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### RESEARCH ARTICLE

#### INFLUENCE OF HEALTH RECORDS MANAGEMENT PRACTICE ON DISEASE SURVEILLANCE AND NOTIFICATION SYSTEM IN ATAKUNMOSA WEST LOCAL GOVERNMENT AREA, OSUN STATE, NIGERIA.

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#### Abstract

This paper reported the influence of health records management practice on disease surveillance and notification system in Atakumosa West Local Government Area of Osun State. The study aimed at combining insights of how health records management practice bridges different aspects of disease surveillance and notification system in Atakumosa West Local Government Area of Osun State.

The study adopted survey research design to establish relationship between health records management practice and disease surveillance and notification system in Atakumosa West Local Government Area of Osun State. Structured questionnaire was used to elicit data on the variables under investigation and a total of 115 out of 120 respondents completed the questionnaire with a total of 96% response rate. Simple percentage distribution was used to analyze and answer the research questions posed in this study.

The inferences drawn from existing literatures, postulated theories and data collected from the field indicated that correlation exists between health records management practice and disease surveillance and notification System, as evident in previous research works, case studies and analyzed data.

The study recommended the need for the management of Atakumosa West Local government to procure and install appropriate information technology to sustain health records management practice and disease surveillance and notification system. Also, capacity building, adequate funding, provision of logistics and working materials that will guarantee timely collection, processing, and availability of health information are very imperative to a result-oriented health

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records management practice and an evidence-based disease surveillance and notification system in Atakumosa West Local Government Area of Osun State, Nigeria.

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## Introduction:-

A functional disease surveillance and notification system is essential for defining problems and taking action. The use of epidemiological method in the service of surveillance equips local government area and local health team to set priorities, plan interventions, mobilize and allocate resources and predict or provide early detection of outbreaks (National Guideline on Surveillance, 2014). Disease surveillance and notification system is the act of carefully watching or maintaining a constant watch on the trend of occurrence of mortality and morbidity and prompt reporting of diseases within a geographical area, through systematic data collection and processing to the appropriate health authority for further necessary action. The surveillance data are usually obtained from health records that are domicile in the health facilities (Omole, 2008).

The need for availability of accurate, high quality health information, at the right place and at the right time calls for a health records management system that can gather, organize, analyze, and summarize data into reports and assist in the successful implementation of an active disease surveillance and notification system that will result into effective control of disease epidemic in a geographical area. Health records management practice consist of the provision of appropriate infrastructure, the establishment of mechanisms and procedures, for collecting and analyzing health data to provide needed information to be used as a management tool for informed decision making at all levels of health care delivery system (National Health Management Information System Policy, 2006).

The present Atakumosa west local government area of Osun State has its headquarters at Osu. It was created in 1976, in a bid to implement the 1976 local government reforms exercise of the Muritala / Obasanjo regime and Atakumosa west local government Area is one of the thirty local government areas in Osun State with the headquarters at Osu along Ife-Akure highway. The local government is largely rural and is made up of eleven (11) health districts or wards. It has a total population of 310,050, according to 2006 population census.

There are thirty (30) health centers in the local government area. The health centers are evenly distributed to cover all health districts within the local government area. Health records management practice and disease surveillance activities are carried out in these health centers by the one hundred and forty seven (147) health workers that are evenly distributed among the thirty (30) health centers in the local government area. The local government area comprises of fifty-two (52) towns and villages.

## Objective of the Study

The main objective of this study is to investigate the influence of health records management practice on disease surveillance and notification system in Atakumosa West Local government Area of Osun State. The specific objectives are; to:

1. Examine how health records are managed in Atakumosa west local government area of Osun State.
2. Ascertain the strategies for implementing disease surveillance and notification system in Atakumosa west local government area of Osun-State.
3. Establish the relationship between health records management practice and disease surveillance and notification system in Atakumosa west local government area of Osun State.
4. Find out the effect of health records management practice on disease surveillance and notification system in Atakumosa west local government area of Osun State.
5. Identify and proffer solution to problems associated with health records management practice as related to disease surveillance and notification system in Atakumosa west local government area of Osun State.

## Research Questions

In line with the objectives stated above, the study aimed to answer the following research questions:

1. How is health records managed in Atakumosa west local government area of Osun State?
2. What are the methods for implementing disease surveillance and notification system in Atakumosa west local government area of Osun State?

3. Is there any relationship between health records management practice and disease surveillance and notification system in Atakumosa west local government area of Osun State?
4. What are the effects of health records management practice on disease surveillance system in Atakumosa west local government area of Osun State?
5. What are the major challenges facing health records management practice as related to disease surveillance and notification system in Atakumosa west local government area of Osun State?

