GHANA'S HEALTH SCORECARDS

What is a scorecard?
- A color-coded chart showing the performance of priority indicators at national, regional, district and CHPS zone levels.
- Ghana has a malaria, RMNCAH, nutrition, and community scorecard. HIV and TB scorecards are under development.
- If the scorecard shows red, people are more at-risk of getting sick and dying. If the scorecard is green, there is less risk.
- Colors make it simple to identify problems and plan targeted actions. Arrows show if the situation is getting better or worse.
- The objective of the scorecard is to optimise the use of existing data for action, accountability, advocacy, and resource mobilisation.

How does it work?
Three weeks after the end of each quarter PPME GHS produces the scorecards on an online scorecard web platform using data from the national health information system (DHIMS). Regional and District Health Teams, as well as communities, analyse the data and create action plans to address the priority issues. The action plans are entered into the online "action tracker" tool, where users can track the progress of action implementation and mobilise support.

What is the community scorecard (CSC)?
Every quarter, Community Health Management Committees (CHMCs) convene community members to discuss the quality of healthcare services in their CHPS compound or hospital and develop Community Health Action Plans (CHAPS). The community scores are used to create digital community scorecards and the action plans are uploaded to the "action tracker" tool. The community scorecard provides MPs direct access to quarterly community feedback on health services and provides an opportunity for MPs to allocate resources to action plans that require support. The CSC has been rolled out in approximately 23% of CHPS zones.

How can Members of Parliament use scorecards?
Members of Parliament can use scorecards to see the performance of priority health indicators in their constituencies and across the country. The scorecard can be used to find the most underperforming districts and CHPS zones and mobilise targeted support. By having direct access to routine data, Members of Parliament will be further informed and in a better position to use political power to allocate resources based on the data and community feedback.

How to access scorecards?
Download the 'country scorecard' app on your mobile phone or tablet or go to www.rmncah.org on any web browser. To request a scorecard account contact the Director of PPME GHS: alberta.biritwumnyarko@ghsmail.org or Deputy Director: andrews.ayim@ghsmail.org

How to access scorecard training material?
The ALMA Scorecard Hub (www.scorecardhub.org) has a learning course designed for Ghana's Members of Parliament.

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COMMUNITY SCORECARD INDICATORS AND TARGETS

Community Scorecard Indicators	Community Scorecard Indicator explanations (Communities discuss these indicators every quarter and report the progress on the online web platform)	Not on track	On track	Source*
Caring, respectful and compassionate care	Patients that receive caring, respectful, and compassionate care are more likely to continue accessing health services. This indicator seeks to understand how patients feel they are treated when accessing services.	70%	95%	DHIMS 2
Waiting time for provision of health care services	Long waiting times can discourage people from seeking treatment in health facilities. Long waiting times can also indicate a staffing shortage. This indicator seeks to understand how the community perceives waiting times in their health facility.	70%	95%	DHIMS 2
Availability of medicines, diagnostic services and medical supplies	A strong and responsive health system requires adequate stocks of medicine, diagnostics services, and medical supplies. This indicator seeks to understand whether community members perceive there is sufficient medicine and medical supplies available in the health facilities.	70%	95%	DHIMS 2
Availability, accessibility of health care service and infrastructure	This indicator seeks to understand whether the infrastructure and availability of health services is adequate as expressed by communities.	70%	95%	DHIMS 2
Leadership and management of facilities	This indicator seeks to understand how communities perceive the leadership and management of the health facility.	70%	95%	DHIMS 2
Cleanliness and safety of facility	This indicator seeks to understand how communities perceive the cleanliness and safety of a health facility.	70%	95%	DHIMS 2
Conducting of home visits by CHO/CHN	Community Health Officers (CHO) and Community Health Nurses (CHN) should conduct regular home visits to understand the health needs of their population and provide diagnostic and treatment services when necessary.	70%	95%	DHIMS 2
Conducting of home visits by CHW/CHV	Community Health Workers (CHO) and Community Health Volunteers (CHN) should conduct regular home visits to understand the health needs of their population and provide diagnostic and treatment services when necessary. This indicator seeks to understand whether communities feel that there are sufficient home visits by CHWs and CHNs.	70%	95%	DHIMS 2
Assessment of NHIA services	This indicator seeks to understand whether the National Health Insurance Authority's (NHIA) cards are being accepted at the health facility to access services and medicines.	70%	95%	DHIMS 2
Total Assessment Score	This indicator is a total overall aggregate score of all indicators.	70%	95%	DHIMS 2

