iHRIS

iHRIS, IntraHealth's free, open source health workforce information systems software, helps countries around the world track and manage data to improve access to health care. Countries use it to capture and maintain high-quality information for health workforce planning, management, regulation, and training. Developed in collaboration with national stakeholders beginning in 2005, with support from USAID, iHRIS is now used in 22 countries to manage over a million health worker records at a potential cost savings of over $275 million when compared to commercial software.

IntraHealth
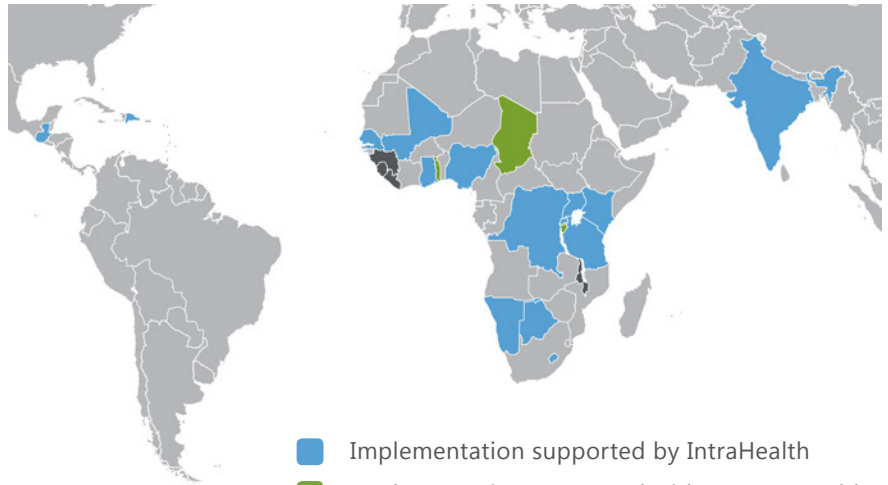INTERNATIONAL
Because Health Workers Save Lives.

KEY APPROACHES

iHRIS has been developed into multiple, interoperable applications to meet the needs of a variety of stakeholders and support health workers throughout their life cycle:

- **iHRIS Manage** allows tracking and management of health workers actively engaged in service delivery
- **iHRIS Qualify** enables professional councils and associations to register, license, and regulate health workers to support increased quality of care
- **iHRIS Plan** projects the likely changes in the health workforce under different scenarios and compares them with projected needs
- **iHRIS Retain** helps countries plan and cost recruitment and retention interventions
- **iHRIS Train** assists in tracking and managing health worker preservice education pipelines and in-service training.

Global Support Community: IntraHealth emphasizes open access to iHRIS through publishing the software, source code, and other resources at www.ihris.org and by supporting a global community of software developers and information technologists with an online forum and interactive discussions and training sessions. The community raises and resolves technical issues on its own; contributes code to iHRIS; provides tools, guidance, and case studies for the iHRIS Implementation Toolkit; and translates iHRIS applications into other languages.

International Standards and Interoperability: iHRIS conforms to a variety of international standards for data exchange to ensure that data are accessible to all parts of a health system. IntraHealth worked with an international standards organization, Integrating the Healthcare Enterprise, to develop a new global standard for exchanging health worker information. In addition, IntraHealth collaborates in the Open Health Information Exchange (OpenHIE) initiative. IntraHealth leads the Health Worker Registry (HWR) Community for OpenHIE through which it has co-authored two international standards and led the development of a reference implementation of an HWR that adheres to these standards as well as the World Health Organization's

KEY APPROACHES (CONTINUED)

Minimum Data Set for HWRs. Health worker registries enable countries to link the various systems (including iHRIS) in their health information architecture.

HIGHLIGHTS OF RECENT WORK

- In **Uganda**, the Ministry of Health used iHRIS data on vacancies and needed health workers in successfully advocating to Parliament for an investment of $20 million to fund recruitment and deployment of 7,200 additional health workers in 2012-13. The increased availability and more equitable distribution of health workers has likely contributed to the country's significant increases in selected HIV/AIDS, family planning, and maternal, newborn, and child health indicators. The Uganda Medical and Dental Practitioners Council used iHRIS Qualify to increase relicensure compliance from fewer than 100 to more than 2,300 doctors, and IntraHealth supported combining iHRIS data with mobile phone technology to create a mobile directory that allows citizens to send a text message to the Council to find out if a provider is registered, licensed, and has a specialty—bolstering the country's fight against "quacks" pretending to be health care professionals.

- In Jharkhand state, **India**, health sector leaders used iHRIS data to inform decisions to redeploy skilled specialists and recruit nearly 450 new medical officers during 2012-13 to staff health facilities with Ob/Gyn staffing shortfalls. This has contributed to significant increases in the availability and utilization of maternal health services across the state, including a 740% increase in women receiving three antenatal care visits, a nearly 12 times increase in facility births, and a nearly 20 times increase in cesarean sections for women in

need of them. The additional medical officers have increased access to health services for an estimated 900,000 Jharkhand residents.

- In **Mali**, the Ministry of Public Health piloted iHRIS Manage in Sikasso region, with results showing that urban facilities had disproportionately more midwives than health centers in rural areas where 63% of the population lives. Taking action, regional leaders implemented a rotation system, in which midwives work one week each month in a rural health center. The Ministry completed national roll-out of iHRIS Manage in 2015 and is using data to serve a range of needs, including guiding deployment of newly-recruited health workers, tracking international commitments, and advocating for more health workers.

- IntraHealth collaborated with UNICEF, USAID, and other partners to develop mHero, a free, mobile communications platform using iHRIS and SMS to allow ministries of health to engage in two-way communication with health workers. mHero is being used in response to the Ebola outbreak to help strengthen health system communications in **Guinea**, **Liberia**, and **Sierra Leone**.

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