## **Literature Review**

### **Disease Surveillance and Notification System**

Ajayi, (2000) describes disease surveillance as the mechanism and procedures for acquiring and analyzing data, supplying information for monitoring health activities and for the management of health care program or system. Data generated by disease surveillance system must be treated carefully, correctly and completely in order to get a desired result. Fawole (2006) also describes surveillance as the “exercise of continuous scrutiny and vigilance of the distribution and spread of infectious diseases and other related factors, with sufficient accuracy and completeness to provide a basis for effective control. It is an ongoing monitoring of the trends of health conditions and their effect and causes in order get and share information for the improvement of disease control and that surveillance is information for action which is an essential part of disease control that is applicable to communicable and non-communicable conditions.

Disease surveillance and notification system involve the continuous scrutiny and watchfulness over the distribution and spread of infections and related factors, with sufficient accuracy, completeness and representativeness to provide the basis for effective control, and the formal reporting of diseases to appropriate health authorities or quarters. Disease notification is the official reporting to the appropriate designated authorities of the occurrence of specific condition (Adetola, 2007). Lucas (2014) reports that disease surveillance and notification system have two main objectives;

The recognition of acute problems which demand action e.g. the recognition of an outbreak of a major infectious disease such as cholera, typhoid, smallpox, etc or the fresh introduction of it into a previously uninfected area, must be recognized promptly so that infection may be confined to the smallest possible area within the shortest possible time.

The system is used to provide a broad assessment of specific problem in order to discern long-term trends and epidemiological patterns. This surveillance provides the specific basis for ascertaining the major health problem in an area, thereby serving as a guide for planning implementation and assessment of health program for the control of communicable diseases. Disease surveillance and notification system is very essential for the proper assessment of priorities in public health programs.

The report of Omole (2015) supports the above that the concept of disease surveillance and notification system includes three main features; The systematic collection of all relevant data, orderly consolidation and evaluation of these data and prompt dissemination (reporting) of the results to those who are in position to take action. Therefore contributions of various authors on disease surveillance and notification system indicated that it is a continuous and constant exercise which must be in place at every tier of health care delivery system, in order to generate reliable, relevant, up-to-date, adequate, timely and reasonably complete health information for effective disease control, through active surveillance and notification of any suspected or confirmed case of disease to the appropriate health authority. Such notification is usually done by the disease surveillance and notification officer of Atakumosa west local government as at when due to facilitate prevention and control of diseases in the Local government Area.

### **Integrated Disease Surveillance and Response**

The integrated disease surveillance and response is a strategy and a tool to promote rational use of resources by integrating and streamlining common surveillance activities. Disease control and prevention objectives are successfully met when resources are dedicated to improving the ability of health officials to detect the targeted diseases, obtain laboratory confirmation of the disease, and use thresholds to initiate action at local government area level (W.H.O. guidelines on Integrated Disease Surveillance, 2013). The goal of integrated disease surveillance and response is to improve the ability of local government areas to detect and respond to diseases and conditions that cause high levels of death, illness and disability in the local government area’s catchment area. Strengthening skills

and resources for integrated diseases surveillance and response will result in improved health and wellbeing of communities in Atakumosa west local government area.

Fatiregun, (2013) submits that, Disease Surveillance is divided into passive surveillance, where routine reports are sent to the local government area's disease surveillance and notification office, as well as active surveillance where the surveillance officer embarks on regular visit and records review at all health facilities within the local government area and reports are compiled. Therefore disease surveillance activities in local government system mainly comprises four types; notifiable disease reporting system, laboratory-based surveillance, hospital-based surveillance and population-based surveillance.

#### **Revised List of Nigeria I.D.S.R. Priority Reportable Diseases, Conditions and Events**

The following are the epidemic-prone diseases, international health regulations recommended diseases, diseases targeted for eradication/elimination and other diseases of public health importance that are targeted for surveillance and notification activities in Nigeria:

Epidemic – Prone;

1. Cholera.
2. Diarrhoea with blood (shigella)
3. Measles.
4. Meningitis.
5. Viral hemorrhagic fever (lassa)
6. Human Influenza caused by a new sub – type.
7. Yellow fever.

#### **I.H. R. Recommended;**

1. SARS.
2. Small pox.
3. Dengue.
4. Anthrax.
5. SARI.

#### **And Diseases Targeted for Eradication Elimination.**

1. Poliomyelitis
2. Dracunculiasis.
3. Leprosy.
4. Neonatal Tetanus.
5. Lymphatic Filariasis.
6. Tuberculosis.

#### **Other Diseases of Public Health Importance;**

1. Diarrhoea in children < 5 years of age.
2. Pneumonia in children < 5 years of age.
3. Malaria.
4. Onchocerciasis
5. HIV / AIDs.
6. Sexually transmitted infections.(STIs).
7. Trypanosomiasis.
8. Buruli ulcer.
9. Asthma.
10. Diabetes mellitus.
11. Epilepsy.
12. High blood pressure.
13. Sickle cell disease.
14. Malnutrition.
15. Plague.
16. Trachoma.
17. Typhoid.