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MALARIA SCORECARD INDICATORS AND TARGETS

Malaria Scorecard Indicators	Malaria Scorecard Indicator explanations	Not on track	On track	Source*
Malaria test positivity ratio (sentinel sites)	Sentinel sites are health facilities from a limited number of geographically defined areas selected to produce high-quality malaria surveillance data based on laboratory confirmed cases. This indicator measures the proportion of positive malaria cases from 30 sentinel sites.	54%	37%	DHIMS 2
% Parasitemia prevalence: children aged 6–59 months with malaria infection (by microscopy)	Parasitemia is the quantitative content of parasites in the blood. It is used as a measurement of parasite load and an indication of the degree of an active parasitic infection. This indicator shows the percentage of children aged from 6-59 months that tested positive to malaria with microscopy.	22.3%	15.4%	Survey
Inpatient malaria deaths per 100,000 persons per year	Refers to the deaths in hospitalized patients from malaria. This indicator shows the number of inpatient deaths for a population of 100,000 people per year.	10	7	DHIMS 2
% of children under 5 years old who slept under an ITN the previous night	Insecticide-treated bed nets (ITNs) are a form of personal protection that has been shown to reduce malaria illness, severe disease, and death due to malaria in endemic regions. This indicator shows the percentage of 5 years old who slept under an insecticide treated net the night before the survey.	37%	56%	Survey
% of pregnant women who slept under an ITN the previous night	Insecticide-treated bed nets (ITNs) are a form of personal protection that has been shown to reduce malaria illness, severe disease, and death due to malaria in endemic regions. This indicator shows the percentage of pregnant women who slept under an insecticide treated net the night before the survey.	35%	53%	Survey
% of population using ITN among those with access to an ITN	Insecticide-treated bed nets (ITNs) are a form of personal protection that has been shown to reduce malaria illness, severe disease, and death due to malaria in endemic regions. This indicator shows the percentage of population that slept under an insecticide treated net the night before the survey.	35.4%	54%	Survey
% of pregnant women who received 3 doses of IPT for malaria during ANC visits during their last pregnancy	Intermittent preventive treatment (IPT) against malaria is a malaria control strategy aimed at reducing the burden of malaria in pregnant women. This indicator shows the % of women who received at least 3 doses of IPT during antenatal care visits during their pregnancy.	38.4%	58.5%	Survey
% of population in target areas protected with IRS in the last 12 months	Indoor residual spraying (IRS) is the application of insecticide to the inside of dwellings, on walls and other surfaces that serve as a resting place for malaria-infected mosquitoes. IRS kills mosquitoes when they come in contact with treated surfaces, preventing disease transmission. This indicator shows the proportion of	53.1%	81%	IRS report

