



THE MALI RMNCH SCORECARD

Background

A Call to Action

The Mali under-five child mortality rate declined from 129/1,000 live births in 1990 to 96/1,000 live births in 2012-2013 and the maternal mortality ratio declined from 582/100,000 births in 2001 to 368/100,000 births in 2012-2013. Some progress has been made although the rates are still quite high and the country is not on track to achieve the millennium development goals (MDG) for both maternal and child health. Mali has committed to strengthen and ensure equitable access to high impact maternal and child health interventions to accelerate progress towards reducing preventable morbidity and mortality.

The Response

Mali introduced the Reproductive, Maternal, Newborn and Child Health (RMNCH) Scorecard as an accountability and action management tool to enhance accountability and drive action to improve performance for RMNCH. The scorecard tool has been in use in Mali since June 2014. In July 2015, the Ministry of Health and Public Sanitation in Mali convened a 10-day exercise to identify opportunities to further strengthen the impact of their RMNCH scorecard and management tool. With the support of the African Leaders Malaria Alliance (ALMA), and in partnership with key development partners including WHO, UNICEF, UNFPA, USAID and UNICEF information was collected through discussions, questionnaires and sharing of documentation and processes at national, regional and district levels. At national level, this included the Secretary General of Health, Technical Advisor, Directors, Programme Managers, Programme staff and development partners. In the three regions of Bamako, Segou and Koulikoro and seven districts visited, this included senior management and officers responsible for the health information systems.

Progress

Mali has regularly produced the RMNCH scorecard beginning with quarter 4 of 2013. All districts and regions complete the spreadsheet template with quarterly data that is used to update the scorecard every month. The national programmes receive a copy of the updated scorecard every quarter and individually hold one or more technical working group meetings, incorporating partners, to discuss performance and propose actions to improve or sustain progress. The regions and districts do not yet receive the actual scorecard but instead use the scorecard data to prepare charts to monitor indicator performance. Both regions and districts have routine quarterly and monthly forums respectively where data for health indicators are reviewed, analyzed, actions proposed for indicators falling below target and outcomes of previous proposed actions assessed.

Strengths of the Mali RMNCH Scorecard

- Data for indicators updated quarterly in the scorecard comes from the routine health information system (système d'information santé (SIS) and the goals and targets are drawn from national strategic plans. There is a feedback mechanism between community, district, regional and national level to ensure quality of data used for the scorecard.
- Programmes have used the scorecard to conduct periodic reviews to improve and harmonize calculation methods of the key indicators from baseline to enable cross comparison of performance at all levels of implementation
- The scorecard has resulted in action to address underperformance. For example, the HIV programme used the scorecard to pinpoint the need for training of district health workers to strengthen service delivery for prevention of mother to child transmission of HIV and to successfully mobilize resources from partners to implement the training.

Review of priority indicators performance at district level has led to local actions to improve service delivery. Bamako District 3 relocated cervical cancer screening adjacent to the family planning clinic and added maternal post-natal review at the immunization clinic to improve uptake of these services. The outcome of these actions will be reviewed at subsequent meetings.

Future actions

- The Ministry of Health and Public Hygiene (MSHP) will together with partners put back on track, plans for a high level launch of the RMNCH scorecard, that were postponed during the Ebola crisis.
- The MSHP and partners are in the process of rolling out the harmonization of the collection of health data and migration to DHIS2 to strengthen availability and use of quality data for planning and implementation of health programmes.
- The Ministry is committed to strengthening the use and impact of the scorecard by increasing access to the platform at all levels, and ensuring involvement of the elected regional governments (governors and presidents of regional assemblies) to take ownership of the management tool and use it for resource allocation.
- Development partners, in particular USAID and UNICEF have committed to supporting the MSHP with the training of staff in regional and district health services in the management and use of the scorecard.

Conclusion

Mali's RMNCH scorecard provides a strong foundation for the country to build on as it strengthens its health systems to accelerate progress towards improving maternal health and child survival. The scorecard will also help Mali communicate priorities when mobilizing vital resources and focusing on accountability for maternal and child health outcomes, which will be required in the transition from MDGs to the sustainable development goals (SDGs).