health sector has been decentralized to lower levels and remained with a major role of posting human resource for health to those levels from the graduates of the health training institutions. The ministry currently in the HRH area remains with the projection of health workers required at each level and the enrollment of students joining the Training institutions in the country.

Aim:

The aim of this unit is to help users of HRHIS/TIIS to produce the required HRH information for planning and management of human resource.

Objectives:

At the end of this unit the user should be able to:

- Establish the current and future HRH requirement
- Undertake job analysis, job description, and job specification
- Identify major sources of potential job candidates
- Develop strategies to fill the gap with numbers of additional workers and skills at different levels.

Activity:

To obtain a Human Resource Projection plan, managers are required to assess the number of employees who will be retiring soon so as to plan for other employees who will be remaining to make sure that they have same professional levels to those who are leaving.

This can be done on HRHIS by generating a retirement distribution report, which gives number of employees who are retiring in the ten coming years. The following line instructs how to do that

Main Menu → Reports → Aggregated Report

The following window will appear

The screenshot shows the 'Aggregated Reports' window. The 'Select Organisation:*' field is a tree view with 'Ministry Of Health' selected. Below it, the 'Use Data for Selected Unit and lower levels:' checkbox is checked. The 'Select Form:*' dropdown is set to 'Public Employee Form'. The 'Fields One:*' dropdown is set to 'Employment Status'. The 'Field Two:*' dropdown is set to 'Use only the above Field'. The 'Type of Graph:*' dropdown is set to 'Bar Graph'. A 'Generate Report' button is located at the bottom right of the form.

Select the right options as shown in the figure above to obtain the data you desire.

- Organization Unit: If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- Use Data for Selected Unit and lower levels: This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- Select Form: Pick a form through which staff have been entered

- **Fields One:** Human Resource Projections in the HRHIS can be obtained through the Retirement Distribution Per Year field
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



This is the retirement distribution for the next ten years. If it is 2011 the projection will go to 2021, if it is 2013 the projection will go up to 2023

To get the retirements by cadre opt for the “Export to Excel By Cadre” and you will see the retirements by Cadre.

1.4. Staff Balance

Staff balance is a state of equitable distribution of human resources according to health demands. The benefit of having proper staff balance among other factors is that the health system will be strong hence provision of quality health services.

Aim:

The aim of this unit is to provide highlight on issues related to staff balance, which can only be explained by the statistics generated by HRHIS and TIIS systems. Among the tasks performed includes deployment of an appropriate employees to the appropriate workstation at the appropriate time in order to strengthen the provision of health services

Objectives:

At the end of this unit the users should:

- Understand the concept of staff balance “Equilibrium” at national level
- Understand how the understaffing and overstaffing can affect the delivery of health care services
- Be able to address the understaffing and overstaffing problem for better provision of health care.
- Updating HRHIS/TIIS data periodically.
- Compute understaffing/overstaffing rate by using HRHIS/TIIS.t

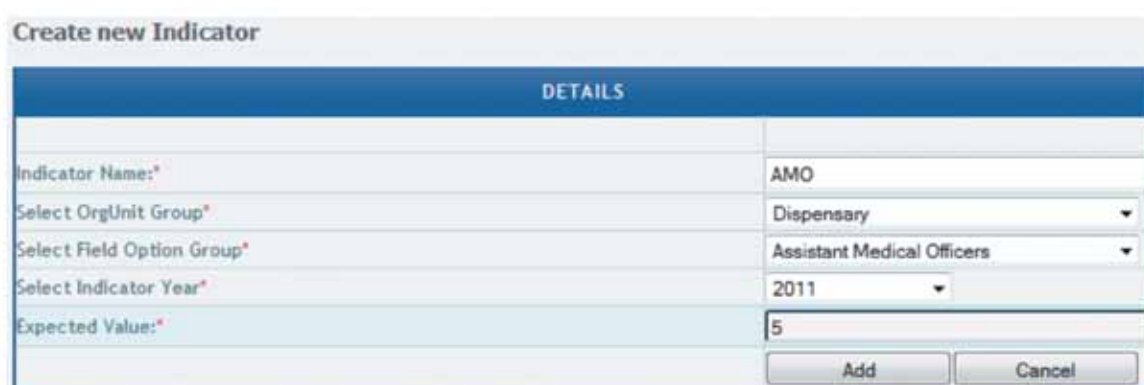
Activities:

Under staffing or over staffing is obtained by comparing the required number of employee for a particular carder with the actual number of employee for that carder available. Achieving this, two stages are to be undertaken;

Defining the requirements: This is the basis for the measurement. Knowing whether we have fewer staff, we need to know what we need – staffing levels. This involves defining the number of staff for each cadre and in each type of health unit. Obviously, the number of staff required for the health centre is different from those in health facilities. To do that you follow the following instructions;

Main Menu → Indicators → Indicators then “create new”

The following window will appear giving you an opportunity to provide the staffing levels



The screenshot shows a software window titled "Create new Indicator" with a "DETAILS" header. The window contains several input fields and buttons:

DETAILS	
Indicator Name*	AMO
Select OrgUnit Group*	Dispensary
Select Field Option Group*	Assistant Medical Officers
Select Indicator Year*	2011
Expected Value*	5
<input type="button" value="Add"/> <input type="button" value="Cancel"/>	

Basically, this is indicating the number of staff/employee required for a specified cadre in a certain facility level (Dispensary, Health Centre). The system will then compute number of staff available for that particular carder for a user to make comparison between employee available vs. required to obtain if there is overstaffing or understaffing by using pivot tables.

Viewing the Staffing: after one has set up their staffing levels, then the system will compare the requirements and what is available. How to view it? There is a data analysis Ms Excel file provided which has a number of worksheets. One of which is the Over-Under Staffing. See the results. Generally;

Data Analysis File → Over-Under Staffing

ministry	Ministry of Health	<input checked="" type="checkbox"/>
regions	Pwani	<input checked="" type="checkbox"/>
districts	Mkuranga	<input checked="" type="checkbox"/>
Values		
Row Labels	<input checked="" type="checkbox"/> Required Employee	Available Employee
<input checked="" type="checkbox"/> Hospitals	45	48
<input checked="" type="checkbox"/> Mkuranga hospital	45	48
Assistant Medical Officers	15	1
medical doctor	10	4
Nurses	20	43
Grand Total	45	48

As seen from the above chart, there are possibilities to select the desired organization unit. Is it the ministry of health you want, a particular region or a health facility?

1.5. Succession

Succession is a process for identifying and developing internal people with the potential to fill key positions in the organization, Succession planning increases the availability of experienced and capable employees that are prepared to assume these roles as they become available.

Aim:

The aim of this unit is to help user to establish effective succession planning by using HRHIS/TIIS systems.

Objectives:

At the end of this unit the users should:

- Identify those with the potential to assume greater responsibility in the organization
- Provide critical development experiences to those that can move into key roles
- Engage the leadership in supporting the development of high-potential leaders
- Develop succession plan

Activity:

Activities that include these fundamental area:

- Identify key roles for succession or replacement planning
- Define the competencies and motivational profile required to undertake those roles
- Assess people against these criteria - with a future orientation
- Identify pools of talent that could potentially fill and perform highly in key roles
- Develop employees to be ready for advancement into key roles - primarily through the right set of experiences.

Follow the above steps (section 1.3 HRH projections: activity) for generation of the Retirements Distribution per Year to have Human Resource Succession.

1.6. Registration:

Registration for HRH is used to identify fully qualified staff in a particular profession through a recognized registration Councils of respective professions such as Medical Council of Tanganyika, Nurse and Midwife Council, Pharmacy, Environmental Health Council etc. In order to gain recognition and respect for human resources as a mainstream profession, HR practitioners are prepared to meet the same stringent standards and ethical accountability that all other professions subscribe to. Professional registration achieves this goal by:

- Raising accountability
- Lending credibility
- Affording protection against pressure to act unethically
- Leading to higher individual aspirations
- Engendering pride in and protection of stature of the employee

Aim:

The aim of this unit is to assist users of HRHIS and TIIS to get qualified number of staff from their registration data and ensure provision of quality services through qualified staff in the health facilities and institutions.

Objectives:

- To assess the registration stock of health professions
- To meet standards and protect the health professions
- Identify fully qualified personnel who are licensed to practice

Activities:

- Use HRHIS and TIIS employees data to list out the registered employees
- Councils to take action for any anomalies.
- Avail opportunities to your staff to attend in recognized professional certifications leading to registration

1.7. Distribution

Human Resource Distribution is the process of balancing the institutional employees and tasks in terms of the required posts according to the functional areas of the organization. At central level, Ministry is responsible for distribution of staff in the health facilities, which are under its mandate (Vote 52). Due to decentralization policy some of staff who are working in the health sector are distributed by other authorities i.e. PMORALG.

Aim:

This unit aims at equipping the Ministry officials with a picture/pattern of distribution of HRH countrywide.

Objectives:

By the end of this unit, members of CHMT should be able to:

- Understand distribution of HRH in the country
- Describe how mal-distribution of HRH can occur in the country
- Explain effects of mal-distribution of HRH on health service delivery
- Demonstrate on how HRHIS and TIIS can be used to generate various information related to health workers availability by place (e.g. health facilities) within the health sector.

Activities:

- Generate different reports related to HRH availability using HRHIS
- Re-allocate and post health workers to the health facilities appropriately

To obtain a Human Resource Distribution, managers are required to assess the number of employees in each organization unit (facility, district, region etc) by their carder and for each carder what is available against what is required.

This can be done on HRHIS by generating an aggregated report based on Present Designations, which gives number of employees in each unit for each carder. The following line instructs how to do that

Main Menu → Reports → Aggregated Report

The following window will appear

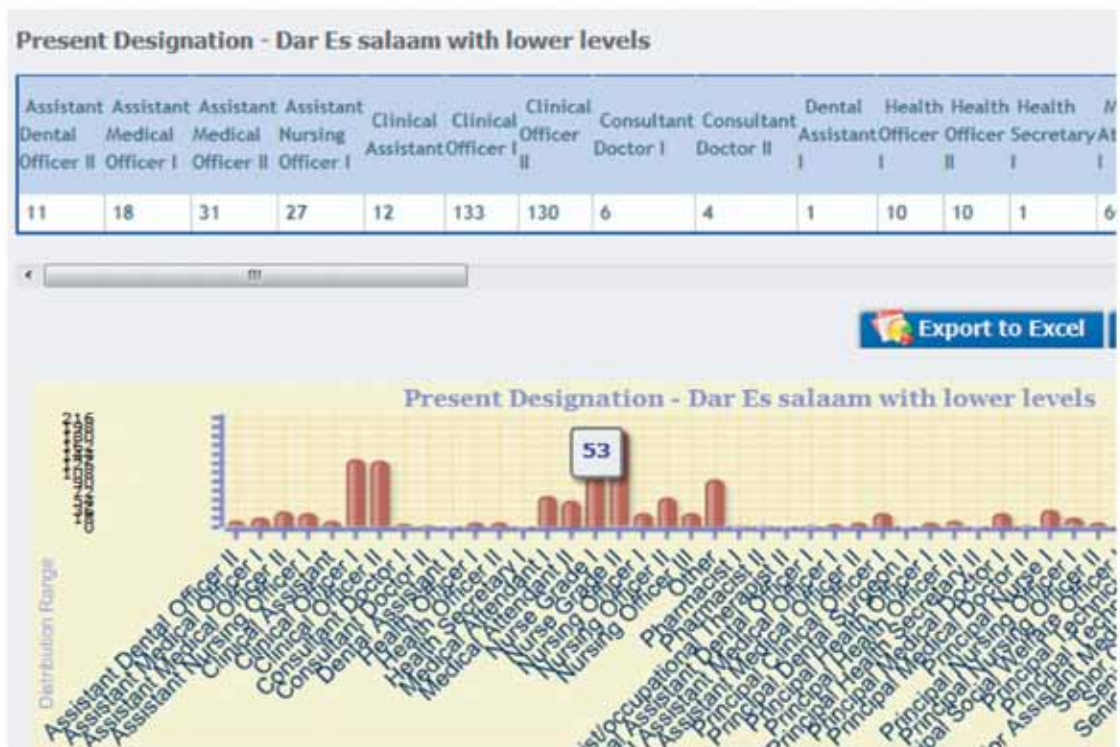
The screenshot shows a web application window titled "Aggregated Reports" with a sub-header "CREATE A REPORT". The form contains the following elements:

- Select Organisation:** A tree view showing a hierarchy starting with "Ministry of Health", followed by regions like "Morogoro", "Pwani", "Tabora", "Kilimanjaro Region", and "Dar Es salaam", each with its respective hospitals or institutes listed below.
- Use Data for Selected Unit and lower levels:** A checkbox that is checked.
- Select Form:** A dropdown menu with "Public Employee Form" selected.
- Fields One:** A dropdown menu with "Present Designation" selected.
- Field Two:** A dropdown menu with "Use only the above Field" selected.
- Type of Graph:** A dropdown menu with "Bar Graph" selected.
- Generate Report:** A button at the bottom right of the form.

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Select Form:** Pick a form through which staff have been entered
- **Fields One:** Human Resource Distribution can be obtained by selecting Present Designation
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



1.8. Attrition

Tanzania, like many other countries in sub-Saharan Africa, has been affected by shortages of health workers in the health sector. Data on the rates and leading reasons for health workers attrition in the health sector are key in developing effective, evidence-based planning and policy on human resources for health. Attrition is a Human Resources Management term that describes the rate at which a workforce is gradually reduced due to employees leaving an organization through normal means such as retirement, resignation, brain drain and death. Attrition is a useful indicator for reminding managers to develop appropriate policies, to retain and replace staff in the health sector.

Aim:

The aim of this unit is to highlight the concept of Attrition in the health sector for the purpose of determining better ways of overcoming it.

Objectives:

At the end of this unit the user should:

- Understand the concept of attrition in the health sector
- Understand how attrition can affect the delivery of health care services
- Understand the magnitude of attrition and how to address it.
- Be able to use the HRHIS/TIIS for proper planning and management of HRH

Activity:

Attrition report can be obtained by generating an aggregated report for Employment Status, which provides number of employees on duty and those who are off duty due to various reasons. The interest is to those who are NOT on duty.

Using this report, it will be easy to identify reduction of employee and what are the reasons. Reasons for HRH attrition can be Retirement, Death, Transferred, or on Leaves. Follow the following guide, to achieve the attrition and their reasons

Main Menu → Reports → Aggregated Report

The following window will appear



The screenshot shows a web application window titled "Aggregated Reports" with a sub-header "CREATE A REPORT". The form contains the following fields and options:

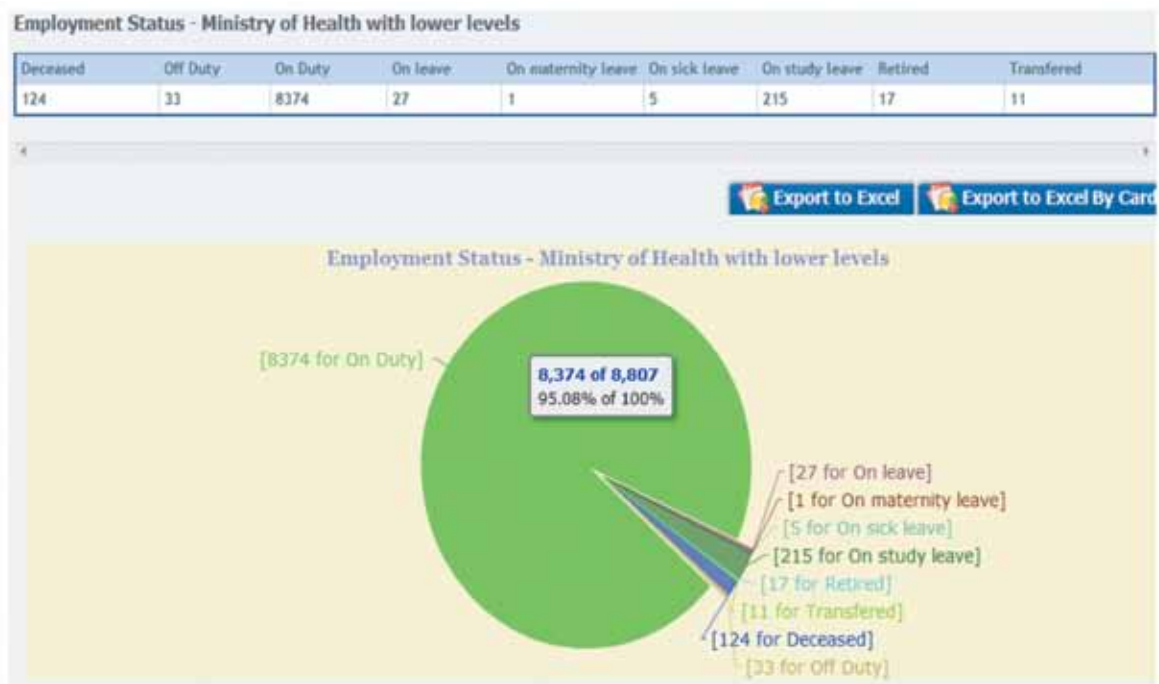
- Select Organisation:** A tree view showing a hierarchy starting with "Ministry of Health", which is expanded to show several regional and hospital-level units including Morogoro, Pwani, Tabora, Kilimanjaro Region, and Dar Es salaam.
- Use Data for Selected Unit and lower levels:** A checkbox that is checked.
- Select Form:** A dropdown menu set to "Public Employee Form".
- Fields One:** A dropdown menu set to "Present Designation".
- Field Two:** A dropdown menu set to "Use only the above Field".
- Type of Graph:** A dropdown menu set to "Bar Graph".
- Generate Report:** A button at the bottom right of the form.