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Malaria Scorecard Indicators	Malaria Scorecard Indicator explanations	Not on track	On track	Source*
	population in target areas protected with indoor residual spraying in the last 12 months.			
Under five case fatality rates	Percentage of confirmed under five malaria cases that result in the death of the patient. This indicator shows how good malaria case management is at the hospital or facility. It may also show that patients are accessing treatment late.	0.260	0.180	DHIMS 2
% of suspected malaria cases that received a parasitological test (RDTs or microscopy)	A Rapid Diagnostic Test (RDT) is a quick way of diagnosing malaria infection by detecting malaria antigens in a person's blood. Microscopy involves diagnosing a suspected case by observing a sample of blood under a microscope. This indicator shows the percentage of suspected malaria cases that received any type of test (RDT or microscopy). To prevent death from malaria, all suspected cases should be given a test to confirm whether they require treatment.	54%	83%	DHIMS 2
% of confirmed malaria cases treated with ACT at health facilities	Artemisinin-based combination therapies (ACTs) are the first-line therapy in almost all countries where malaria is endemic due to the high efficacy, tolerability, and ability of ACTs to reduce ongoing transmission of the parasite. This indicator measures the proportion of confirmed malaria cases that received ACTs at the health facility.	59%	90%	DHIMS 2
% of pregnant women on Intermittent preventive treatment at least three doses at ANC according to national policy	Malaria in pregnancy increases the risk of maternal and newborn mortality. The use of at least 3 doses of sulfadoxine-pyrimethamine (SP) for intermittent preventive treatment of malaria (IPTp-SP) is recommended for preventing the consequences of malaria during pregnancy. This indicator shows the proportion of women that received at least 3 doses of IPT.	35%	54%	DHIMS 2
Proportion of ANC registrants given ITN	This indicator shows the percentage of pregnant women that received insecticide treated nets during their antenatal care visit. As pregnant women are more likely to have a severe reaction to malaria, all pregnant women should be given a mosquito net during their antenatal care visits.	47%	72%	DHIMS 2
Proportion of children due for measles 2 given ITN	Children get two doses of MMR (measles-mumps-rubella) vaccine, starting with the first dose at 12 through 15 months of age, and the second dose at 4 through 6 years of age. This shows the proportion of children that are given insecticide treated nets when they come to get their second vaccine of measles.	47%	72%	DHIMS 2

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REPRODUCTIVE, MATERNAL, NEWBORN, CHILD, AND ADOLESCENT HEALTH (RMNCAH) SCORECARD INDICATORS AND TARGETS

RMNCAH Scorecard Indicators	RMNCAH Scorecard Indicator explanations	Not on track	On track	Source*
Maternal Mortality Ratio	This indicator shows the number of maternal deaths for every 100,000 live births during the year.	350	195	DHMIS 2
Neonatal Mortality Rate	This indicator shows the proportion of newborn deaths that happen in the first 28 days of life.	30	20	DHMIS 2
Infant Mortality rate	This indicator is defined as the number of infants deaths within the first year of life for every 1,000 live births.	50	30	DHMIS 2
Under 5s Mortality rate	This indicator is defined as the number of deaths among children under five (5) years of life for every 1,000 live births.	80	50	DHMIS 2
CPR	Contraceptive prevalence is the percentage of women who are currently using, or whose partner is currently using, at least one method of contraception, regardless of the method used. This indicator shows the proportion of women in fertile age using modern methods of contraception at the time of the survey.	25%	30%	DHS
Total CYP	Estimated protection provided by contraception methods during the year based on the volume of contraceptives sold.	1.5 million	2 million	DHS
KMC initiation for low-birth-weight babies	Proportion of babies weighing less than 2.5kg who were admitted to the newborn care unit and initiated on Kangaroo mother care. Kangaroo mother care is a method of care of preterm infants. The method involves infants being carried, usually by the mother, with skin-to-skin contact.	60%	80%	Survey
Adolescent Birth Rate	This indicators shows the proportion of adolescents who become pregnant.	12%	10%	Survey
Acceptor Rate	Proportion of family planning acceptors out of the total number of women in reproductive age.	20%	40%	DHIMS 2
Tetanus Diptheria coverage	This indicator measures the percentage of pregnant women that have received 2 Tetanus Diphtheria immunizations during the year.	60%	80%	DHIMS 2
% adolescents (10–19 yrs) ANC registrants	This indicator shows the proportion of pregnant women who are adolescent (10-19 years) attending antenatal care (ANC) compared to total Antenatal cares registrants for a specific period. Adolescent women are more at-risk during delivery.	13%	10%	DHIMS 2
% of pregnant women registering during their first trimester	This indicator shows the percentage of pregnant women that register for antenatal during the first 12 weeks. When pregnant women register early, potential problems can be detected and addressed early. Coming during the first 12 weeks also allows for more total number of visits. WHO recommends pregnant women attend antenatal care at least 8 times during pregnancy.	50%	60%	DHIMS

