

Improving HIV/TB Data Quality and Reporting Through a Point-of-Care Electronic Medical Record System: Experience From Kagadi Hospital, Mid-Western Uganda

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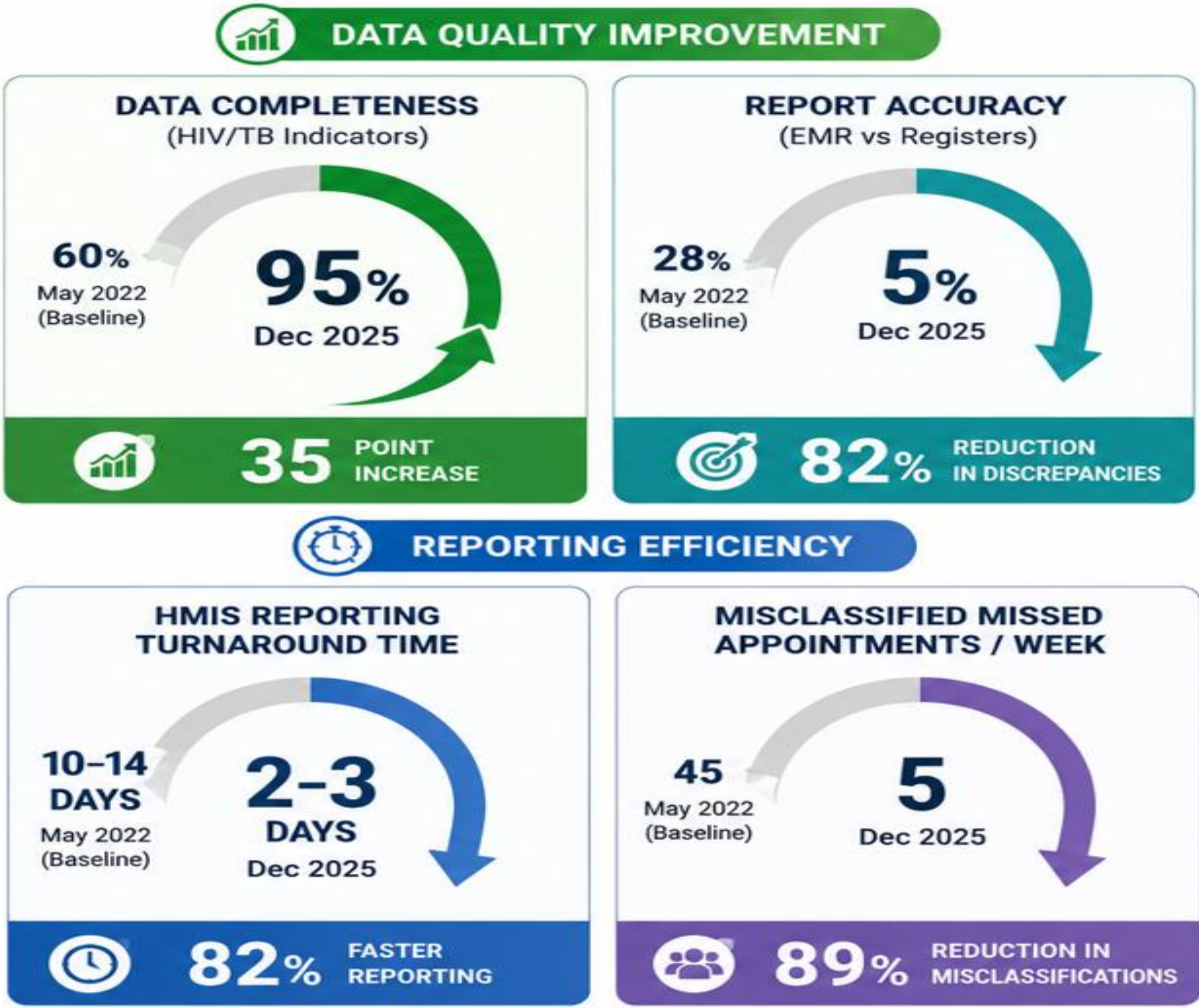
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Background

- Accurate HIV/TB data are essential for monitoring treatment outcomes and improving service delivery.
- Before April 2022, Kagadi Hospital used a hybrid paper-based and retrospective EMR data capture.
- A *Point-of-Care (PoC) EMR system* was introduced to improve *real-time data capture, reporting, and data use*.

Lessons



Success Factors

- Routine mentorship and technical support
- District and Hospital leadership
- Staff engagement and ownership
- Continuous data quality assessments

KEY CHALLENGES



Intermittent Local Area Network connectivity
Unreliable LAN connectivity disrupts access to the EMR, causes delays in data entry and synchronization, and affects service delivery.



Limited computer literacy
Some users lack basic computer skills, making it difficult to navigate the EMR system with confidence and efficiency.



Resistance to workflow changes
Some staff may be resistant to adopting new processes, preferring old ways of working, which can slow down EMR adoption and impact outcomes.

A Point-of-Care EMR System Transforms Data into Action and Action into IMPACT

Conclusion

- PoC EMR implementation improved HIV/TB data quality, reporting efficiency, and routine data use
- Real-time digital systems strengthen HIV/TB services and data-driven decision-making.

NEXT STEPS



01 Scale PoC EMR across all departments
Expand the successful PoC to all departments to ensure unified, efficient and comprehensive digital health records.



02 Strengthen interoperability
Enhance integration with existing systems and partners to enable seamless data exchange and continuity of care.



03 Expand EMR into community DSD models
Extend EMR use beyond facility walls to support community-based and differentiated service delivery.



04 Continue mentorship and user capacity building
Invest in ongoing mentorship, training and support to build confident users and sustain EMR adoption.

OUR JOURNEY



Pre-Implementation

- Paper-based & retrospective EMR
- Data backlog
- Missing data
- Delayed reporting



Implementation

- PoC EMR System deployed across service points (triage, clinical rooms, lab, pharmacy)
- Staff trained and workflow optimized



Quality and use

- CQI
- Mentorships
- Audits and dashboards drive data quality & use



Sustained impact

- Better data
- Faster reporting
- Improved client care
- Stronger programs

BEYOND NUMBERS: REAL IMPACT



REAL-TIME VISIBILITY
Dashboards enable instant insights and service gaps identification



BETTER DECISION
Accurate data informs action at facility and district level



IMPROVED ACCOUNTABILITY
High-quality data drives performance and strengthens reporting integrity



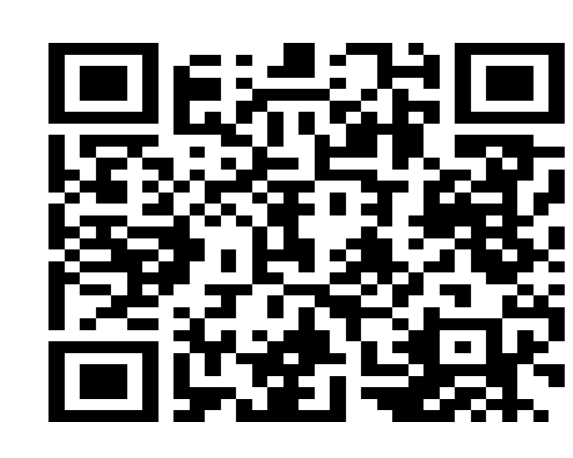
BETTER CLIENT CARE
Timely data supports continuity of care and reduces missed appointments



STRONGER PROGRAMS
Evidence-based planning advances HIV/TB epidemic control



Ministry of Health



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