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country

- **Select Form:** Pick a form through which staff have been entered
- **Fields One:** Attrition in the HRHIS can be obtained through the Employment Status field
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Pie Chart

The following figure shows an example of the output



If you just put a pointer on the chart, different explanations will be offered. Attrition is then simply obtained through establishing the difference between all assigned staff and those on duties, thus

Attrition = all assigned staff – staff on duty

For example, the above shows that the number of staff on-duty is 95.08%, then the attrition can be computed as;

Attrition = 100% – 95.08% = 4.92%

A more detailed attrition can be obtained on Pivot-Tables file where specific reports can be obtained like which carders.

2. HRH Management at National level

2.1. Introduction

Human resource management can be summed up as the integrated set of roles, functions, decisions, systems and processes in an organization that meet the needs and support the work performance of employees in order to accomplish the mission, goals and strategies of the organization.

2.2. Back Ground Information

Human resource management function at central level is a core responsibility of Directorate of Administration and Personnel. This function is crucial in the health sector in order to ensure that human resources will be strategically identified, recruited and positioned to work effectively and efficiently at different levels of service delivery. It will ensure that employees working in the system will receive support and motivation to perform at the highest level and will be treated fairly. It also ensures that employees will achieve results in the workplace and successfully adapt to and participate in change as it occurs.

Health managers need up-to-date and accurate information on numbers of employees, their salaries, and positions held, professional qualifications, managerial and supervisory experience, training received their capacities, their professional development needs, and their seniority and contract terms. The HRHIS and TIIS has been introduced to facilitate the availability of mentioned data, the utilization of the information from these systems will enable rational decision making for quality health service delivery

2.3. Recruitment

Recruitment is the process of searching the candidates for employment and stimulating them to apply for jobs in the organization?

Under the current decentralized system, regions and districts have the mandate to identify and fill existing staff vacancies, however low human resource management capacity has contributed to slow recruitment process, delay in staff placement and slow promotion process. In order to fast track employment process MoHSW has assumed the responsibility of advertising and posting new employees to various employee authorities. The following diagram illustrate the process:

Aim:

The aim of this unit is to enable users of HRHIS and TIIS at national level to generate information related to recruitment in order to utilize the information for determining the number of HR required basing on cadre to fill the existing gap.

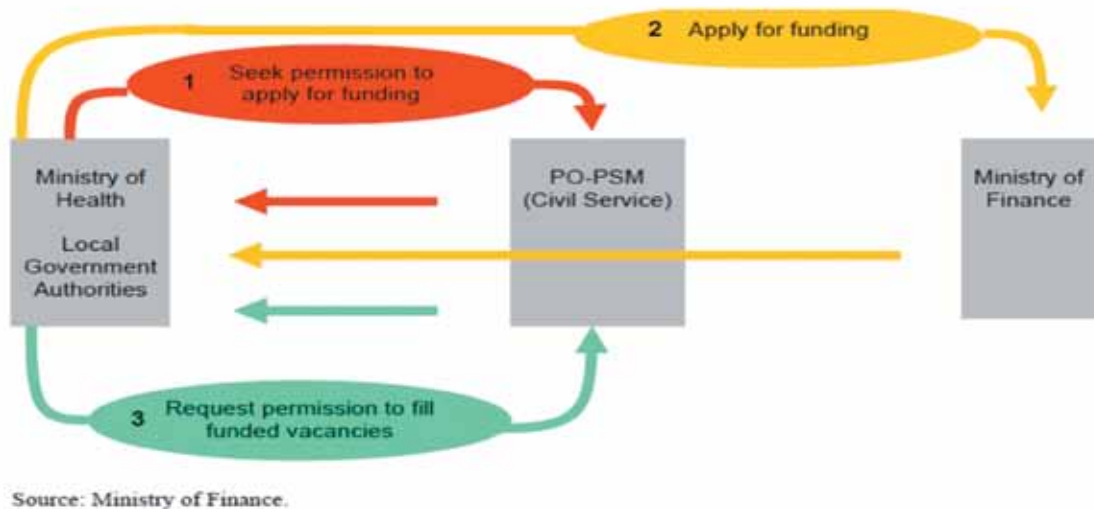


Figure 2: The recruitment process

Objectives:

At the end of this unit the users should ensure:

- Vacant posts filled.

Activities:

- Assess the HRH stock
- Determine HRH requirements
- Advertise and post qualified employees to relevant authorities to fill the gap.

Recruitment can be easily done if by assessing availability of employees by their carder as instructed in Section 1.7 (Human Resource Distribution) of this document. By obtaining amount of employee carders it will be easy to plan for recruitment.

2.4. Deployment

Deployment is the process of placement of human resources among various health care facilities to maximize the utilization of available personnel in order to achieve organization goals. Deployment in the health sector is hampered by working environment diversity i.e. rural/remote areas is

Aim:

The aim is to improve the deployment procedures for solving the health worker mal-distributions.

Objectives:

At the end of this unit the users of HRHIS and TIIS will be able to:

- Generate information related to deployment status at all levels
- Activities:
- Assess and evaluate the work force distribution
 - Generate report
 - Take necessary action if any anomalies occur

Procedure:

The pivot tables can do a better distribution analysis and so you are advised to use the Pivot tables

Data Analysis File → HR Deployment

2.5. Retention

Employee retention refers to policies and practices organization use to prevent valuable employees from leaving their jobs. To counter the significant shortage of qualified professionals, the GoT raised salaries for the health services staffs effective in 2006, P4P strategies, support payment of salaries to faith based organizations, improved working environment, promotion of health workers just to mention few.

Despite the efforts done, the ability to retain employees is a challenge due to socio-economic disparities and other work environment challenges that put off professionals and thereby affecting their retention, particularly in the rural areas.

An incentive package and retention strategy need to be developed that will take into account the need to improve performance and management. The use of attractive differential incentive packages including preferential career development should be considered when designing the incentive package.

Aim:

The aim is to generate information that will help forward- thinking pragmatic users to start tackling the employees- retention problems in a creative and efficient manner.

Objectives:

At the end of this unit the users should come up with alternatives to improve the retention of employees in their respective areas by looking at the following:

- Ensure maximum retention of health workers at all levels.

Activities:

- Assess the major issues about employee-retention like why do people choose to leave the health care sector
- Develop retention strategies plan

Procedure:

The pivot tables can do a better Staff Retention analysis and so you are advised to use the Pivot tables

regions	Pwani				
districts	Mkuranga				
Prof	(All)				
firstappointment_year	2007				
Count of name	Column Labels				
Row Labels	Off Duty	On Duty	On study leave	Grand Total	
Mkuranga hospital	0	15	2	17	
Binga Dispensary	0	2	0	2	
Kisiju Health Centre	0	2	0	2	
Magawa Dispensary	0	1	0	1	
Mlamleni Dispensary	0	1	0	1	
Msorwa Dispensary	0	1	0	1	
Msufini Kidete Dispensary	0	1	0	1	
Nyamato Dispensary	0	1	0	1	
Vikindu Dispensary	1	1	0	2	
Grand Total	1	25	2	28	

Using Pivot Report → Staff Retention, you will be able to select which units do you want to assess data and select Year of appointment and then you can obtain a report based on that year of appointment, how many staff are still on duty and how many have left their work stations due to various reasons hence you can analyse retention rate.

3. HRH Development at National level

3.1. Introduction

It is concerned with the provision of learning, development and training opportunities in order to improve individual, team and organizational performance. HRD is essentially a business-led approach to developing people within a strategic framework. At central level, this function is the core responsibility of Directorate of HRD.

3.2. Carrier development

Carrier development is a sequence of positions held by a person during his or her life time. The organization or users of the HRHIS/TIIS can use the systems to plan for Career development and this will help them to match employee goals with the service needs of the health care facilities in support of workforce development initiatives.

Aim:

The aim is to enable HRHIS/TIIS users to plan for the progress of the employees from a present state of understanding, and capability of future state in which higher-level skills, knowledge and competencies are required. It takes the form of learning activities that prepare people to exercise wider or increased responsibilities.

Objectives:

The objective of this unit is to help users to:

- Ensure carrier development of staff practice is in place
- Enhance employee's carrier development.

Activities:

- Assess the carrier development status of staff in different levels
- Develop a carrier development plan and link the organization's needs to employee career goals.
- Design career paths and employee development programs that help employees reach their goals.

Procedure:

To identify skills distribution one needs to look into what is termed profession in the HRHIS. To do that, follow the following procedures;

Main Menu → Reports → Aggregated Report

The procedures in this case are not in any way different. Only that this time you will have to specify profession as field one. Let field two contains Use only the above. Go ahead and define the rest of the fields and say generate report. If you selected bar graph, you will get something like this



3.3. Training plan

It is a written outline of knowledge, attitudes and skills the learner should develop during the work-based learning. It is developed through an analysis of the tasks and duties needed to be successful in the occupation for which a trainees is.

Aim:

The purpose of training plan is to have in place the document that will guide systematic analysis of the skills gap and planned instruction activities to promote learning.

Objectives:

The objectives of this unit are to enable users of HRHIS/TIIS to:

- Systematically rationalize skills development of employees.

Activities:

- Assess and evaluate the skills stock
- Determine skills gap and its causes
- Develop training plans
- Ensure that the training is provided in all required skills
- Ensure coordination of the trainings

Procedure:

To obtain a Training Plan, one needs to assess how many employees were going for training in each year. To do that, follow the following procedures;

Main Menu → Reports → Other Reports



The screenshot displays a web application interface titled "History and In-Service Reports". Below the title is a section labeled "CREATE A REPORT". The form contains several fields and a button:

- Select Organisation:***: A dropdown menu with "Ministry of Health" selected.
- Use Data for Selected Unit and lower levels:**: A checked checkbox.
- Select Type of Report:***: A dropdown menu with "In Service Training Report" selected.
- Select Form:***: A dropdown menu with "Public Employee Form" selected.
- Select Field:***: An empty dropdown menu.
- Type of Graph:***: A dropdown menu with "Bar Graph" selected.
- Generate Report**: A button at the bottom right of the form.

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Type of Report:** Select In-Service Training Report
- **Select Form:** Pick a form through which staff have been entered
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



3.4 Enrollment and output

Enrollment of health professionals' students in the health sector is characterized by low number of students compared to demand of the qualified health workers in the health system. The training institutions' capacity is underutilized due to the dilapidated infrastructure as well as limited number of teaching staff.

Aim:

The aim of this unit is to enable users of TIIS to generate information to guide decision-making on the student's enrollment and output of the skilled health workers.

Objectives:

The objective of this unit is to have rational decision on enrollment and output of students

Activities:

- Generate information related to enrollment and output from the system
- Assess and evaluate enrollment and output trends
- Basing on the findings take necessary actions

REGIONAL LEVEL

Introduction

At Regional level there is The Regional Health Management Team (RHMT) which is charged with the responsibility of overseeing the planning, management and development of health services in the region. It is the team that advises the Regional Secretariat on matters related to ensuring improvement and maintenance of the health status of the population within the region through advice on the overall planning, implementation, delivery, monitoring and evaluation of quality health care within the region. The team is there to ensure that health related planning and interventions are therefore conducted in an integrated and holistic manner to involve all stakeholders and resources within the region.

The RHMT, which is an integral component of the Regional Secretariat, is there to ensure that all this is conducted within the overall framework of national policies, guidelines, set standards and within the context of the health sector's role towards the reduction of poverty and economic development, across the region within the local Councils.

Roles and Responsibilities of RHMT and RS on HRH Planning, Management and Development

Regional Health Management Team (RHMT) and Regional Secretariat (RS) office has the responsibility to provide the necessary input requirements for effective planning and delivery of health services such as accurate data, new information and capacity development of CHMT members and all Health service providers in public and private facilities.

The specific roles and responsibilities of RHMT and RS office in Human Resource Planning, Management and Development are as follows:

- Coordinate Health services in the Region.
 - o Advise for equitable distribution of all resources (NGO, vertical initiatives, and others) between the councils
- Support Human resource management
 - o Strengthen HRH management
 - o Support LGAs to develop innovative and creative retention and incentive schemes for the staff
 - o Identify and collate LGAs and Regional Referral Hospital training needs, use them in planning, and submit to zonal training centers and other relevant authorities
 - o Monitoring, analyze and evaluate data collected from councils
 - o Report and provide feedback to councils and central level
 - o Conduct Operational research

- o Collect HRH data from Regional Referral Hospital and enter into the HRHIS
- o Encourage CHMTs to collect HRH data from all health facilities in both public and private sector
- o Accumulate HRH data from jurisdiction districts and forward them to central HRHIS server
- o Provide IT technical support to districts by Regional IT officer
- o Provide supportive supervision to monitor usage and functionality of HRHIS
- o Provide logistic support to HRHIS Monitoring team from MoHSW
- HRH Planning and management of RHMT members and co-opt members
- HRH Planning and management of Regional Referral Hospital staff
- Conduct innovative supervision
- Facilitate capacity development in interpretation of policies, guidelines..
- Disseminate and support the translation of the policies, strategies and guidelines of the MOHSW / PMO-RALG by CHMTs

1. HR Planning at Regional level

1.1. Background of HR Planning at Regional level

There has been a growing concern that Health services delivered at the health facilities are not to the expected standards and therefore, it has become a priority to take into consideration health delivery services have to be improved. In order to tackle this problem, HR Planning is one of the components, which can contribute to improvement of Health delivery services.

According to Permanent Secretary of POPSM, Human Resource Planning, Government planners and decision makers have to ensure that all ministries have capable human capital i.e. the right number of people, with the right skills, attitudes and ethics.

Regional Health Management Team (RHMT) and RAS office has roles and responsibilities in Human Resource Planning, Management and Development as follows:

- Collect HRH data from Regional Referral Hospital
- Encourage CHMTs to collect HRH data from health facility in both public and private sector
- Accumulate HRH data from jurisdiction districts and forward them to central HRHIS server
- Provide IT technical support to districts by Regional IT officer
- Provide supportive supervision to monitor usage and functionality of HRHIS
- Provide logistic support to HRHIS Monitoring team from MoHSW

In order to facilitate proper planning, Ministry of Health and Social welfare has developed the Human Resource for Health Information system, which will help the to perform their functions. RHMT users of the system will be guided by this very manual which comprise of the following sections:

1.2. HR Projections at Regional level

HR Projection in the Health Sector at the regional level is a process of forecasting the future for Human Resource and taking appropriate actions, which include planning for annual required number of staff.

HR Planning in many regions is currently cumbersome due to the lack of reliable data / information of health care workers. By using HRHIS, RHMT/RS can be in a position to make appropriate projections of staff.

Aim

The aim of this session is to enable RHMT / RS to use HRHIS to carry out HR projections.

Objectives

By the end of this unit users will be able to:

- Ensure the right number of required staff, at the right time, at the right place, with the right skills.

Activities

- Establish HRH requirement yearly
- Identify major sources of potential job candidates.
- Develop strategies to fill the gap with numbers of additional workers and skills at different levels.

Procedure for running Report:

To obtain a Human Resource Projection plan, managers are required to assess the number of employees who will be retiring soon so as to plan for other employees who will be remaining to make sure that they have same professional levels to those who are leaving.

This can be done on HRHIS by generating a retirement distribution report, which gives number of employees who are retiring in the ten coming years. The following line instructs how to do that

Main Menu → Reports → Aggregated Report

The following window will appear

The screenshot shows the 'Aggregated Reports' window with the following configuration:

Field	Value
Select Organisation:	Ministry of Health Morogoro Pwani Kibaha DC Bagamoyo Rufiji Mafia Kisarawe Mkuranga Kibaha TC Tabora Ocean Road Cancer Institute Muhimbili Orthopedic Institute
Use Data for Selected Unit and lower levels:	<input checked="" type="checkbox"/>
Select Form:	Public Employee Form
Fields One:	Retirement Distribution Per Year
Field Two:	Use only the above Field
Type of Graph:	Bar Graph

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Select Form:** Pick a form through which staff have been entered
- **Fields One:** Human Resource Projections in the HRHIS can be obtained through the Retirement Distribution Per Year field
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



This is the retirement distribution for the next ten years. If it is 2011 the projection will go to 2021, if it is 2013 the projection will go up to 2023

To get the retirements by cadre opt for the “Export to Excel By Cadre” and you will see the retirements by Cadre.