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RMNCAH Scorecard Indicators	RMNCAH Scorecard Indicator explanations	Not on track	On track	Source*
ANC 4th visit	The percentage of pregnant women that registered for at least 4 antenatal visits out of the total number that came for their first antenatal care visit. Having at least 4 antenatal care visits greatly reduces the risk to the mother and baby.	65%	80%	DHIMS
ANC 8th visit	The percentage of pregnant women that registered for at least 8 antenatal visits out of the total number that came for their first antenatal care visit. WHO recommends pregnant women attend antenatal care at least 8 times during pregnancy.	40%	50%	DHIMS
% pregnant women with anemia at 36w	Anemia is a condition in which red blood cells cannot carry sufficient oxygen to the body. This indicator measures the proportion of pregnant women who were anemic at week 36 of their pregnancy. Pregnant women with anemia during the first two trimesters are at greater risk of having a pre-term delivery or low-birth-weight baby.	15%	10%	DHIMS 2
% Skilled delivery	This indicator measures the percentage of deliveries conducted by skilled attendants (nurses and doctors). Deliveries conducted by a skilled assistant are much safer, as the skilled personnel have received training for dealing with emergencies.	50%	65 %	DHIMS 2
Institutional Maternal Mortality Ratio	This indicator shows the number of maternal deaths for every 100,000 live births in a specific period.	150	110	DHIMS 2
Still birth rate	The proportion of babies born with no sign of life at or after 28 weeks of gestation.	2%	1%	DHIMS
% PNC registrants within 48h	This indicator shows the proportion of mothers and babies that received postnatal care (PNC) within 48 hours of giving birth. Postnatal care within 48 hours allows trained experts to identify and address problems in the earliest days of life when the newborn and mother are most vulnerable.	50%	80%	DHIMS 2
Institutional Neonatal Mortality Rate	The proportion of institutional neonatal deaths for every 1,000 live births	6	5	DHIMS 2
Penta 3 Coverage	Pentavalent vaccine (Penta 3) is a combination of five vaccines-in-one that prevents diphtheria, tetanus, whooping cough, hepatitis b and haemophilus influenza type b, all through a single dose. This indicator shows the proportion of children under one year receiving Penta 3 vaccine during the year. Children that do not receive a Penta 3 vaccine are more at-risk to morbidity and mortality.	80%	95%	DHIMS 2
Measles-Rubella 2	Rubella is a contagious disease caused by a virus. Most people who get rubella usually have a mild illness, with symptoms that can include a low-grade fever, sore throat, and a rash that starts on the face and spreads to the rest of the body. This indicator shows the percentage of children that received the second dose of measles-rubella vaccine.	80%	95%	DHIMS 2

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RMNCAH Scorecard Indicators	RMNCAH Scorecard Indicator explanations	Not on track	On track	Source*
Men A	Meningitis is an inflammation of the fluid and membranes (meninges) surrounding the brain and spinal cord. Viral meningitis can be prevented through vaccination. This indicator shows the proportion of children of 18 months that has been vaccinated against meningitis.	80%	95%	DHIMS 2
Proportion of functional CHPS in Elec. area	This indicator shows the proportion of functional Community Health Planning and Services (CHPS) demarcated in an electoral area. A functional CHPS zone is considered an important element in delivering and planning health services with the support of the community.	50%	70%	DHIMS 2
Average DHIMS2 data completeness (Midwives Form A)	This indicator shows the completeness of the data that should be reported on a quarterly basis on the health management information system (DHIMS2). The indicator shows the total forms received out of the total forms expected in a given period. It is important for health facilities to report consistently in order to monitor health system performance and address gaps systematically.	90%	95%	DHIMS 2