18. Hepatitis – B.
19. Pertusis.
20. Human rabies.
21. Schistosomiasis.
22. Noma (FMOH,2014:60)

### **Health Records Management Practice**

Health record begins at birth and ends at death. It is a collection of information from multiple sources with a wide variety of uses. It includes data from the individual patient record as well as aggregate data on patient population, such as clinical and non-clinical data, epidemiological data, demographic data, research data, reference data and coded data. Therefore health records managers must ensure the availability of high quality data and information to support effective disease surveillance activities in the health care industry (Helen 2015,). Health Information is the life blood of the health care delivery system, the patient's record in manual or automated form contains medical information that describes all aspects of patient care. It is an essential tool in running the day-to-day health services rendered to patients in the hospital (Huffman 2011).

Fatiregun, (2006) asserted that health information system is a combination of people, equipment, data collection and processing methods, coordinated to produce information in support of planning, decision making and management of health care system. Also Olumide, (2006) opined that health information system is a collection of data base personnel, procedures, and instruments which are organized to develop and utilize available facts to become information which will be used to facilitate decision making.

The submission of Osundina, (2007) also supported the above that, health information management practice involves all the tools, techniques, devices and human resources used for recording clear concise and accurate history of a patient's life and illness, written from the medical point of view, including the significant characteristics of a patient and events occurring in the course of professional care for the purpose of providing the best medical care to the patient, teaching, research, medical care evaluation studies and legal requirements. This establishes the fact that health records provide reliable, accurate and high quality information for disease surveillance and notification system activities. Therefore health records practitioners must ensure availability of high quality data and information to support health care services delivered in order to provide a reliable, legally veritable source of evidence for decisions and actions. The records are managed both manually and electronically.

Health record manager is a specialist or practitioner, saddled with the responsibility of providing accurate documentation and registration of patient health information and up to date health statistical information on hospital activities analysis, both on curative and preventive health services, in-patient and out-patient through the process of gathering and collection of patient information and manipulation for meaningful decision making. (Omole, 2013). He is responsible for maintaining component of health information system, consistent with the medical, legal, accreditation and regulatory requirements of the health care delivery system, including disease surveillance and notification system.

### **Relationship between Health Records Management Practice and Disease Surveillance and Notification System**

Health records management practice include all devices used for recording and processing of significant characteristics of patient and their illnesses to produce comprehensive data base on every patient treated in the hospital. While disease surveillance and notification system involve official reporting of designated diseases or disease syndromes to designated health authorities (Fatiregun, 2012). Hence an effective disease surveillance system is majorly dependent on a well-organized health records management system which is the main source of surveillance data that will produce information for action. The under listed surveillance functions establish the fact that relationship exist between a well-organized health records system and an effective disease surveillance and notification system:

1. Identify cases and conditions; using standard case definitions, to identify priority diseases and conditions.
2. Report suspected cases or condition to the next level by investigating the case or condition and submit detailed report.
3. Analyze and interpret data; compile the data and analyze it for trends analysis, compare information with previous periods and summarize the results.

4. Investigate and confirm suspected cases, outbreaks or condition; gather evidence (including laboratory confirmation) about what may have caused the outbreak or event and use it to select appropriate control and prevention strategies.
5. Respond; mobilize resources and personnel to implement the appropriate public health responses.
6. Provide feedback; Encourage future cooperation by communicating with levels that reported outbreaks, cases and conditions about the investigation outcome and success of response efforts.
7. Evaluate and improve the system; assess the effectiveness of the surveillance and response system, in terms of timeliness, quality of information, preparedness, thresholds, case management and overall performance. Take action to correct problems and make improvements. (Federal Ministry of health, 2014).

Therefore the above stated surveillance functions confirm the need for an effective health records management practice in all health facilities in Atakumosa west local government area, with an approach that is simple and compatible with the existing national health management information system in order to demonstrate evidence-based and verifiable disease surveillance and notification system outcomes.

