



Rwanda RMNCAH scorecard

Background

The Rwanda RMNCAH scorecard was introduced in 2017 to enhance the reporting system and to track the performance of RMNCAH indicators, identify bottlenecks and take action. In September 2020, the scorecard indicators were reviewed and updated with 14 priority indicators chosen for the current scorecard. In December 2020, the scorecard was decentralised, with all districts trained on the use of the tool to further enhance data-driven decision making.

How it works

The scorecard is produced directly in DHIS2 on a quarterly basis and discussed at several national level meetings. These include senior management meetings, sub-national level during district coordination meetings, health facility supervision meetings as well as in the RMNCAH Technical Working Group which brings together all the government and development partners institutions acting in the matter related to RMNCAH issues.

Impact

Data quality

The RMNCAH scorecard led to improved data quality and increased frequency and regularity of reporting performance data. The scorecard platform provides an opportunity to rapidly identify areas of data inaccuracy given that the data are colour coded grey (out of range). Additionally, through the implementation review of the scorecard, the discussion on the data provides an opportunity to review and improve data use and quality.

Service delivery improvements

The scorecard led to the increased uptake of family planning. The scorecard identified a number of districts in red for family planning, which used to be delivered only through health facilities. After the scorecard review and bottleneck analysis, a different approach was implemented in districts with low coverage, with community health workers going door to door to mobilise the population, provide services and refer clients to health facilities for long lasting methods.

The scorecard analysis also led to the increased uptake of post-partum family planning in health facilities by starting education sessions during antenatal care in health centres and availing a family planning focal point at hospital going around in postpartum rooms to provide education session and family planning services.

The scorecard analysis showed that antenatal care 1 and antenatal care 4 indicators were in red in many districts, and this has led the ministry of health to engage with districts focusing to mobilise and integrate the indicator in their performance contract with the government and partners to mobilise resources to increase uptake.

Key success factors

- Fully integrated within DHIS2
- Shared with partners
- Decentralised and integrated into routine supervisions of health centres

Partners engaged in supporting the scorecard

- World Health Organization (WHO)
- UNFPA
- UNICEF