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NUTRITION SCORECARD INDICATORS AND TARGETS

Nutrition Scorecard Indicators	Nutrition Scorecard Indicator explanations	Not on track	On track	Source*
Dietary Diversity of Women 15-49 years	Dietary diversity is a qualitative measure of food consumption that reflects household access to a variety of foods and is also a proxy for nutrient adequacy of the diet of individuals. This indicator looks at women between 15 to 49 years old who have consumed 5 food groups the day before.	50%	60%	Survey
Early initiation of breastfeeding Rate	Colostrum is an important source of nutrition and immune protection for the newborn in the first hour after birth. This indicator shows the percentage of newborns that initiated breastfeeding within 1 hour of birth.	70%	80%	Survey
Exclusive breastfeeding rate for children (0-5 months)	This indicator shows the percentage of children from 0-5 months receiving only breastmilk. Breastmilk is an important source of nutrition and immunity transfer to the baby. WHO recommends that babies should be exclusively breastfed during their first 6 months of life.	50%	75%	Survey
Stunting rate - % stunted	Stunting refers to a child who is too short for his or her age. Stunting is the failure to grow both physically and cognitively and is the result of chronic or recurrent malnutrition. This indicator shows the percentage of stunted children between 0 -59 months.	20%	8%	Survey
Wasting rate	Wasting refers to a child who is too thin for his or her height. Wasting, or acute malnutrition, is the result of recent rapid weight loss or the failure to gain weight. A child who is moderately or severely wasted has an increased risk of death, but treatment is possible. This indicator shows the percentage of children aged 0–59 months who are wasted.	5%	10%	Survey
Underweight rate	Underweight is a composite form of undernutrition that can include elements of stunting and wasting (i.e., an underweight child can have a reduced weight for their age due to being too short for their age and/or being too thin for their height). This indicator shows the percentage of children aged 0–59 months who are underweight.	10%	5%	Survey
Minimum Acceptable diet for children 6-23 months	This indicator measures the percentage of children aged 6-23 months receiving 5 of the 8 recommended food groups.	20%	40%	Survey
Percentage of pregnant women with HB checked at registration	This indicator shows proportion of pregnant women who were tested for hemoglobin during their registration.	80%	90%	DHMIS
Percentage of pregnant women anaemic at registration	Anemia is a condition in which red blood cells cannot carry sufficient oxygen to the body. Pregnant women with anemia during the first two trimesters are at greater risk	40%	20%	DHMIS

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Nutrition Scorecard Indicators	Nutrition Scorecard Indicator explanations	Not on track	On track	Source*
	of having a pre-term delivery or low-birth-weight. This indicator measures the proportion of pregnant women who were tested for anemia during their registration.			
Percentage of pregnant women anaemic at 36 weeks	Anemia is a condition in which red blood cells cannot carry sufficient oxygen to the body. This indicator measures the proportion of pregnant women who were anemic at week 36 of their pregnancy. Pregnant women with anemia during the first two trimesters are at greater risk of having a pre-term delivery or low-birth-weight baby.	40%	20%	DHMIS
% IFA6 at ANC	Iron Folic Acid is used to treat or prevent low blood levels of iron (such as those caused by anemia or pregnancy). Iron is an important mineral that the body needs to produce red blood cells. Pregnant women especially require iron and folic acid supplements to keep the mother and baby healthy. This indicator measures the proportion of pregnant women receiving IFA supplements for at least 6 months.	60%	80%	DHMIS
Routine Vitamin A Coverage (12-59months)	Programs to control vitamin A deficiency increase children's chances of survival, reduce the severity of childhood illnesses, ease the strain on health systems and hospitals, and contribute to the well-being of children, their families, and communities. This indicator shows the proportion of children aged 12-59 months dosed with Vitamin A within 6 months.	60%	80%	DHMIS
Timely initiation of complementary feeding	Timely introduction of complementary feeding involves providing liquid, solid or semisolid food in addition to breast milk, starting from age of six month. This indicator measures the proportion of children receiving other family foods at month 6-8.	60%	80%	DHMIS
Percentage of infants 0-3months exclusively breastfeeding	This indicator shows the percentage of children from 0-3 months receiving only breastmilk. WHO recommends that babies from 0-6 months exclusively breastfeed. This indicator focuses on the first three months of life.	60%	80%	DHMIS2
CMAM Cure rate	The indicator for Community management of acute malnutrition (CMAM) cure rate shows the proportion of children 6-59 with a malnutrition that were enrolled in treatment and cured of their malnutrition and discharged.	75%	85%	DHMIS2
CMAM Defaulter rate (OPC)	This indicator shows proportion of children 6-59 months who were cured and discharged but then subsequently defaulted and required treatment again.	15%	10%	DHMIS 2
Average DHIMS2 data completeness (Nutrition)	This indicator shows the completeness of the nutrition data that should be reported on a quarterly basis on the health management information system (DHMIS2). The indicator captures the number of total reports received out of the total number reports expected in a given period.	90%	95%	DHMIS 2

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