1.3. Staff Balance

Staff balance is state where by staff available is equal to the staff required as per staffing guideline. Staffing in the health sector is not distributed evenly, many regions especially hard-to-reach regions are understaffed and others especially urban areas are overstaffed. Among the main factors that leads to understaffing and overstaffing in some facilities in the regions is due to mal-distribution, lack of suitable qualified staff, low output from training institution, and poor working environment.

Aim

Is to guide RHMTs / RS to use HRHIS to do proper/rational distribution of HR

Objectives

By the end of this unit the users of HRHIS i.e. RHMT/RS will be able to ensure staff balance in the region.

Activities

- Generate and analyze report from HRHIS on the number of staff in the region using different criteria (e.g. recruitment / placement)
- Generate and analyze report from HRHIS on the number of staff under employed
- Make appropriate decisions based on the analyzed reports above

Procedure

Under staffing or over staffing is obtained by comparing the required number of employee for a particular carder with the actual number of employee for that carder available.

Data Analysis File → Over-Under Staffing

Row Labels	Required Employee	Available Employee
Hospitals	45	48
Mkuranga hospital	45	48
Assistant Medical Officers	15	1
medical doctor	10	4
Nurses	20	43
Grand Total	45	48

As seen from the above chart, there are possibilities to select the desired organization unit. Is it the ministry of health you want, a particular region or a health facility?

1.4. Succession

In order for the Region to survive RHMT / RS should put in place a contingency plan for every assets of that organization. Since employees are the most important assets of the region, contingency planning for this asset is crucial which imply that it's planning

is paramount for survival of any region. Succession planning helps the regions to be prepared with the right people to take on important positions when they fall vacant.

Aim:

The main aim of this unit is to explore different ways of using HRHIS by RHMT / RS to ensure that as far as possible suitable officers are available to fill vacancies created by promotion, retirement, death, leaving, transfer etc.

Objectives:

At the end of this unit RHMT/RS should be able to:

- Assess the status of staff in relation to their posts
- Use HRHIS to identify succession indicators
- Plan for future succession (train junior staff, delegation, etc)

Activities:

- Identify critical positions that needs a successor by using HRHIS
- Identify and evaluate possible candidates within the region for the identified positions by using HRHIS
- Implement succession plan.

Procedure:

Succession, in a nutshell, is a bit tricky to compute. However, it might just worth it to only know how much effort we need to put in for staffing, based on the retirements. The above retirements distribution can therefore, assist. Follow the steps for generation of the Retirements Distribution per year to have Human Resource Succession.

1.5. Distribution

Distribution of HRH is a process of allocating and posting of health workers to health facilities available different geographical areas in the Region.

The unit focuses on distribution of HRH in the region and also reflects on the effect of improper distribution of staff in the region. Imbalances of staff distribution between urban and rural settings still persist and the critical shortage is more evident in the hardship working environment areas in many regions in Tanzania. Understanding of the information on HRH distribution within the region is important to members of RHMT/RS to be able to appropriately allocate staff to right place, with right number and skills, and at the right time.

Aim:

To ensure appropriate staff distribution based on the staffing level in the region.

Objectives:

At the end of this session users should be able to:

- Assess the distribution of staff in the region
- Develop strategies for evenly distributions of Staff

Activities

- To generate reports through HRHIS on the distribution of HRH in the Region.
- Distribution of staff according to staffing level

Procedure:

The pivot tables can do a better distribution analysis and so you are advised to use the Pivot tables

Data Analysis File → HR Distribution

Numbers of staff in different units can be viewed and establish the current HR Distribution. Within the system, distribution can be computed the hard way. It involves the following stages.

- a. Select record report and fill in the necessary information
- b. Export all the records to MS Excel
- c. Sort based on the organization units

The following section details of these steps.

Main Menu → Reports → Record Report

If one opts for this option then the following window will appear and you need to provide the right information.

Reports

CREATE A REPORT

Select Organisation:*

- [-] Ministry of Health
 - [-] Morogoro
 - [-] Pwani
 - [-] Kibaha DC
 - [-] Bagamoyo
 - [-] Rufiji
 - [-] Mafia
 - [-] Kisarawe
 - [-] Mkuranga
 - [-] Kibaha TC
 - [-] Tabora
 - Ocean Road Cancer Institute
 - Muhimbili Orthpeadic Institute

Select Form:*

Public Employee Form

-SELECT-

Public Employee Form

Hospital Employee Form

Private/FBO Employee Form

Institution Employee Form

Use Data for Selected Unit with lower levels:

- **Organization Unit:** Select the right parent organization unit, the district, to view the distribution within it
- **Select Form:** Pick a form through which staffs have been entered. For the case of a district, select the Public Employee Form

The following table will be presented and then look closely on the bottom-right corner, there is an option to Export to Excel. Go for it.

Tamambele	Male	31	Diploma	Clinical Officer II	2005-11-01	2040	5(y) 3(m)	Disunyara Dispensary
Malangalila	Female	41	Certificate	Nurse Grade II	1990-10-19	2029	20(y) 4(m)	Disunyara Dispensary
Sam	Female	45	Diploma	Clinical Officer II	1990-11-02	2026	20(y) 3(m)	Disunyara Dispensary
Kondo	Female	52	Certificate	Nurse Grade II	1975-01-01	2019	36(y) 2(m)	Disunyara Dispensary

First Previous 1 2 3 4 5 Next Last

Export to excel Export to excel Order by Designation

The second step includes deleting the unwanted columns to make the spreadsheet meaningful. Delete them till you get the fields as shown below. Make sure the Organization / Unit column is there. This is basically what we want.

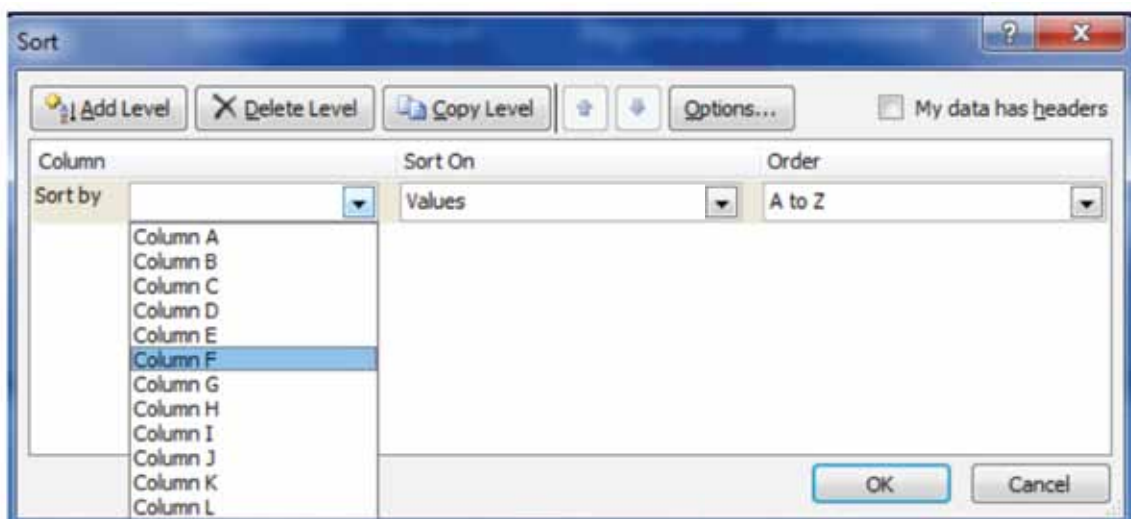
First Name	Second Name	Last Name	Educational Level	Cheque Number	Registration Number	Superlative Substantive Position	Present Designation	Profession	Employment Status	Age	Org/Unit
Teburana	Jana	Lwaga	Diploma	105431115	-	None	Clinical Officer II	Clinical Officer	On Duty	41 y	Bokonne mela Dispensar
Nanu	H.F.	Mains	Certificate	10814912	-	None	Nurse Grade II	Nurse	On Duty	36 y	Bokonne mela Dispensar
											Bokonne mela Dispensar

The third step is to sort and get organization groups arranged. This also has sub-steps

- i. Select all: Ctrl + A
- ii. Locate the A-Z Filter/Sort which looks like the following



- iii. Go for Custom Sort and fill in as shown in the figure below



Sort by: Select the Column, which has the organization units

Sort On: Leave Values

Order: Leave A to Z

Above them there is a check box that says “My data has headers” please check it – click and then say OK. The resulting Sheet will give people by their health facilities

1.6. Attrition

Employee attrition in health sector is one of the critical problems, which are experienced by the country. In an ideal situation an employee consider multiple comfort level while working in a region. For the case of Health sector, the attrition is cantered to retirement, death, reassignment and brain drain.

Aim:

The aim of this unit is to enable RHMT/RS to use HRHIS to obtain the status of staff attrition and suggest the strategies of overcoming it.

Objectives:

At the end of this unit the RHMT/RS should be able to:

- Assess the attrition rate in the region
- Identify reasons why attrition is occurring
- Identify appropriate strategies for retaining staff at regional level
- Plan for retention of staff in the regions

Activities:

- Generate and analyze report on number of employees who has left the health sector in the region for the period under review.
- Calculate the attrition rate = # of people who has left / # of current employee x 100
- Take appropriate action basing on the reports above.

2. HR Management at Regional level

2.1. Background

Human resource management can be summed up as the integrated set of roles, functions, decisions, systems and processes in an organization that meet the needs and support the work performance of employees in order to accomplish the mission, goals and strategies of the organization.

The efficiency and effective management of human resources is an essential component for high performance of health system and can influence the success or failure of health sector in the region. The use of HRHIS will assist the proper management of HR by generating information related to management issues.

2.1. Recruitment

The unit introduces RHMT/RS on recruitment requirement of HRH in the region. Understanding of the recruitment is important to manager of the regions so as to be able to appropriately plan, recruit and place HRH in the region.

Aim

The aim of this unit is to assist the RHMT/RS to access the information that will enable them to appropriately recruit HR in the region.

Objective

At the end of this session RHMT member should be able to:

- Assess the HR status in the region.
- Identify new vacancies by using HRHIS
- Identify appropriate professional / skills required on the available vacancies

Activities:

- To generate and analyze report on current existing staff
- Identify the exiting gaps by professional/Cadre
- Plan PE for filling the identified gaps

2.2. Deployment

Despite the overall shortages of health workers, there are still severe mal-distributions in the region. Mal-distribution of health workers can be experienced in areas with poor working environment, hard to reach and with poor social services. Therefore, Health sector managers in the region can find ways of addressing HR deployment issue through the use of HRHIS for management decision-making.

Aim:

The aim of this unit is assist RHMT/RS to HRHIS on how to manage deployment in the region.

Objectives:

At the end of this unit RHMT/RS should be able to:

- Assess the deployment status in the region
- Identify strategies for deployment of staff at regional level,

Activities:

- Generate and analyze report on deployment status
- Make inventory of staff distribution.
- Allocate staff in the region according to the staffing level.

2.3. Retention

In dealing with health staff in general, RHMT/RS has got a big challenge on how to retain the work force posted to various health facilities within the region. The challenge of retention of health workers can include for instance bad working conditions, lack of training or induction training program, communication barriers, slow payroll processes, wage package etc. Therefore the use of HRHIS will assist the management of HR to identify the status of retention in the region.

Aim

The aim of this unit is to enable RHMT/RS to use HRHIS to appropriately plan for retaining health workers in the region.

Objectives

At the end of this session the HRMT team should be able to:

- Assess the status of retention of health workers in the region.
- Identify the strategies for retention of HRH in the region

Activities

- Generate and analyze the report on retention status
- Develop and implement retention package for the region

Procedure

Often measured as a rate and referred to as retention rate. This is not for the time being produced by the system. Efforts are underway to make sure that it is possible to compute it.

3. Human Resources Development at Regional level

3.1. Background:

Human resource development in the health sector is one of the major challenges facing many regional managers in the country. This has become a critical problem in health services delivery in the region due to lack of skilled staff. The managers in the regions have a key role in making sure that; the development program are integrated in their strategic plans to improve the skills and professions of health workers for harnessing the efficient and effective delivery of health care services. To get really evidence of the status of HRD in the region, the HRHIS can assist by generating the information for proper HRD.

3.2 Career Development

Career Development focuses on assuring an alignment of individual career planning and organizational career management to achieve an optimal merge of individual and organizational needs. Planning for individual career development is very important in the health sector in order to ensure that all the time there are available required staffs to take over different roles in the region.

Aim

The aim of this unit is to assist RHMT/RS to use HRHIS for proper planning and implementation of career development of health workers in the region.

Objective:

At the end of this unit RHMT/RS should be able to:

- Assess the HRD status in the region.
- Identify individual employee with the right knowledge and skills for taking different activities in the region.
- Identify strategies for developing employee in their carrier path.

Activities:

- Generate and analyze report on available employees with different skills and knowledge.
- Identify gaps available for different skills and ability of employees
- Develop carrier development plan with carrier path.

3.4. Training Plan

There has been a growing concern that health services delivered at the health facilities are not to the expected standards and therefore, it has become a priority to take into consideration health delivery services improvement. In order to tackle this problem HRH training should be used to tackle this since training of employees can contribute positively to the improvement of health services delivery.

Planning and implementation of training plan which is geared to updating and improving health workers skills and knowledge for quality service provision will depend on the information and data in place. HRHIS can assist in generating data that will eventually be as evidence for the development of HR training plan in the region.

Aim:

The aim of this unit is to assist the RHMT/RS to put in place appropriate strategies planning for health sector employee training in their regions by using HRHIS

Objectives:

At the end of this unit RHMT/RS should be able to:

- Conduct training needs assessment of HR in the region
- Identifying new skills required by the staff.
- Identify individual employee with the right knowledge and skills for taking different activities of the region in the future

Activities:

- Generate and analyze report on skill level of existing employees using HRHIS
- Identify gaps available for different skills and ability
- Develop training plan
- Plan for staff to attend trainings taking into consideration continuity of activities with the help of HRHIS

Procedure:

Main Menu → Reports → Aggregated Report

Aggregated Reports

CREATE A REPORT

Select Organisation: *	Muhimbili Orthopedic Institute Muhimbili National Hospital
Use Data for Selected Unit and lower levels:	-Select- Sex Nationality Education Level Terms of Employment Superlative Substantive Position Present Designation Department Salary Scale Employer Employment Status Marital Status Profession Relationship to next of Kin Registered Disability Employment Distribution Per Year Retirement Distribution Per Year Age Distribution
Select Form: *	-Select-
Fields One: *	-Select-
Field Two: *	-SELECT-
Type of Graph: *	-SELECT-
<input type="button" value="Generate Report"/>	

The procedures in this case are not in any way different. Only that this time you will have to specify profession as field one. Let field two contains Use only the above. Go ahead and define the rest of the fields and say generate report. If you selected bar graph, you will get something like this



DISTRICT LEVEL

Introduction

The Council Health Management Team (CHMT) deals with management of Health at council level. It is responsible for coordinating preventive, curative, and rehabilitative and promotion health activities. One of the prime responsibilities of the CHMT is planning and management of Human Resources for Health (HRH) in the council.

Council Health Management Team (CHMT) has roles and responsibilities In Human Resource Planning, Management and Development as follows:

- Collect HRH data from District Hospital, health centres and dispensaries in public sector
- Collect HRH data from hospitals, health centres and dispensaries in private sector
- Accumulate HRH data from all health facilities in the district and forward them to RHMT
- Ensure that HRH data is up dates regularly and forward the changes to RHMT
- Review all HRH data quarterly to prevent omission of HRH data
- Provide logistic support to HRHIS Monitoring team from MoHSW

Note that the HRHIS focal person in CHMT (District Health Secretary: DHS) shall communicate with District Human Resource Officer (DHRO) and share HRHIS information for reporting of HRH to President Office-Public Service Management (POPSM) and Prime Minister Office-Regional Administration and Local Government (PMORALG)

1. HRH Planning

1.1. Background

Human Resources for Health (HRH) are a stock of all health staff engaged in the health service delivery in the councils. This includes both private and public sectors and different domains of health systems. Using HRHIS, which provides relevant information related to planning of HRH in the districts as follows, can effectively plan the planning of HRH in the districts:

1.2 HRH Projections at district level

One of the roles of CHMT is to project HRH in the Council. Therefore CHMT is responsible for assessing and projecting human resources requirements at the district/council level. Knowledge and skills are important to capacitate members of CHMT to effectively use reports from HRHIS for decision-making.

