Within Uganda, steps are being taken to strengthen the capacity of the Ministry of Health (MOH), districts and professional councils to effectively and efficiently manage their human resources for the delivery of health and HIV/AIDS services. In 2007, through the five-year Uganda Capacity Project (UCP), a new, integrated electronic Human Resources Information System (iHRIS) was developed to assist with this task. Its goal is to contribute to better management of the country’s health workforce, ensure an adequate number of health workers were hired, and certify they have the capacity and competence to deliver quality health services where needed. iHRIS is built on free, open source software distributed under the General Public License (GPL) and links all human resource data from the time professionals enter pre-service training to when they leave the workforce.

The national Mobile Telephone Reference Dictionary was developed to protect patients from individuals posing as health professionals, placing patients at a high risk of untreated or mistreated illness or injury resulting in death. People can easily verify whether their providers are licensed.

The iHRIS system consists of electronic databases for storing information, software for entering and updating data and reporting, and analysis tools. iHRIS databases have been established at various institutions including four health professional councils. The districts can access and use professional council databases to verify registration and licenses of applicants, essentially screening applicants and thus identifying forgery cases and health workers who are not in good standing with the professional councils. The data from iHRIS databases is also used to verify payroll data to eliminate ghost workers.

The iHRIS’ Mobile Reference Directory allows members of the public to easily and affordably verify that a clinic and/or a medical professional is registered and licensed to practice by sending an SMS message with the doctor’s or clinic’s name to a widely publicized shortcode. The directory contains information on 3,877 doctors and dentists as well as 3,500 facilities.

A reply is received with the doctor’s full name, registration number, qualification and license status. If it is a clinic, a response with the clinic licensure status plus the supervising doctor’s name is received. If the “doctor” is determined to be unregistered, the registrar undertakes the necessary action to prevent the practice from continuing.

Over the past twelve months (from October 2011 to September 2012), 3,172 inquiries were made on doctors and 457 on private clinics. The Registrar of the Medical Council researched 58 frequently asked about doctors and 31 private clinics.

Two of the doctors were found to be herbalists and
the concerned clients were alerted. Two other doctors (one from Ntungamo and one from Kabale) were arrested and taken to court for illegal practice. Three others are still at large.

LESSONS LEARNED
- iHRIS’ Mobile Reference Directory has played a role in improving the timely availability of accurate and up-to-date human resources for human resources for health (HRH) data for policy, planning and management use
- The advocacy behind the recent Government of Uganda (GOU) budget approval to increase recruitment of additional health personnel was strengthened by the availability of accurate data on staffing gaps, disaggregated by health worker cadre

CONCLUSION
A strong HRIS enables leaders to quickly answer key policy and management questions affecting health services delivery, and is contributing to more effective deployment of doctors and dentists. The Mobile Telephone Reference Directory is protecting patients from unlicensed doctors. UCP plans to implement the same mobile directory service for other health professions, such as nurses and midwives, in the near future.