Aim:

This unit aims at equipping members of CHMT with knowledge and skills that will assist proper projection of HRH at the district level. From HRHIS, members of CHMT can generate and interpret reports on health workers availability and their characteristics in order to get evidence that will assist proper projection of HRH in a timely manner.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Explain steps involved in HRH planning process
- Identify HRH requirements of the district
- Project appropriate number of HRH according to staffing levels

Activities:

- Conduct HRH assessment using HRHIS in order to establish requirements
- Perform actual projection in terms of numbers and skills of the required staff

Procedure:

To obtain a Human Resource Projection plan, managers are required to assess the number of employees who will be retiring soon so as to plan for other employees who will be remaining to make sure that they have same professional levels to those who are leaving.

This can be done on HRHIS by generating a retirement distribution report, which gives number of employees who are retiring in the ten coming years. The following lines instructs how to do it

Main Menu → Reports → Aggregated Report

The following window will appear

The screenshot shows the 'CREATE A REPORT' window in HRHIS. The 'Select Organisation:' field is a tree view with the following structure:

- Ministry of Health
 - Morogoro
 - Pwani
 - Kibaha DC
 - Bagamoyo
 - Rufiji (selected)
 - Mafia
 - Kisarawe
 - Mkuranga
 - Kibaha TC
 - Tabora
 - Ocean Road Cancer Institute
 - Muhimbili Orthopedic Institute

Other fields and their values:

- Use Data for Selected Unit and lower levels:
- Select Form: Public Employee Form
- Fields One: Retirement Distribution Per Year
- Field Two: Use only the above Field
- Type of Graph: Bar Graph

A 'Generate Report' button is located at the bottom right of the form.

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Select Form:** Pick a form through which staff have been entered
- **Fields One:** Human Resource Projections in the HRHIS can be obtained through the Retirement Distribution Per Year field
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



This is the retirement distribution for the next ten years. If it is 2011 the projection will go to 2021, if it is 2013 the projection will go up to 2023

To get the retirements by cadre opt for the "Export to Excel By Cadre" and you will see the retirements by Cadre.

1.3 Staff Balance

The unit introduces members of CHMT on staff balance concept possible contributing factors on staff balance in the district. It also enlightens members of CHMT on how staff balance can affect the quality of health service delivery in the district.

Aim:

This unit intends to introduce members of CHMT on staff balance concept and how it can affect health service delivery in the district. Using of the HRHIS will enable members of CHMT in estimating and assessing of the requirement of HRH in the district.

Objectives

At the end of this unit, members of CHMT should be able to:

- Describe staff balance in the district
- Establish whether the district is under/over staffed
- Explain effects of under/overstaffing on health service delivery in the district
- Identify possible factors leading to understaffing and overstaffing
- Demonstrate on how HRHIS can be used to generate various reports related to understaffing/overstaffing of health workers in the district
- Plan and place HRH appropriately in the district

Activities:

- Generate, analyze and interpret different reports on staffing from HRHIS
- Develop and implement recruitment and/or re-distribution of HRH in the district

1.4 Succession

The unit introduces members of CHMT on succession planning of HRH at the district level. Succession therefore is intended to assist in planning for changing environment of work place. Each district is argued to have a succession plan that will assist in taking over the capacities left by the staff that leaves the job in the district due to various reasons.

Aim:

This unit aims at equipping members of CHMT to identify talented employees and develop them for future higher level and broader responsibilities.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Explain the status of available health workers
- Identify key roles of health workers in the district
- Describe HRH development planning in the district
- Plan and fill identified HRH gaps accordingly

Activities:

- Generate different reports related to HRH recruitment and development using HRHIS
- Develop and implement succession plan for HRH in the district

1.6. Distribution

The unit introduces members of CHMT on distribution of HRH and enlightens them on effects of mal-distribution of HRH in the district. Imbalances on health workers distribution between urban and rural settings still persist and the critical shortage is more evidence at the lower levels and in the hardship working environment areas in many districts in Tanzania. Understanding of the information on HRH distribution within the district is important to members of CHMT to be able to appropriately allocate staff to right place, with right number and skills, and at the right time.

Aim

This unit aims at equipping members of CHMT with knowledge and skills that will assist proper distribution of HRH in the district. Members of CHMT need to understand HRHIS in order to make use of available data on health workers distribution for proper distribution and deployment of HRH within the district.

Objectives

At the end of this unit, members of CHMT should be able to:

- Understand distribution of HRH in the district
- Describe how mal-distribution of HRH can occur in the district
- Explain effects of mal-distribution of HRH on health service delivery
- Demonstrate on how HRHIS can be used to generate various information related to health workers' availability by place within district.

Activities

- Generate different reports related to HRH availability using HRHIS
- Re-allocate and post health workers to the health facilities appropriately

Procedure:

The pivot tables can do a better distribution analysis and so you are advised to use the Pivot tables

Data Analysis File → HR Distribution

Numbers of staff in different units can be viewed and establish the current HR Distribution. Within the system, distribution can be computed the hard way. It involves the following stages.

- d. Select record report and fill in the necessary information
- e. Export all the records to MS Excel
- f. Sort based on the organization units

The following section details of these steps.

Main Menu → Reports → Record Report

If one opts for this option then the following window will appear and you need to provide the right information.

- **Organization Unit:** Select the right parent organization unit, the district, to view the distribution within it
- **Select Form:** Pick a form through which staffs have been entered. For the case of a district, select the Public Employee Form

Reports

CREATE A REPORT

Select Organisation:*

- [-] Ministry of Health
 - [-] Morogoro
 - [-] Pwani
 - [-] Kibaha DC
 - [-] Bagamoyo
 - [-] Rufiji
 - [-] Mafia
 - [-] Kisarawe
 - [-] Mkuranga
 - [-] Kibaha TC
 - [-] Tabora
 - Ocean Road Cancer Institute
 - Muhimbili Orthopedic Institute

Select Form:*

Public Employee Form

-SELECT-

Public Employee Form

Hospital Employee Form

Private/FBO Employee Form



Institution Employee Form

Use Data for Selected Unit with lower levels:

The following table will be presented and then look closely on the bottom-right corner, there is an option to Export to Excel. Go for it.

Tamambele	Male	31	Diploma	Clinical Officer II	2005-11-01	2040	5(y) 3(m)	Disunyara Dispensary
Malangalila	Female	41	Certificate	Nurse Grade II	1990-10-19	2029	20(y) 4(m)	Disunyara Dispensary
Sam	Female	45	Diploma	Clinical Officer II	1990-11-02	2026	20(y) 3(m)	Disunyara Dispensary
Kondo	Female	52	Certificate	Nurse Grade II	1975-01-01	2019	36(y) 2(m)	Disunyara Dispensary

First Previous 1 2 3 4 5 Next Last

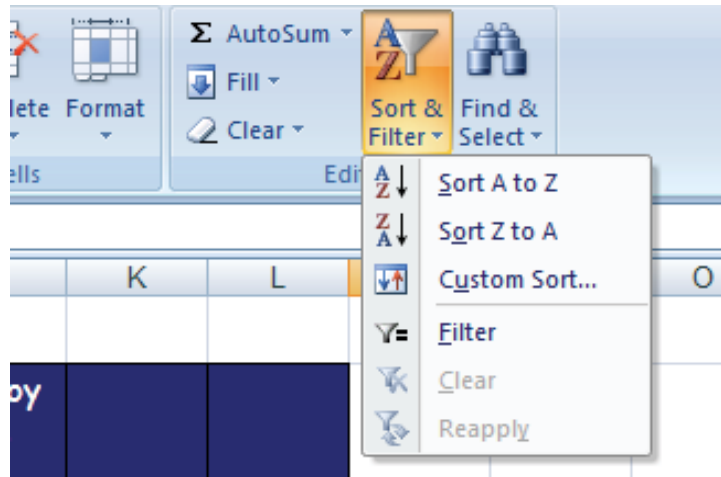
 **Export to excel**  **Export to excel Order by Designation**

The second step includes deleting the unwanted columns to make the spreadsheet meaningful. Delete them till you get the fields as shown below. Make sure the Organization / Unit column is there. This is basically what we want.

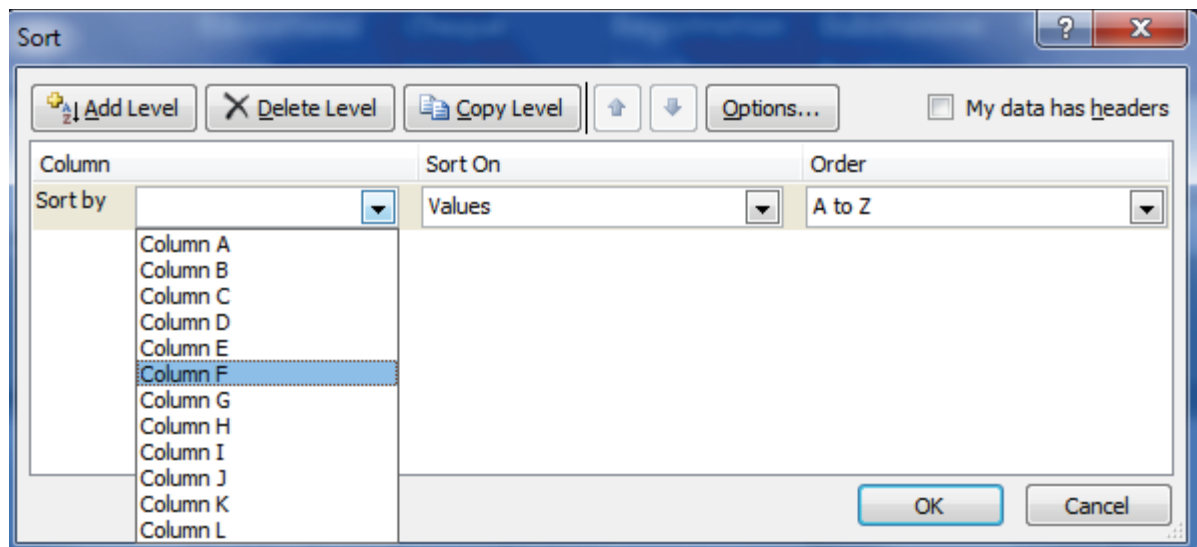
First Name	Second Name	Last Name	Educational Level	Cheque Number	Registration Number	Superlative Substantive Position	Present Designation	Profession	Employment Status	Age	OrgUnit
Tabunuru	Juma	Lwoga	Diploma	10543115	-	None	Clinical Officer II	Clinical Officer	On Duty	41 y	Bokonne mela Dispensary
Nuru	H.F.	Maina	Certificate	10814912	-	None	Nurse Grade II	Nurse	On Duty	36 y	Bokonne mela Dispensary

The third step is to sort and get organization groups arranged. This also has sub-steps

- iv. Select all: Ctrl + A
- v. Locate the A-Z Filter/Sort which looks like the following



- vi. Go for Custom Sort and fill in as shown in the figure below



Sort by: Select the Column, which has the organization units

Sort On: Leave Values

Order: Leave A to Z

Above them there is a check box that says "My data has headers" please check it – click and then say OK. The resulting Sheet will give people by their health facilities

1.7. Attrition

The unit introduces members of CHMT on the health workers' attrition and its main causes. It also enlightens users on the key attrition elements and importance of information related to attrition during HRH planning.

Aim:

This unit intends to orient members of CHMT on factors influencing attrition of health workers in the District. It is important to understand different kinds of variables related to attrition, which are stored in HRHIS and perform regular updates to enable system to generate updated and reliable reports.

Objectives

At the end of this unit, members of the CHMT should be able to:

- Understand attrition of health workers
- Identify different causes of health workers' attrition
- Demonstrate on how HRHIS can be used to generate various information related to health workers' attrition
- Perform HRHIS regular updates on variables related attrition
- Generate and analyze HRHIS reports on variables related attrition in order to monitor attrition rate
- Maintenance of HRHIS including improving Internet connectivity, hardware, software, technical support and electrical supply.

Procedure:

Attrition report can be obtained by generating an aggregated report for Employment Status, which provides number of employees on duty and those who are off duty due to various reasons. The interest is to those who are NOT on duty.

Using this report, it will be easy to identify reduction of employee and what are the reasons. Reasons for HRH attrition can be Retirement, Death, Transferred, or on Leaves. Follow the following guide, to achieve the attrition and their reasons

Main Menu → Reports → Aggregated Report

The following window will appear

Aggregated Reports

CREATE A REPORT

Select Organisation:*

- Ministry of Health
 - Morogoro
 - Pwani
 - Tabora
 - Ocean Road Cancer Institute
 - Muhimbili Orthpeadic Institute
 - Muhimbili National Hospital
 - Kilimanjaro Region
 - KCMC Referral Hospital
 - Dar Es salaam
 - Mirembe Referral Hospital
 - Mbeya Referral Hospital
 - Kibong'oto TB Hospital

Use Data for Selected Unit and lower levels:

Select Form:* Public Employee Form

Fields One:* Employment Status

Field Two:* Use only the above Field

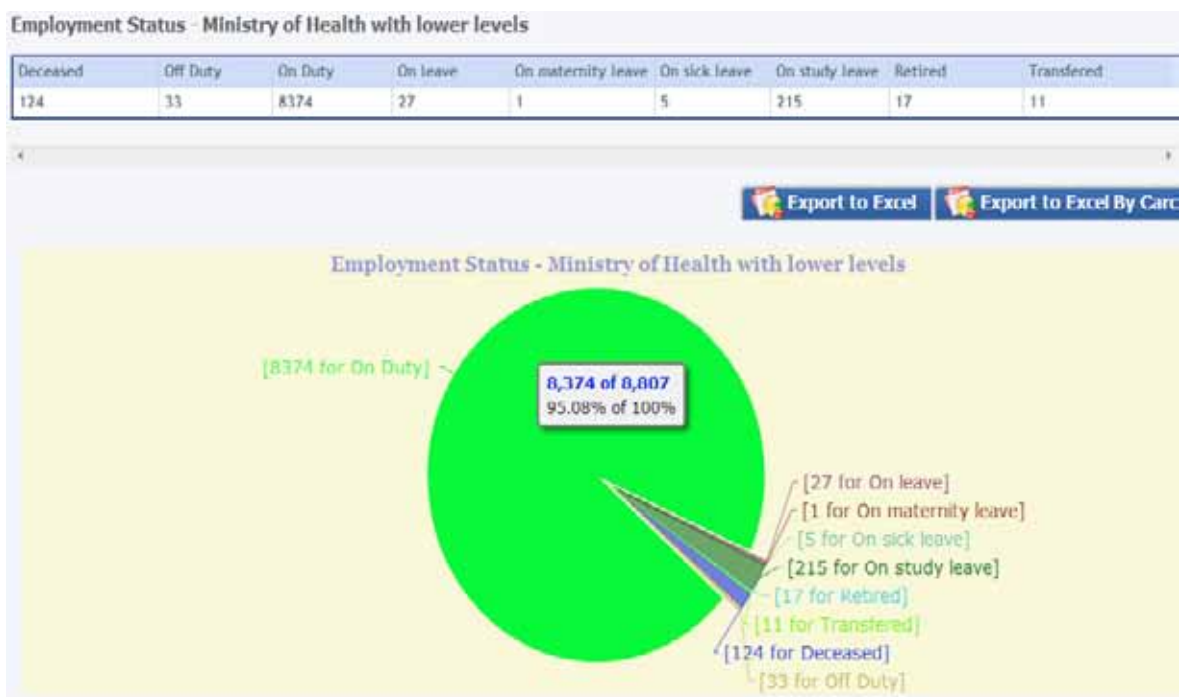
Type of Graph:* Bar Graph

Generate Report

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Select Form:** Pick a form through which staff have been entered
- **Fields One:** Attrition in the HRHIS can be obtained through the Employment Status field
- **Field Two:** Select the Use only the Above field
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Pie Chart

The following figure shows an example of the output



If you just put a pointer on the chart, different explanations will be offered. Attrition is then simply obtained through establishing the difference between all assigned staff and those on duties, thus

$$\text{Attrition} = \text{all assigned staff} - \text{staff on duty}$$

For example, the above shows that the number of staff on-duty is 95.08%, then the attribution can be computed as;

$$\text{Attrition} = 100\% - 95.08\% = 4.92\%$$

A more detailed attrition can be obtained on Pivot-Tables file where specific reports can be obtained like which carders.

2. HRH Management

2.1. Background

Human resource management is on the key functions in the district, which focuses in recruitment, retention reward, personal development, training, career development, management and providing direction for the people who work in the district. The CHMT need to recognize that low human resource management capacity can potentially contribute to slow recruitment process, delays in staff placement, and slow promotion process.

2.2. Recruitment

The unit introduces members of CHMT on recruitment process of HRH in the district. Recruitment process is needed in order to plan required staff and recruitment policies which will cover advertising jobs, receiving applications, short listing, interviewing, selecting and placing qualified staff to the job by issuing work offers and orienting new staff. Understanding of the process is important to members of CHMT so as to be able to appropriately plan, recruit and place HRH in the district.

Aim:

The aim of the unit is to enable CHMT to understand HRHIS from which they can generate and analyze reports on available health workforce and then prepare and implement recruitment plan based on the results obtained after analysis.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Explain the process of recruitment at district
- Identify areas/elements of assessment in staff recruitment in a district
- Describe the process of HRH recruitment procedure in a district

Activities:

- Conduct assessment-gaps according to staffing levels using HRHIS
- Prepare PE according to the evidence obtained

2.3. Deployment

It is important to the district to have the required size of the workforce. Whenever there is over or under staffing in the district, there will a problem in the management of HRH. The ability to manage health workers can mean the success or failure of the district. Understanding of the deployment process is important to members of CHMT so as to be able to appropriately plan and deploy health workers to different locations where are mostly needed in the district. For better and improved production of health service is on effective deployment of human resource in the district.

Aim:

The aim of this unit is to enlighten the CHMT to use HRHIS to equitably distribute health workers within the health system for ensuring a wide coverage of quality health services and health status improvement in the district.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Understand deployment process of HRH in the district
- Assess availability and distribution of HRH in the district
- Demonstrate on how HRHIS can be used to generate and analyzed various reports on different particulars of HRH availability and distribution

Activities

- Conduct an assessment on HRH availability and distribution in the district
- Carry out analysis and interpret results of the assessment report
- Prepare deployment mechanism for recruited health workers

2.4. Retention

The unit introduces members of CHMT on retention and its importance in HRH management. Retention is so important that it is very costly for the district to recruit and train staff and then lose them. It is important for members of the CHMT to understand retention concept in order to plan and implement appropriate retention schemes to avoid the district to suffer from shortage of health workforces.

Aim:

The aim of this unit is to enable members of the CHMT to effectively manage the existing workforce, which is crucial in solving HRH crisis and essential feature to enhance proper deployment and retaining health workers for optimum utilization within the district.

Objectives

At the end of this unit, members of CHMT should be able to:

- Understand the concept of retention.
- Describe factors that influence health worker retention in a district.
- Describe approaches that improve health workers retention in a district

Activities

- Conduct analysis on availability and retention status of health workers in the district through different reports
- Develop and implement retention packages

Procedures

Often measured as a rate and referred to as retention rate. This is not for the time being produced by the system. Efforts are underway to make sure that it is possible to compute it.

3. HRH Development

3.1. Background

Analysis of the composition of human resources for health in Tanzania reveals that unskilled workers form the largest group of the health workforce. This is also the case in most of the districts in the country. Skills, capacity and commitment of HRH are major determinants of efficiency and effectiveness in the delivery of health care, mainly because HRH are the prime movers of other health resources in the district. Members of CHMT need to understand career development aspect and how to prepare and implement career development for HRH available in the district.

3.2. Career development

Career development implies continuous education and promotion of health workers. Quality continuous education is important for attaining individual and organizational performance objectives. Availability of training opportunities is an important component in career development and thus to retention of health workers.

Aim:

The aim of this unit is to enable CHMT to use the HRHIS to generate information that will help to assess the career development aspect, prepare and implement career development staff available in the district.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Understand career development status
- Ensure proper career development paths for different cadres of the health workers

Activities:

- Conduct assessment of training needs for available staff using HRHIS
- Develop and implement career development plan using results obtained from the assessment

Procedure: refer other levels on carrier development.

3.3. Training plan

The unit introduces members of CHMT on training plans for professionals' development within the health sector in the district. Designing and implementation of training plans geared toward to update and improve health worker skills and knowledge to ensure quality service provision. However, continuing professional development is facing major challenges including absence of individual efforts and an enforcing mechanism to encourage workers to undertake training based on training needs assessment.

Aim:

This unit intends to notify members of CHMT with knowledge and skills that will enable development of training plans. The plans aim at improving health workers' performance through continuous training in order to increase their knowledge and skills.

Objectives:

At the end of this unit, members of CHMT should be able to:

- Understand key elements to be considered when preparing training plans for health workers
- Use HRHIS to generate and interpret reports on individual capacity

Activities:

- Conduct assessment on individual capacity of the health workers available in the district using HRHIS
- Develop appropriate training plans for available health workers

Procedure:

To obtain a Training Plan, one needs to assess how many employees were going for training in each year. To do that, follow the following procedures;

Main Menu → Reports → Other Reports

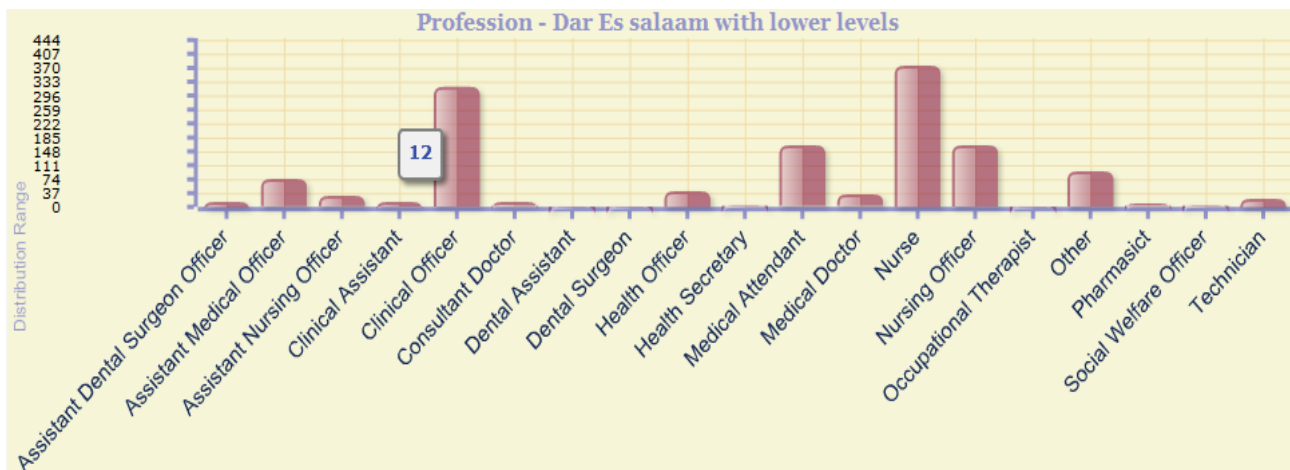
Aggregated Reports

CREATE A REPORT	
Select Organisation:*	Muhimbili Orthopaedic Institute Muhimbili National Hospital
Use Data for Selected Unit and lower levels:	-Select- Sex Nationality Education Level Terms of Employment Superlative Substantive Position Present Designation Department Salary Scale Employer Employment Status Marital Status Profession Relationship to next of Kin Registered Disability Employment Distribution Per Year Retirement Distribution Per Year Age Distribution
Select Form:*	-Select-
Fields One:*	-SELECT-
Field Two:*	-SELECT-
Type of Graph:*	-SELECT-
Generate Report	

Select the right options as shown in the figure above to obtain the data you desire.

- **Organization Unit:** If you are dealing with the overall national data, select the parent organization unit – Ministry of Health, otherwise, select the relevant level.
- **Use Data for Selected Unit and lower levels:** This option is meant to differentiate whether reference is made for staff within the selected level or together with lower levels. If one selected Ministry of Health without checking this box, the information returned would only be those working at the Headquarters. If checked, it will return information related to all the staff in the country
- **Type of Report:** Select In-Service Training Report
- **Select Form:** Pick a form through which staff have been entered
- **Type of Graph:** Pick the type of graph you would like to use. Preferred is the Bar Chart

Example output of these selections is as in the diagram below



TRAINING INSTITUTION LEVEL

Introduction

The Training Institution Level includes all Health and Social Welfare training institutions and schools run according to Tanzania Commission of Universities (TCU) and National Council of Technical Education (NACTE) regulatory bodies in the country. These training institutions are generally grouped into three categories i.e. government, private and faith based organizations (FBO).

The Institutions/Schools are administratively managed by Zonal Coordinators and Principals of the respective schools. They are regulated and monitored by the Ministry Health and Social welfare.

Roles and Responsibilities

(i) Zonal Training Centers Coordinators

- To supervise data collected from all training Institutions/schools within the zone
- Provide IT supportive supervision to the training Institutions/schools
- To monitor the usage and functionality of TIIS
- To ensure the collected data and information have been sent to the MOHSW

(ii) The Principal

- To collect the data and information concerning students, assets and HR data and enter in the TIIS system
- Encourage tutors to collect and compile data of students and the asserts on time
- Provide technical support, monitor usage and functionality of the TIIS
- Provide logistic support to TIIS monitoring team from the MOHSW
- HRH planning and management of the management team
- HRH planning and management of the Institutions/schools stafftiv
- Forward data and information to Zonal Training Centers and MOHSW

(iii) MOHSW

- To ensure that the forwarded data and information from the Zones, Institutions/schools is entered in the TIIS
- Provide supportive supervision to monitor usage and functionality of TIIS at all levels
- Utilize the entered data from TIIS

1. HR Planning

1.1. Background of HR Planning in TI

The shortage of health and social workers in the health facilities is demanding increase of enrolment of health and social workers in the training institutions, which can also increase and improve the production of health and social welfare professionals. This can only be achieved by proper HRH planning.

The objective of HR planning is to enable health-training institutions to have the required number of Lecturers/Tutors and other staff with the right knowledge, skills, attitudes and qualifications, performing the right tasks in the right place at the right time to achieve the right predetermined goals. Effective HR planning can result in:

- Improved production of health care professionals
- Greater efficiency through better utilization of resources; and
- Improved retention and recruitment.

The consequences of poor HR Planning can cause several problems to the institutions. These include:

1. Staff shortages - unmet demand of skilled personnel
2. Institutional imbalances in workforce
3. Over qualification or under qualification in the workforce
4. Miss utilization (including under /over-utilization)
5. High attrition in the workforce
6. Over employment or underemployment
7. Delayed response to institutional trends (i.e. retirement or dropout)

Therefore HR planning is an important component for human resource planning in training institutions. Effective HR planning depends very much on the availability of accurate and accessible HR information /data.

1.2 Attrition

The functioning of the health training institution depends very much on the sustained availability of qualified staff. However, loss of the HR caused by either death, retirement, sickness, resignation, etc. can lead to the poor performance of the institution towards achieving the desired goals. This loss of HR by either means is called attrition. Attrition is a gradual reduction in work force without firing of personnel, as when workers resign or retire and is not replaced.

Aim

- To help users in the institutions to utilize TIIS data to identify causes of attrition and how to control it in the health training intuitions and the central level.

Objectives

- At the end of this unit the user in the training institutions should be able to:
- Understand the meaning of attrition
- Identify factors causing attrition in the institution
- Manage and control attrition within the institution
- Use TIS data/information to manage attrition within the institution

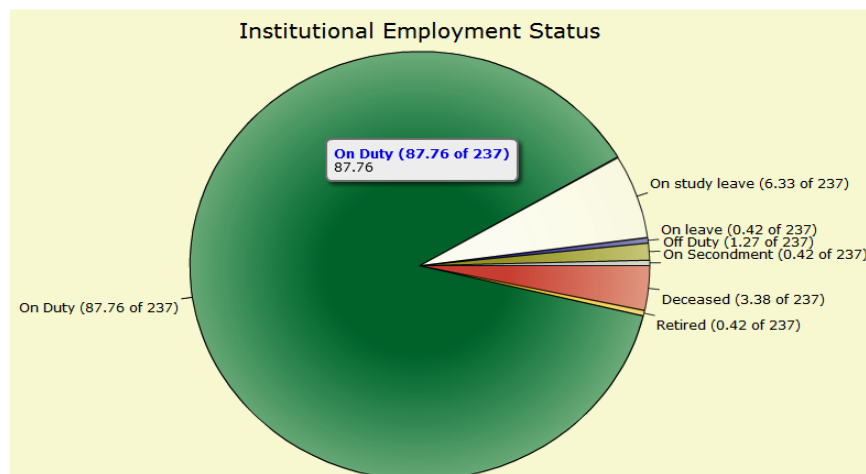
Activities

- Create conducive-working environment such housing, transports, and other incentives.
- Conduct regular staff meeting to discuss strengths and weaknesses of the institution including the workers
- Use TIS employees' data to calculate the institutional attrition rate

Procedure:

The attrition rate can be found by taking the total number of staff which is 100% minus the percentage of the staff on duty. TIS provide a pie chart indicating the percentages covering the staff on duty, staff on leave, on study leave, off duty, on secondment, deceased and the retired staff. To view the pie chart, use the following steps:

Main Menu → Reports → Employee → Employment Status



From the pie chart Attrition rate can be found by taking 100% representing the total number of staff minus the percentage of the staff on Duty (87.76%):

$$\text{Attrition rate} = 100\% - 87.76\%$$

1.3 Staff Balance

The performance of any training institution depends on the availability of the required staffing level. However, if the staffing level is less than the required the institution is bound to perform poorly and provide inferior services resulting to failure to meet desired goals. When the staffing level is more than the required, the institution will be misusing resources which could be used elsewhere. Therefore it's important for the institution to control under/overstaffing.

The institution is understaffed if the available number of staff is less than the required number. Conversely, your institution is overstaffed if the available number of staff is more than the required number.

The institution is under staffed if the available number of staff is less than the required number according to staffing level.

Before determining the staffing level, an institution must set objectives for the quality of service it wishes to provide. These objectives detail the amount of work that expected to be completed within a specified period of time. Using these objectives, an optimal staffing requirement may be forecast. Once the work volume and staffing requirement has been forecast, the optimal scheduling of resources can be prepared. It is usually more desirable to spread out under and overstaffing than concentrate it.

Aim

- To assist users to utilize TIIS data to ensure availability of the required workforce (in terms of number and qualification) in the health training institutions – ensure staff balance

Objective

- Understand the meaning of under and overstaffing in the health training institutions
- Identify the causes of under/overstaffing
- Understand how to address under/overstaffing
- Utilization of TIIS data to control under/overstaffing

Activities

- Report under/overstaffing to the central level
- Use TIIS to calculate the

Procedure

The identify staffing balance one need to be informed on the institutional status of the tutors. To view the institutional tutors status follow the following steps:

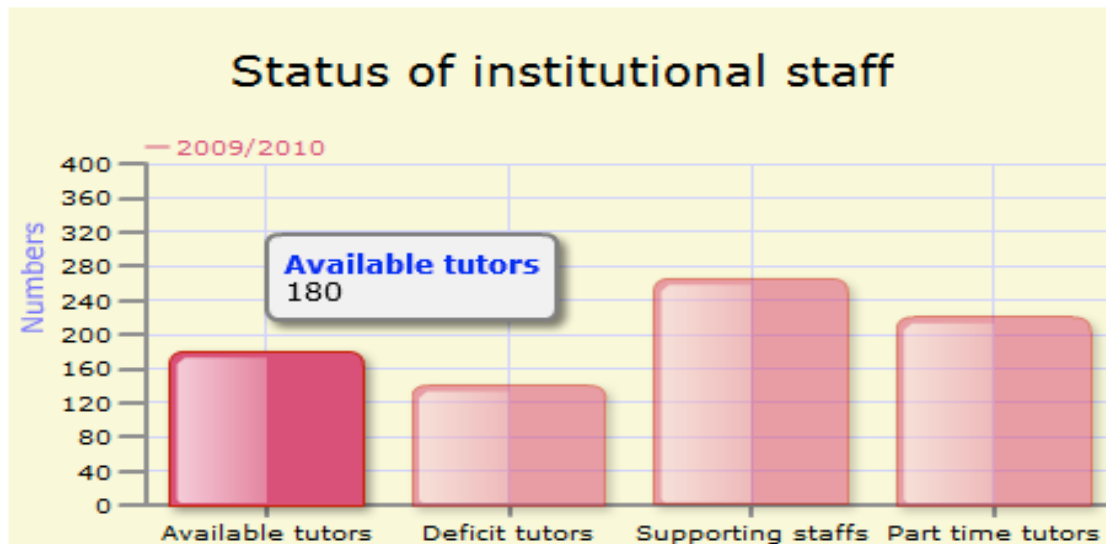
Main Menu → Reports → Employe → Tutors / Lecturer Status

Select the All or Name of the Institution and the specific Academic Year as shown on the example below:

Name of the Institute	All ▼
Academic Year	2009/2010 ▼
	Generate Report

Staff Status

Click on Generate Report to produce a graphical report showing the staff status in the selected academic year, which will appear as on the example shown below:



1.4. HRH Projection

One of the key goals of HR planning is to ensure that the country has adequate health and social welfare staff, with the right competencies and skills, who are well distributed and managed for optimal productivity. To achieve this, HR projection is necessary in order to ensure that trained and knowledgeable lecturers/tutors and other staff are available to deliver the required health training institutions services when and where they are needed.

Ensuring adequate HR is crucial in order to continue progressing toward the realization of the training institutional goals. The purpose of HR projection is to determine the most appropriate balance among the mix, distribution and number of the staff. In working out the workforce projections different variables has been used such as; Workforce status for public and private, attrition rate, training output, etc. For the projection to be effective it should be:

- Based on clearly-identified goals
- Focus on specific, quantifiable problems
- Use data of acceptable quality (either available or collected using TIIS)
- Regularly updated to accommodate more reliable data and to reflect new developments in trends and patterns of health training institutions' services utilization
- Done far enough in advance to allow for time to take action.

Aim

- To guide the users to utilize the TIIS data to prepare for future situation or event such as understaffing due to retirement etc.

Objective

- Understand the meaning of projection in the training institutions
- Understand when projection should be done
- Actions to be taken to mitigate or prevent the foreseeable event
- Use of the TIIS data to do the institutional projections

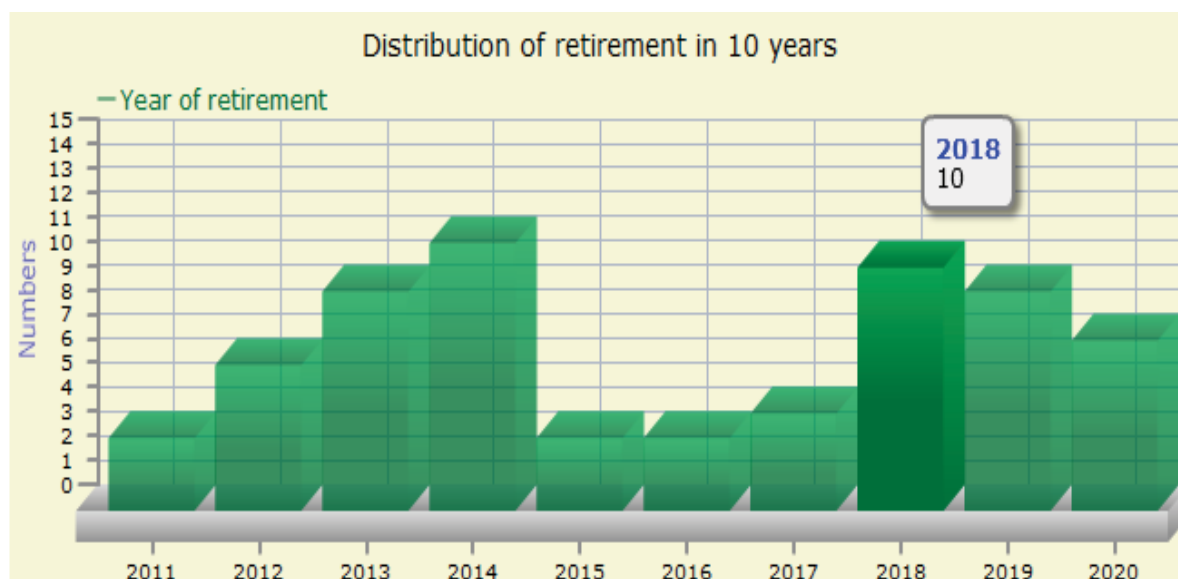
Activities

- Use the user guideline
- Utilize the TIIS data to project the number of employees who will retire in a particular year

Procedure

HR projection can be done based on the number of employees retiring within a specified period of time. TIIS provide the number of employees who will retire in the next ten years distributed in each particular year. This means one can get the number of employees retiring say in two or five years time depending on the projection requirement.

To view the employees' retirement distribution for a period of ten years from the current year in, TIIS use the following steps:



Main Menu → Reports → Employee → Retirement Status

A graphical representation showing the retirement status distributed in the period of ten years will appear as in the example below:

1.5. Succession

Succession is a process whereby institutions identify talented employees and provide education to develop them for future higher level and broader responsibilities. It helps you to build strengths and stability of the institution. By actively pursuing succession planning ensures that employees are constantly developed to fill each needed role.

As your institution expands, increases productivity, loses key employees, opportunities and provides promotional, your succession planning guarantees that you have employees on hand ready and waiting to fill new roles. Effective, proactive succession planning leaves your institution well prepared for expansion, the loss of a key employee, filling a new, needed job, employee promotions, and institutional redesign for opportunities.

Aim

- To prevent disruption of organizational activities or collapse of systems and procedures by the absence of key personnel in key positions

Objectives

At the end of this unit the user should

- Conversant with the term succession in the context of the training institutions
- Use TIIS data to identify talented personnel to groom as successor
- Develop the key identified employee (s)

Activities

- Use TIIS to search for the education level and the history of the employee (s) to groom as successor(s)
- Initiate development program to groom the successors, e.g delegation, in-service training program

Procedure:

To plan for succession one needs to first look at the Education level of the employees using TIIS. To do that, use the following steps;

Main Menu → Reports → Employee → Aggregated Report

The following window for the aggregated report will appear where you will need to select Health Training Institutions, then on the drop down select Institution employee form and Education level. Make sure Field one is set to Use only the above field and the type of graph is set to Bar Chart as it appears below.

Aggregated Reports

Select Organisation:*

Health Training Institutions

Use Data for Selected Unit and lower levels:

Select Form:* Institution Employee Form

Fields One:* Education Level

Field Two:* Use only the above Field

Type of Graph:* Bar Graph

Generate Report

Click on Generate Report where the window below showing the employees education level

Education Level - Health Training Institutions with lower levels

Adv. Diploma	Bachelor Degree	Certificate	Diploma	Masters Degree	Postgraduate Diploma	Primary School	Secondary School
18	13	23	18	6	1	37	7

Export to Excel Export to Excel By Card



The succession plan can also be informed by the employees' history which can be found by using TIIS employees' data. The employees' can be viewed using the following steps:

Main Menu → Reports → Employee → Other Reports

The following window for the other reports will appear where you will need to select Health Training Institutions, then on the drop down select History Report, then Institution employee form and the next drop you can select different options such employment

status, designation, etc. Select the type of graph for instance Bar Chart as it appears below.

Click Generate Report to view the employees History based on the selected requirements.

1.6. Distribution

Human Resource Distribution is the process of balancing the institutional employees and tasks in terms of the required posts according to the functional areas of the organization.

Aim

- To help the users to utilize TIIS data to ensure that the institution HR are distributed according to their skills, knowledge and qualification in order to achieve the intended goal.

Objective

- Understand the meaning HR distribution
- Identify the key institutional functional areas
- Identify staff allocations in the functional areas
- Determine the under or overstaffing in each functional area and tasks

Activities

- List out the different tasks or functional areas of the institution
- Use TIIS employees' data to list out the institutional staff according to their professions.
- Balance the workforce according to the tasks at hand and the employees' profession.

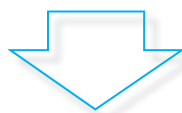
Procedure

To list out the employees according to their professions in TIIS use the following steps:

Main Menu → Reports → Employee → Record Reports

The window shown below will appear where one needs to select either Health Training Institutions or a particular Training Institutions from the tree. Select Institutional Employee form and Make sure the item Use data for selected unit with lower levels is ticked.

Click on Generate Report to get the following:



SN	First Name	Second Name	Last Name	Sex	Age	Education	Designation	First Appointment Date	Retirement Date	Employment Duration	OrgUnit
1	Ignatius	Kisina	Mesten	Male	34	Bachelor Degree	Medical Doctor II	2008-02-26	2037	3(y) 0(m)	AMO Tanga
2	Grace	M	Mhina	Female	47	Certificate	Other	1980-07-01	2023	30(y) 8(m)	AMO Tanga
3	Elizabeth	M	Simbeye	Female	59	Certificate	Supplies Officer II	1980-09-08	2011	30(y) 4(m)	AMO Tanga
4	Nimwindael	H	Mbwambo	Female	36	Diploma	Other	1990-07-17	2035	20(y) 8(m)	AMO Tanga
5	Lucas	A	Mtengele	Male	57	Primary School	Other	1990-03-01	2014	21(y) 0(m)	AMO Tanga
6	Ahamad	A	Nyangasa	Male	56	Primary School	Other	1981-04-01	2015	29(y) 11(m)	AMO Tanga
7	Henel	K	Malonya	Male	33	Primary School	Other	2003-09-01	2038	7(y) 6(m)	AMO Tanga
8	Mussa	J	Mzimba	Male	41	Primary School	Other	1996-02-01	2030	15(y) 1(m)	AMO Tanga
9	Neheemia		Mwanyingili	Male	39	Secondary School	Other	2008-11-13	2032	2(y) 3(m)	AMO Tanga
10	Hamis	Juma Idd	Isaka	Male	31	Bachelor Degree	Medical Doctor II	2008-10-16	2040	2(y) 4(m)	AMO Tanga

Then click on the Export to Excel to view the employees report showing more details including the employees' profession as shown on the example below:

Second Name	Last Name	Date of Birth	Sex	Marital Status	Nationality	Profession
Eustace	Singano	1977-08-30	Female	Married	Tanzania	Nurse
Paskali	Shirima	1952-10-28	Male	Married	Tanzania	Nursing Officer
Michael	Shengena	1966-12-13	Male	Married	Tanzania	Assistant Medical Officer

1.7. Registration

Registration is used to identify fully qualified staff in a particular profession through a recognized registration board such as Doctors/Nurses registration board or engineers' registration board etc. In order to gain recognition and respect for human resources as a mainstream profession, HR practitioners are prepared to meet the same stringent standards and ethical accountability that all other professions subscribe to. Professional registration achieves this goal by:

- Raising accountability
- Lending credibility
- Affording protection against pressure to act unethically
- Leading to higher individual aspirations
- Engendering pride in and protection of stature of the employee

Aim

- To assist the users to use TIIS data to ensure provision of quality services through qualified staff in the institution

Objectives

- Understand the importance of registration
- Identify fully qualified personnel who are licensed to practice

Activities

- Use TIIS employees data to list out the registered employees
- Conduct staff meetings to insist on professional registration
- Avail opportunities to your staff to attend in recognized professional certifications leading to registration

Procedure

To list out the employees with professional registration, follow the steps indicated in section 1.6 above.

2. HRH Management

2.1. Background of HR Management

Human resource management (HRM) is the strategic and coherent approach to the management of an institution's most valued assets - the people working there who individually and collectively contribute to the achievement of the objectives of the institution. In simple words, HRM means employing people, developing their capacities, utilizing, maintaining and compensating their services in tune with the job and institutional requirement.

As per the MoHSW policy some of the HRM activities can only be performed at the central level which includes things like recruitment, deployment etc. The issue of retention, attrition and performance appraisal can be done both at the institutional and central level. HRM enable institutions to express their goals with specificity so that they can be understood and undertaken by the workforce and to provide the resources needed for them to successfully accomplish their assignments. As such, HRM techniques, when properly practiced, are expressive of the goals and operating practices of the overall institution. HRM is also seen by many to have a key role in risk reduction within organizations.

2.2. Retention

Retention is a process of enabling staff to remain and serve the institution for a reasonable time. One key factor in employee retention is the opportunity to continue to grow and develop job and career enhancing skills. There are a couple of secrets to what employees want from training and development opportunities. However, plus training and development opportunities are not just found in training classes and seminars. Learn more about what employees want in training and development opportunities.

Retaining employees involves understanding the intrinsic motivators of them, which many Institutions are unable to identify. In this context Institutions need to dig much approaches to retain the most effective manpower.

Aim

- To guide the institutional users to use TIIS data to maintain stability and sustainability of institution function to achieve the intended goal

Objectives

- Understanding the meaning of retention
- Identify factors which will assist in staff retention

Activities

- Provide clear job descriptions to the employees
- Create incentive structures within the institutions
- Create conducive working environment such as housing, transport, overtime allowance, recreational activities

2.3. Performance Appraisal

A performance appraisal is a method by which the work/job performance of an employee is evaluated in terms of quality, quantity, cost, and time; typically by the corresponding manager or supervisor. It involves analysis of an employee's recent successes and failures, personal strengths and weaknesses, and suitability for promotion or further training. Furthermore performance appraisal is used as an avenue to judge an employee's performance in a job based on considerations other than productivity alone. Also it guides and manages career development within an institution

The appraisal process involves:

- Setting work standards
- Assessing the employee's actual performance relative to these standards
- Providing feedback to the employee with the aim of motivating that person to eliminate performance deficiencies.

The common approach for conducting performance appraisal is the Open Performance Review Appraisal System (OPRAS). OPRAS is an open, formal, and systematic procedure designed to assist both employers and employees in planning, managing, evaluating and realizing performance improvement in the organization with the aim of achieving organizational goals. It requires both the employees and employers to know the objectives of institution clearly before setting any performance standards.

Aim

- To help the users to utilize the TIIS data to measure and improve the actual and potential performance of the employee.

Objectives

At the end of this unit, the user should be able to:

- Understand the meaning of performance appraisal
- Review the performance of the employees over a given period of time.
- Judge the gap between the actual and the desired performance.
- Help the management in exercising institutional control.
- Help to strengthen the relationship and communication between superior – subordinates and management – employees.
- Provide clarity of the expectations and responsibilities of the functions to be performed by the employees
- Diagnose the strengths and weaknesses of the individuals so as to identify the training and development needs of the future.
- Judge the effectiveness of the other human resource functions of the institution such as recruitment, selection, training and development.
- Reduce the grievances of the employees.

Activities

- Provide operational strategic plan to the employees
- Provide job description to the employees
- Provide information to assist in the other personal decisions in the institution.
- Conduct OPRAS to your employees according to the agreed period
- Provide feedback to the employees regarding their past performance

3. HR Development

3.1. Background of HR Development

Human Resource Development (HRD) is the framework for helping employees develop their personal and organizational skills, knowledge, and abilities. It includes opportunities such as employee training, employee career development, performance management and development, coaching, mentoring, succession planning, key employee identification, tuition assistance, and institutional development.

3.2. Career Development

Career development looks at how institutions structure the career progress of their employees and how individuals manage their careers within the institution and between institutions. It can also be tied into succession planning within some institutions. In personal development, career development is the total constellation of psychological, sociological, educational, physical, economic, and chance factors that combine to influence the nature and significance of work in the total lifespan of any given individual. The evolution or development of a career is informed by experience within a specific field of interest, success at each stage of development and educational attainment.

Aim

- To help the users to utilize TIIS data to increase the employees performance in meeting institutional objectives/goals

Objectives

- Understand the meaning and importance of career development
- Identify opportunities and strategies for career development
- Identify and structure the employees' career development

Activities

- Use the guideline manual
- Conduct meetings to sensitize and insist about the importance of career development to the employees
- Include strategies for career development in the institutional strategic plan

3.3. Training plan

A successful human resources development program, prepares the individual to undertake a higher level of work, through organized learning programs over a given period of time, to provide the possibility of performance improvement at an individual and institutional level.

Training plan for HR development is the framework that focuses on the institution's competencies at the first stage and then developing the employee through education, to satisfy the institution's long-term needs and the individual's career goals. Note that, individual education and development is a tool and a means to an end, and not the end goal itself.

Aim

- To help the users to utilize TIIS data to identify the institutional employees' training

needs and plan them according to priorities

Objectives

- Understand the importance of the training plan
- Identify the institution’s training needs
- Identify the format and the training type
- Identify the longevity and the location of the training
- Understand how to measure the effectiveness of the training

Activities

- Use TIIS data to assess and agree on the training needs of the institution
- Create institutional training or development specifications
- Plan training and evaluation
- Design training materials and methods
- Deliver the training or release the employees to go for training

Procedure:

The training needs and plan is informed by employees’ current skills and education level. To view employees’ Education level in TIIS, use the following steps;

Main Menu → Reports → Employee → Aggregated Report

The following window for the aggregated report will appear where you will need to select Health Training Institutions, then on the drop down select Institution employee form and Education level. Make sure Field on is set to Use only the above field and the type of graph is set Bar Chart as it appears on the Figure below.

Then, Click on Generate Report where the window below showing the employees education level will appear.

Education Level – Health Training Institutions with lower levels



3.4. Enrollment and Output

Enrollment in HR context is the process whereby institutions enlist employees into training programs according to the institutional training plans and priorities. Given the vast range of skills and other competencies, which can be developed in employees it is useful for the institution to prioritize so that enrolment of employees in various training programs focuses on the areas, which will yield best benefit in terms of institutional performance.

The output of the enrollment program measures the performance of the institutional HR development plan in general. It helps to know

Aim

- To empower the users to utilize the TIIS data to enlist the employees into training programs according to the institutional plans and priorities

Objectives

- Understand the importance of enrollment
- Chart out an enrollment plan according to the institutional needs and priorities
- Measure the output of the enrollment program

Activities

- Use TIIS employees data to chart out an enrollment plan according to institutional priorities
- Use TIIS employees data measure the output of the enrollment program (e.g. the employees history)

Procedure

To list out the employee's details, follow the steps indicated in section 1.6 above. Furthermore, the procedure elucidated in section 1.5 provides you with more details of the employees' history.

4. Planning and Management for Students and Assets

4.1. Enrollment and Output

Training Institution planning for students' enrolment depends on the availability of reliable information about the following items:

- Assets such as class rooms, dormitories, laboratories, libraries, staff houses, furniture, offices,
- Human resources such as tutors/lecturers, supporting staff
- Course programs available (e.g. Certificate in Nursing, Two Years Diploma in Nursing, Three years program in Clinical officer etc.)

Aim

- To assist users to utilize TIS data to plan for enrollment and determine institutional output

Objectives

- Identify important requirement needed during enrollment
- Prepare tutors, lecturers and supportive staff for the coming students
- Measure the output of the enrollment program

Activities

- Use TIS employees, students and assets data to rule out an enrollment plan according to institutional requirements
- Conduct staff meeting to brief them about the coming students
- Use TIS students data to measure the output of the enrollment of students in a given year at the respective program

Procedure:

To rule out an enrollment plan one need to identify the student enrolment against the institutional intake capacity in a particular academic year. To do this using TIS follow the following steps:

Main Menu → Reports → Students → Enrolment Status

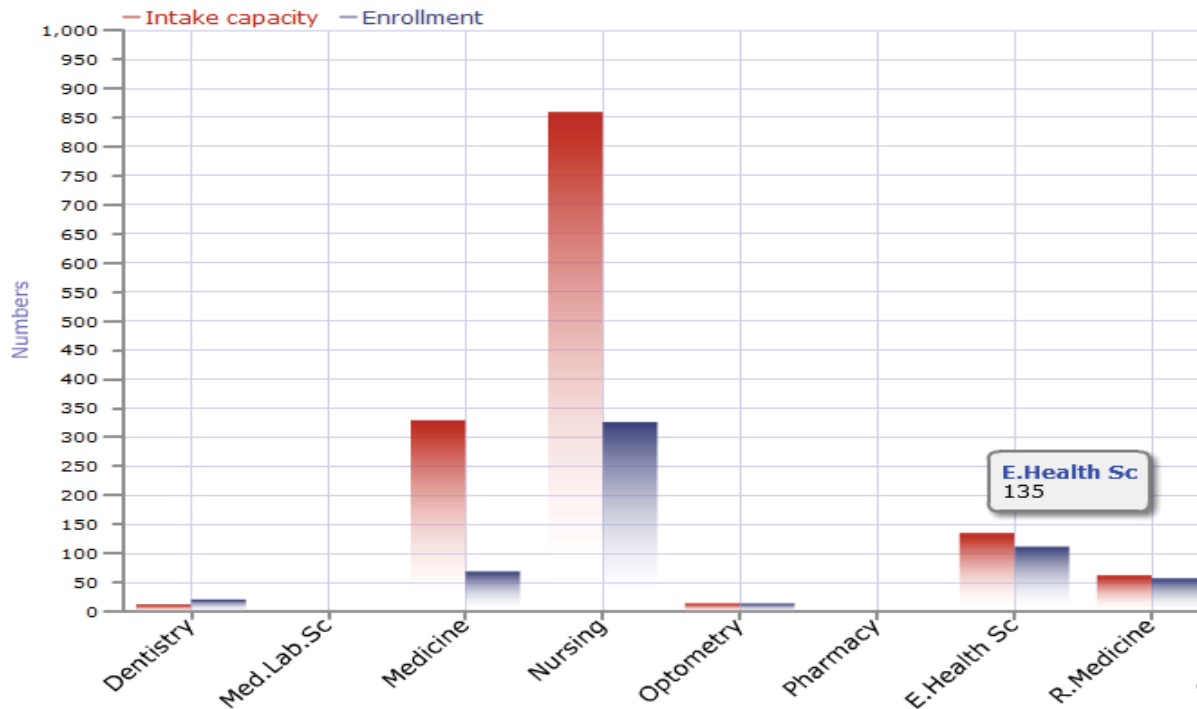
Select the Name of the Institution and the specific Academic Year.

Search for Enrollment Report

Name of the Institute	All ▼
Academic Year	2009/2010 ▼
	Generate Report

Click on Generate Report to produce a graphical report showing the enrolment status against the intake in the selected academic year, as it appears below:

Intake capacity against enrollment in 2009/2010



The enrollment plan is also informed by the institutional staff status. To view the institutional staff status follow the following steps:

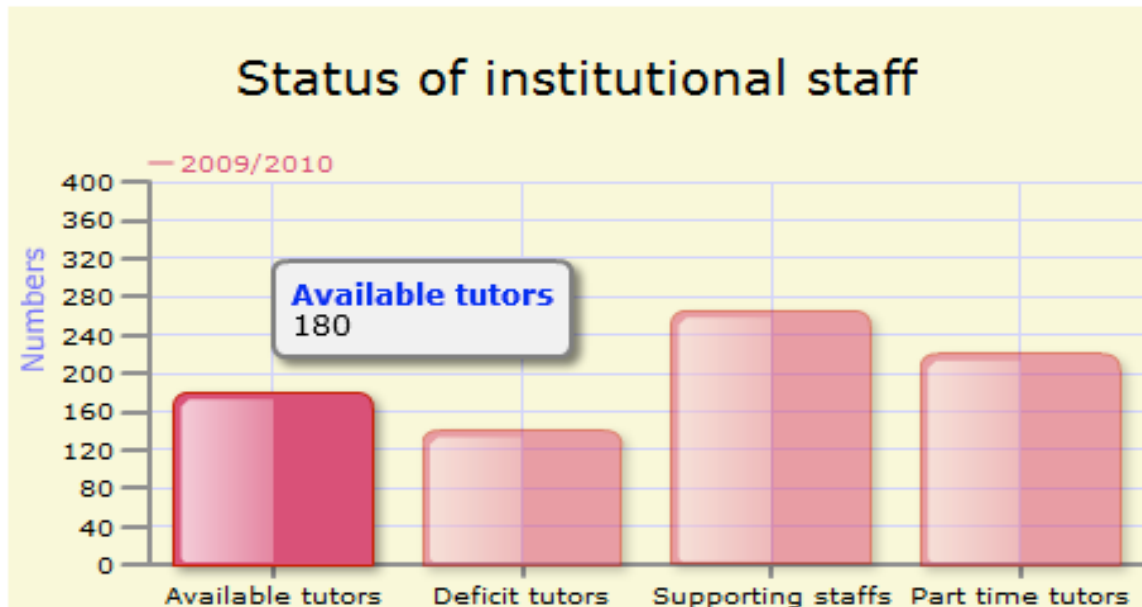
Main Menu → Reports → Employee → Staff Status

Select the All or Name of the Institution and the specific Academic Year as shown on the example below:

Name of the Institute	<input type="text" value="All"/>
Academic Year	<input type="text" value="2009/2010"/>
<input type="button" value="Generate Report"/>	

Staff Status

Click on Generate Report to produce a graphical report showing the staff status in the selected academic year, which will appear as on the example shown below:



4.2. Assets Planning and Management

Effective functioning of any training institution depends very much on the availability of various types of assets in terms number and quality. These assets include classrooms, dormitories, laboratories, libraries, staff houses, furniture, offices, vehicles etc.

Proper planning for existing assets and projection for future needs should be done using reliable TIIS data. For TIIS to provide you with reliable data, it has to be updated regularly whenever there is any change in the institution e.g. acquisition of a new vehicle etc.

Aim

- To help the users to utilize TIIS data to ensure that the available assets are utilized effectively and new needs of assets are established and met.

Objectives

At the end of this unit the user should be able to

- Understand the importance of planning and managing the institutional assets
- Identify the required number of assets
- Identify the available assets
- Project the assets required for the foreseeable future needs of the institution

Activities

- Use TIIS data to identify the required and available assets
- Use TIIS data to project the required assets for the future needs

Procedure:

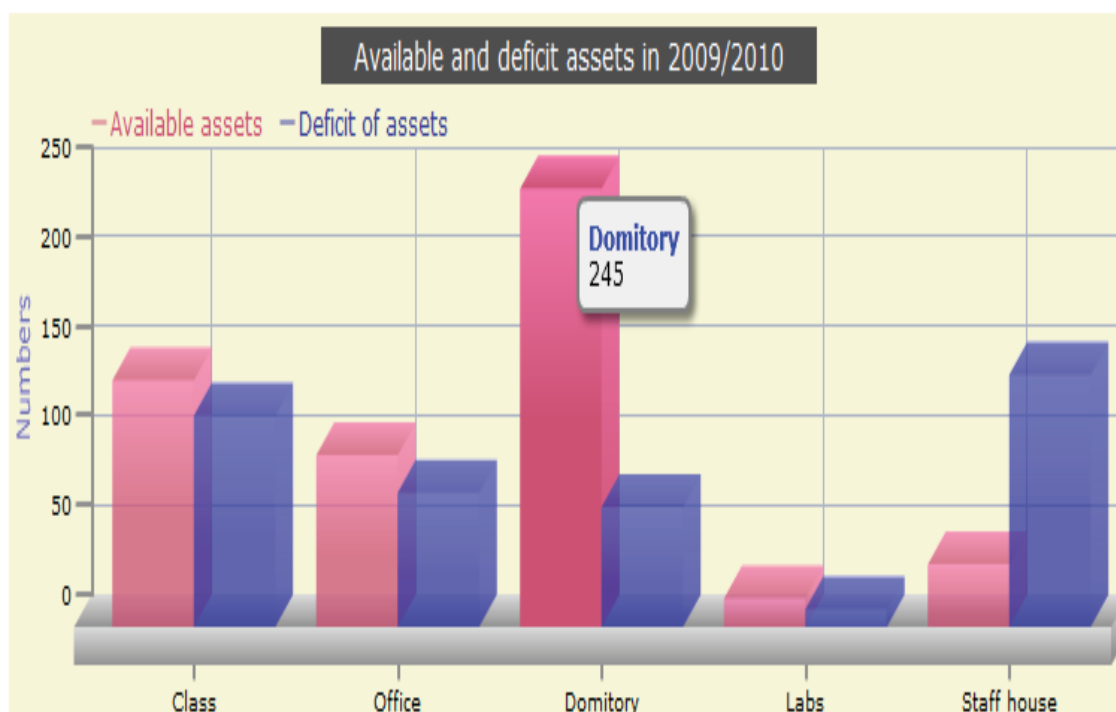
To identify the required and available assets follow the following procedure in TIIS:

Main Menu → Reports → Assets → Assets Status

The following window will appear where you will need to specify the Name of the Institution and the Academic year.

Name of the Institute	All
Academic Year	2009/2010
Generate Report	

Click on Generate Report to generate a graphical report showing the assets status in terms of available assets and the deficit in a particular academic year.



Monitoring and Evaluation of HRH

1.1. Regular Supportive Supervision

Ministry of Health and Social Welfare has revised National Supportive Supervision Checklist and added HRH component like the table below. Therefore, MoHSW and RHMTs are necessary to use this checklist, observe the situation and provide technical input and advices for improvement of HRH planning, management and development

Qualified human Resource are available, well placed and are appraised as per guidelines and standards for health services	Human Resources				
	39	Is there adherence to approved staffing levels of the Ministry of Health and Social Welfare 2010?	Presence of actual staffing level against required (gap analysis).		
	40	Does each cadre have a job description?	Presence of job description/ job list per qualified and skilled human resources/staff allocated according to their qualifications.		
	41	Are health providers satisfied in their work?	Verify whether health providers are satisfied in their work place (refer MoHSW HRH National Supervision Guidelines 2010, Public Service Regulations and Scheme, 2003 AND a formal compensation and benefit system, professional and public services ethics publication materials from the POPSM and Client Service Charter of the MoHSW).		
	42	Does the district health recruitment strategy available?	Verify whether all the funded vacancies are filled in according to available district health strategy.		
	43	Do health facility staffs have reasonable working conditions?	Verify whether the health facility staffs have conducive working place, residence and reasonable transportation to work place.		
	45	Is there functional Human Resource for Health Information System (HRHIS) in place?	Verify availability of HRHIS, and its utilization for planning and management		
	46	Is there HRH retention mechanisms available?	Verify whether the retention of HRH is adhered to (employees should stay and work in the health facility for at least 2 years).		
	47	Is the facility management taking safety measure for health workforce?	Verify whether the health facility is taking safety measures to protect health workforce from occupation hazards including infections.		
	48	Does the facility have a duty roster for staff (Daily/Weekly)	Verify whether the health facility have displayed a well-updated duty roster indicating who does what, where and when.		

1.2. HRH Supportive supervision

1.2.1 Background

Following successful establishment of HRHIS and TIIS by the Directorate of Human Resource at the Ministry of Health and Social Welfare in collaboration with Department of Computer Science University of Dar es Salaam and funding from Health Cooperation Planning Office JICA Tanzania Office. The Ministry of Health and Social Welfare completed the first phase of HRHIS and TIIS National Roll-Out Plan June 2010. The pilot phase covered two (2) regions; Coast (Pwani) and Dar es Salaam. The first phase National Roll-Out plan covered total of 44 sites. Therefore, HRHIS and TIIS National Roll-Out will be completed by the end of October 2011.

1.2.2 Objectives of the HRHIS Supportive Supervision visits

The main objectives of the On-site HRHIS Supportive Supervision is to verify the utilization of HRHIS and TIIS at all sites according to strategic objective 1.1.2 of the HRH Strategic Plan 2008 to 2013.

1.2.3 Level of HRHIS On-site Supportive Supervision visit

The Ministry of Health and Social Welfare is conducting HRHIS and TIIS On-Site Supportive supervision visit to all sites that have already received HRHIS and TIIS Operational Training and equipments. To date, there are 44 sites in five regions (5 RHMTS, 32 CHMTS, 6 National Hospitals, and the Ministry head Office have already received operational training and the equipments

1.2.4 HRHIS On-Site Supportive Supervision visit preparation

One month after the HRHIS and TIIS Operational training, the HRHIS and TIIS Onsite supportive supervision is conducted to all sites. For the preparation of the HRHIS and TIIS Onsite supportive supervision, the following steps are necessary to be taken for smooth execution of the visit.

1.2.5 Roles and Responsibilities of the HRHIS and TIIS On-site Supportive Supervision Team Ministry officials are;

1. To monitor and evaluate the progress of HRH Data Collection and to the HRHIS and TIIS
2. To monitor and evaluate progress of HRHIS and TIIS utilization at the site
3. To provide technical advices to managers and staff for further improvement and management of health workforce by using HRHIS and TIIS
4. To collect necessary information on implementation and management of HRHIS and TIIS implementation activities to support HRHIS and TIIS National Roll-out Plan by the Ministry of Health and Social Welfare

1.2.6 Department of Computer Science are;

1. To update the system whenever necessary and introduce the users to the new features
2. To solve any technical problems (if any) experienced by the system users
3. To facilitate the operationalisation of HRHIS and TIIS at the sites and link with existing systems and link with HMIS such as DHIS

1.2.7 Key Areas of Observation on-sites

At the CHMTs level

1. Observation of the ICT environment and capabilities from HRHIS and TIIS focal personnel on data collection, analysis and data transfer to region office (including the new features)
2. Understanding roles and responsibilities of administration, such as Health facility managers (HFMs), District Executive Directors (DEDs), District Medical Officers (DMOs) to facilitate the utilization of HRHIS and TIIS for HRH planning and management at district level
3. To forward the HRH data to the region by using the system suggested techniques

At the RHMTs Office

1. Observation of the ICT environment and capabilities from HRHIS focal personnel on data collection, analysis and data transfer to region office (including the new features)
2. Understanding roles and responsibilities of administration, such as Hospital Directors (HDs), regional Medical Officers (RMOs) to facilitate the utilization of HRHIS and TIIS for HRH planning and management at regional level
3. To forward the HRH data to the central level by using the system suggested techniques

1.2.8 Expected outcomes

1. The consultants presented the revised HRHIS and TIIS to regional and district focal personnel
2. Emphasized the “utilization of the systems” for HRH planning and management at local level and HRH Data export to the higher level
3. Documented lessons learned from the visit and delivered the visiting report to the MoHSW for discussion and possible solutions to facilitate positive HRHIS and TIIS implementation plan that will guide the National Roll-Out Plan

1.3. HR indicators in Comprehensive Council Health Plan

The Ministry of Health and Social Welfare is introducing CCHP guideline III from Tanzania Fiscal Year 2012. In this document, there are several indicators set for monitoring of HRH planning at district level.

2. Monitoring of Training Institutions

Ministry of Health and Social Welfare has developed Supportive Supervision tool following successful establishment of Training Institutions Information System by the MoHSW. The main objectives of the On-site TIIS monitoring and evaluation is to verify the utilization of TIIS at all sites according to strategic objective 1.1.2 of the HRH Strategic Plan 2008 to 2013.

Framework for Supervision

The framework for supervision in the Training Institutions is shown in Figure 1.

Figure 1: Framework for Supervision in the Training Institutions

Inputs	Process	Outcomes
<ul style="list-style-type: none"> • Supervisors • Supervisees • Vehicles/fuel • Drivers • Guidelines • Instruments/checklists • Stationery • Travel allowances 	<ul style="list-style-type: none"> • Planning/scheduling • Communications of schedule • Budgeting • Preparations • Supervision visit: <ul style="list-style-type: none"> - Direct observation of System - Interviews - Inspection of facility - Feedback - Problem-solving - Coaching (on the job training) - Joint problem solving <ul style="list-style-type: none"> • Reporting • Follow-up 	<p>Direct Outcomes</p> <ul style="list-style-type: none"> • Presentation of the TIIS to all levels of Training Institutions • Emphasized the “utilization of the system” for HRH, enrolment of students and assets planning development and management at Institution level and data export to the higher level. • Documented lessons learned from the visit and delivered the visiting report to the MoHSW for discussion and possible solutions to facilitate positive TIIS implementation plan <p>Indirect Outcomes</p> <ul style="list-style-type: none"> • Improved HRH affairs • Improved Students affairs • Improved planning, development and management of Institutional matters. • Increased utilization of Evidence based data and information for proper planning, development and management of in

Implementation Steps

Step 1: Planning

One month after the TIIS Operational training, the TIIS Onsite supportive supervision is conducted to all sites. For the preparation of the TIIS Onsite supportive supervision, the following step is necessary to be taken for smooth execution of the visit.

Step 2: Preparing For Supervision

Supervisor Preparation

For supervision to be properly targeted at areas of need, supervisors should:

- i. Review TIIS reports from the office to be supervised for the last visit and compare achievements with planned targets to identify any performance gaps, which will need to be followed up during the supervision visit.
- ii. Check with other departments to see if there are other issues that they would like to have followed up during the supervision.
- iii. Review the completed supervisory checklist from the last supervisory visit together with the feedback report sent back to the office and the agreed follow-up action plan.
- iv. Agree on the priority areas that should be followed up during the planned supervision, based on the review of the above items.

The supervisors should make the following arrangements in advance of the supervision:

- i. Ensure that sufficient copies of the Integrated Supervisory Checklists (ISCLs) are available for each member of the supervisory team, with spare copies for the office or Institution facility to be visited.
- ii. Organize the necessary transport.
- iii. Make necessary arrangements for officers conducting the supervision who are entitled to allowances.

Step 3: Conducting Supportive Supervision

Effective Behaviors for Encouraging Performance Improvement

Behaviors that are helpful in gaining the commitment of the supervisees to make efforts in order to improve performance are:

- i. Supervision should be facilitative, not faultfinding.
- ii. Always praise work well done before raising problems.
- iii. If you see a problem, check to see if the supervisee sees the same problem.
- iv. Analyze problems with the supervisee to gain a good understanding of the underlying causes.
- v. Let the supervisee suggest possible solutions. This facilitates ownership and acceptance of the solutions.

Step 4: Starting the Supervision

The supervisory team should arrive at the office to be supervised as scheduled and on time.

The visit should start with introductions, including descriptions of each person's position and responsibilities. The supervisory team should explain the objectives of the visit and agree how the supervision will proceed. The time required for interviews, record review, discussion and action planning should be set at this stage. The supervisors should ensure that the supervisees have a copy of the ISCL and then both teams should complete the identification section of the checklist.

Step 5: Follow-up of Issues from Previous Supervision

There should be a joint review of the findings of the last supervisory visit and the resulting action plan that was developed so that the supervisees can explain the actions they have taken. If the facility being supervised has conducted a self-assessment since the last supervisory visit, then the results of this assessment and the actions taken should also be reviewed.

Step 6: Review of Progress in Implementation of Plans

Both teams should spend a little time reviewing the progress of the institution against the targets set in their plans. This will provide the supervisory team with the overall performance of the office being supervised.

Step 7: Interviews and Record Reviews

This stage involves the completion of the ISCL and should last about 2 – 3 hours. All questions on the checklist should be completed and the supervisors should make notes in the comments column to ensure that the reasons for the assessments made can be referenced in the future. Both supervisors and supervisees should complete the checklist. Before making a judgment on each item on the checklist, the supervisors should verify the situation by reviewing relevant records or documents. If a scored ISCL is being used, the supervisor should calculate the percentage performance achievement by adding up the total scores assigned at the end of each completed section of the checklist.

Step 8: Problem-solving and Action Planning

This stage usually takes between 2 – 3 hours as it involves a lot of discussion and consensus building.

- i. The supervisors and the supervisees should jointly identify problems.
- ii. They should prioritize problems by using the criteria of magnitude of the problem, the impact of the problem on health services, the feasibility of solving the problem, and the resource needed to solve the problem.
- iii. They should jointly analyze priority problems to determine the underlying causes. If this is done, then the right solution may be identified to solve a problem.
- iv. They should jointly identify appropriate solutions to the problems, remembering that both the supervisors and the supervisees may need to contribute to the solution.
- v. Once all priority problems have been analyzed, the supervisors and supervisees should jointly complete a follow-up action plan, detailing who is going to do what and by when in order to fix the identified problems. Each party should prepare a copy of the action plan. Each team should sign both copies and each team will keep a copy as a record for future reference.

Step 9: Recording and Reporting

Supervisory Level

As part of the supervision process, the supervisors should give immediate feedback to the staff of the facility and help them to develop a follow-up action plan to address identified shortcomings. In addition, the supervisors should enter a brief summary of their findings and recommendations into the “Supervision Report Book” at the facility. Within three days of completing a supervisory visit, the supervisors should complete a short report of the findings of the supervision. This report should highlight any special achievements and/or problems found and a copy of the agreed follow-up action plan should be attached. This report should be sent to the facility that was supervised as documentary feedback. The report should also be presented at the next management meeting so that all officers at the supervisory level are given feedback on the findings and agreed follow-up actions.

Supervisee Level

The site that has been supervised should ensure that the supervisors write a brief summary of their findings and recommendations in the facility’s “Supervision Report Book”.

In addition, the completed ISC and the associated follow-up action plan should be filed at the facility for future reference. Members of the facility management committee and staff who were not able to be present during the supervision should be briefed on the findings and the action plan so that all members are aware of what needs to be done.

Step 10: Follow-up after Supportive Supervision

The follow-up action plan agreed during the supervision will contain actions that the supervisee level and, perhaps, the supervisory level, have agreed to implement. After the supervision, both levels should review the action plan to ensure that all their obligations are fulfilled. Some actions need to be taken at the supervisory level and the supervisory level should also decide upon the frequency of follow-up. On the other hand, the supervisee should share supervisory findings at its level and determine to do a self-assessment, using the ISCL, so that they can monitor and improve their own performance.

ANEXES



Ministry of Health and Social Welfare
Human Resource for Health Data Collection Tool

Organization Unit.....

Department/ Agency.....

No:	Variable	Value
1	First Name	
2	Middle Name	
3	Surname	
4	Date of Birth	
5	Sex	
6	Marital Status	
7	Nationality	
8	Education Level	
9	Number of Children/ Dependants	
10	District of Domicile	
11	Check Number	
12	File Number	
13	Registration Number	
14	Terms of Employment	
15	Profession	
16	Present Designation	
17	Superlative Substantive Position	
18	Department	
19	Salary Scale	
20	Monthly Basic Salary	
21	Date of first Appointment	
22	Date of Confirmation	
23	Date of Last Promotion	
24	Employer	
25	Employment Status	
26	Registered Disability	
27	Contacts of Employee	
28	Next of Kin	
29	Relationship to Next of Kin	
30	Contacts of Next of Kin	

.....
Human Resource for Health Information System (HRHIS)
(English Format)



Wizara ya Afra na Ustawi wa Jamii
Fomu ya Kukusanya Taarufa za Mfanyakazi wa Afya

Jina la Kituo cha Kazi		
Idara/ Mamlaka		
Na:	Taarifa Hitajika	Jaza Hapa
1	Jina la Kwanza:	
2	Jina la Kati:	
3	Jina la Ukoo:	
4	Tarehe ya kuzaliwa:	
5	Jinsia:	
6	Hali ya Ndoa:	
7	Uraia:	
8	Kiwango cha juu cha Elimu:	
9	Idadi ya watoto au wategemezi wanaotambulika kisheria:	
10	Wilaya unayoita Nyumbani :	
11	Namba ya mshahara.	
12	Namba ya Faili la Mwajiriwa:	
13	Namba ya usajili kwa waliyonayo:	
14	Aina ya mkataba wa Ajira:	
15	Taluma:	
16	Cheo chako cha muundo cha sasa:	
17	Cheo cha Madaraka/kuteuliwa kama unacho:	
18	Idara unayofanyia kazi:	
19	Daraja la mshahara:	
20	Kiwango cha mshahara kwa mwezi:	
21	Tarehe ya kuajiriwa:	
22	Tarehe ya kuthibitishwa kazini:	
23	Tarehe ya mwisho ya kupandishwa cheo:	
24	Mwajiri:	
25	Hali ya Ajira:	
26	Ulemavu wowote iwapo unao:	
27	Mawasiliano yako (simu, posta, email):	
28	Ndugu wa Karibu (Mrithi):	
29	Mahusiano na Ndugu wa karibu:	
30	Mawasiliano ya Ndugu wa Karibu (simu, posta, email):	

.....
Mfumo wa Kuratibu Rasilimali Watu-Sekta ya Afya (MKURAWASA)
(Fomu ya Kiswahili)

Fill in numbers			
a		b	
a		b	
a=b: fully b<a:partially b=0: unutilised			
HRHIS Focal personnel	Personnel who received HRHIS operational are at work and utilizing the system	<input type="checkbox"/> Personnel who received HRHIS training <input type="checkbox"/> With ability to manage data entry, editing	<input type="checkbox"/> Trained Personnel working on HRHIS
	The number of personnel who received HRHIS operational training		
	The number of personnel who received HRHIS operational training are fully utilizing the system		
	The number of personnel working on HRHIS at their work stations	<input type="checkbox"/> Number of trained Personnel at their work stations	<input type="checkbox"/> Number of On-job trained personnel working on HRHIS at their work stations
Fill in numbers			
a		b	
a		b	
100%=Fully <100%= partially 0=not done			
3.	Data quality Data entry: Completeness, accuracy and timeliness.	<input type="checkbox"/> Total number of HRH available who can be entered into the HRHIS <input type="checkbox"/> Number of compulsory fields entered <input type="checkbox"/> Number of compulsory fields entered correctly <input type="checkbox"/> Number of Quarterly reports submitted timely	<input type="checkbox"/> Number of HRH eligible to be in the HRHIS entered in system <input type="checkbox"/> Total number of compulsory fields <input type="checkbox"/> Total number of compulsory fields <input type="checkbox"/> Total number Of Quarterly reports per year
	Coverage		
	Completeness		
	Accuracy		
	Timely		

		Aspect in HRHIS utilization	Fill in numbers 1=Available 0=Not available	1= utilize 0= Not utilized
4.	HRHIS Utilization	RHMTs/CHMTs or HMTs evidence based on HRH Planning and management produced by utilizing HRHIS	<input type="checkbox"/> Recruitment <input type="checkbox"/> Training <input type="checkbox"/> Promotion <input type="checkbox"/> Personnel Emoluments <input type="checkbox"/> Succession plan	<input type="checkbox"/> Plan for recruitment available <input type="checkbox"/> Training plan available <input type="checkbox"/> Promotion plan available <input type="checkbox"/> PE budget available <input type="checkbox"/> Succession plan available
		RHMTs/CHMTs or HMTs evidence based on HRH Planning and management produced by utilizing HRHIS	Regular HRH updated for planning and management	<input type="checkbox"/> Number of HRH reports produced by using HRHIS
		Report generation for HRH Planning and Management at local level		
		What can be done to improve utilization of the HRHIS		
		Write down the response on the space below.		

TIIS Onsite Supportive Supervision Checklist

Site Details					
Site Name:	Date:				
District	Visit	1	2		
Region	3				
TIIS Focal Personnel Name	Title				
1					
2					
3					
Supervisors Details					
Consultant Name :	Signature:		Date:		
MoHSW Officer Name:	Signature:		Date:		
S/N	Item	Objective	Target	Current visit checked (F/P/Not Done)	Remarks
	ICT Environment	Functionality of the ICT Environment in terms of Internet connectivity and Onsite ICT personnel	IT Environment feasible ICT Equipment available ICT Equipment functioning Is there reliable source of power Is there Internet connection	<input type="checkbox"/> Fully <input type="checkbox"/> Fully <input type="checkbox"/> Fully <input type="checkbox"/> Fully <input type="checkbox"/> Fully	<input type="checkbox"/> Not feasible <input type="checkbox"/> Not available <input type="checkbox"/> Not available <input type="checkbox"/> Not available <input type="checkbox"/> No Internet connection
	TIIS Focal personnel	Personnel who received TIIS Training are at work and utilizing the system	Institution ICT personnel at work Zonal ICT personnel at work Number of personnel who received TIIS Training are at their work stations	<input type="checkbox"/> Fully <input type="checkbox"/> Fully <input type="checkbox"/> Fully	<input type="checkbox"/> Not at work <input type="checkbox"/> Not at work Not at their work stations

TIIS Utilization	Institutional evidence based information on Students, HRH, and Assets for Planning and managing institutions produced by utilizing TIIS	Institutional evidence based information for Planning and managing institutions produced by utilizing TIIS are available, record dates, and outcome of the plan	Student	<input type="checkbox"/> Fully <input type="checkbox"/> Partially	<input type="checkbox"/> Not done			
			HRH	<input type="checkbox"/> Fully <input type="checkbox"/> Partially	<input type="checkbox"/> Not done			
			Assets	<input type="checkbox"/> Fully <input type="checkbox"/> Partially	<input type="checkbox"/> Not done			

<p>TIS Report generation</p>	<p>Report generation for Students, HRH, and Assets Planning and Management at institutional level</p>	<p>Regular Student, HRH , and Assets updated for planning and management is done with evidence Reports</p>	<p>Student</p>	<p><input type="checkbox"/> Fully <input type="checkbox"/> Partially</p>	<p><input type="checkbox"/> Not done</p>
	<p>HRH</p>		<p>Assets</p>	<p><input type="checkbox"/> Fully <input type="checkbox"/> Partially</p>	<p><input type="checkbox"/> Not done</p>
<p>Write down the response on the space below.</p>					
<p>Indicate the advantage of utilization TIS</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>4.....</p> <p>5.....</p> <p>.....</p>					
<p>Challenges</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>4.....</p> <p>5.....</p> <p>.....</p>					

Manual Guide for Checklist

S/N	Item	Targets	Descriptions
1	ICT Environment	ICT Environments feasible ICT Equipments available ICT Internet connection available ICT personnel at work	-Suitable computer room allocated for ICT activities with installed Air Condition, Tables, and chairs -Computers, Printer -Modem or Network equipments (Hub, Switch, Router, UTP cables) -Computer with installed TIIS is connected to internet (Modem) -Availability of Zone ICT personnel -Availability of Institutional ICT Personnel -At least two trained personnel are at institution
2	TIIS Focal personnel	Number of personnel who received TIIS Training are at institution	-At least two trained personnel are at institution
3	Data entry	Data entry Data completeness Data accuracy Data consistency	-Are the data for Student, HRH, and Assets entered? - Are the entered data for Student, HRH, and Assets complete? (for one record all fields should have values not empty or null) - Are the entered data for Student, HRH, and Assets accurate? (every entered value should be the real and truly value) - Are the entered data for Student, HRH, and Assets consistent? (check the instructed formalities that is, syntaxes, rules and semantics for filling fields if they are followed)
4	TIIS Utilization	Data coverage Student Information HRH Information Assets Information	- Are all data for Student, HRH, and Assets entered? (check if all required data are entered) -Are the student information entered, available, and utilized? -Are the HRH information entered, available, and utilized? -Are the Assets information entered, available, and utilized?
5	TIIS Report generation	Student Reports HRH Reports Assets Reports The advantage of utilization TIIS	-Are student current reports used in planning and management? -Are student current reports used in planning and management? -Are student current reports used in planning and management? -These are advantages obtained by institutions after utilizing TIIS (such advantages are, data are readily available at any time, easily identification of availability and deficit of Assets and HRH at the institution etc)