#### **Effects of Health Records Management Practice on Disease Surveillance and Notification System**

Mogli, (2011).Posited that hospital compiles and keeps health record primarily for the benefit of the patient, the protection of the hospital, the physician and the community. However, the personal and clinical data contained therein are the sources of information for public health surveillance which involves an ongoing systematic collection, analysis, interpretation and dissemination of health data for action. Fatiregun, (2012) explained that the flow of information in disease surveillance and notification system includes the following:

1. Health Facility; Collect data and report directly from health records, using specified form.
2. Local Government Area; Collect form (reports) from health facilities, collate and forward to the state ministry of health.
3. State Ministry of Health; Collate data and send to the epidemiological division of the Federal Ministry of health and the planning research and statistics division of the state Ministry of health.
4. Federal Ministry of Health; Collate and forward reports to World Health Organization and the national health management Information System division of the Federal ministry of health.

Therefore, the relevance of health records management practice in disease surveillance and notification system activities cannot be underestimated. Health records in the health facilities are the data sources, because data flow starts from health facilities where health services are provided, which is the first step in data generation for an effective disease surveillance and notification system for prompt detection and control of disease outbreak. In view of this, constant availability of standardized national health management Information System forms, specialized program forms and all necessary health records forms that are needed for capturing data on all reportable surveillance indicators are imperative for accurate health records management practice that remain the bedrock of an evidence-based disease surveillance and notification system.

#### **Challenges of Health Records Management Practice**

Adindu (2008) reiterates that, well designed and managed patient records management practices generate reliable, relevant, accurate and understandable information, useful to decision makers for evidence based health care delivery services. Osundina (2014) establishes that weak, uncoordinated and the dearth of reliable data and health records management techniques can hamper the measurement of the impact of health care services on the population, which may negatively affect the health status of the society.

The report of Abubakar (2014) which identifies inadequate finance, shortage of staff, shortage of modern equipments and materials inadequate coordination of data flow, as major challenges militating against effective patient records management practices indicates the need for improvement in health records management techniques. Popoola (2010) also submits that poor perception of health records management practice, lack of improved health records planning and management practice, inadequate skilled manpower in information and communication technologies, and lack of mission oriented leadership with the right perception of health records as national health care resource are some of the limitations of health records management practices in Nigeria.

#### **Methodology:-**

This study adopted the descriptive survey research design. The method is considered appropriate in order to find relationship between health records management practice and disease surveillance and notification system in

Atakumosa west local government Area of osun State. The study investigates the target population (comprising 147 health workers out of which 120 was randomly selected), organize the data gathered, summarize and presents it in a statistical table using simple percentage analysis. The study used questionnaire to elicit data on the variables under investigation and a total of 115 out of 120 respondents completed the questionnaire with a total of 96% response rate. The data analysis consists of frequency tables. And relevant journal articles, magazines and the internet resources were also consulted for peer supports.

### Data Analysis

A total of one hundred and twenty (120) health workers out of the one hundred and forty-seven (147) staff strength were randomly selected for this study, through the use of ballot paper. Simple percentage distribution was used to analyze and answer the research questions posed in this study, because of the qualitative nature and descriptive method of analysis of the information collected and used in the study. Copies of questionnaire were administered on one hundred and twenty (120) respondents that made up of health workers in Atakumosa west local government area. Out of which one hundred and fifteen (115) dully completed and returned their questionnaire, with a total of 96% response rate.

### Answers to Research Questions

The data generated through the questionnaire were processed on the statistical package for social sciences (SPSS) and the analysis consisted of frequency tables which were summarized as follows:

#### Research Question 1: How is health records managed in Atakumosa west local government area of Osun State?

**Table 4.1:-**Percentage distribution showing methods of health records management practice in Atakumosa west local government area

Activities	Population of respondent	Frequency	Percentage	Rank
Fully manual method (Paper form)	115	86	75%	1 <sup>st</sup>
Partially computerized form (computer assisted form)		22	19%	2 <sup>nd</sup>
Fully electronic method (Paperless form)		07	6%	3 <sup>rd</sup>

**Source:** Field Survey, 2016

This question was meant to capture how health records are managed in various health facilities in Atakumosa west local government area. It was interesting to find out that a total of 86 (75%) of the respondents indicated that health records are managed manually (paper form) in all health facilities in the local government area. Some health facilities have computer systems donated to them by world health organization and national health management information system implementation unit of the federal ministry of health to assist health records management activities, this accounted for 19% of the respondents that indicated partially computerized method. Also as monthly summaries of all health facilities' reports are uploaded online through district health information system (dhis-2) application, an internet based application that is designed specifically for data upload directly to the national health management information system data base, made some respondents (6%) opined that paperless form of data transmission also exist in Atakumosa west local government area.

#### Research Question 2: What are the methods of implementing disease surveillance and notification system in Atakumosa west local government area of Osun State?

**Table 4.2:-**Percentage distribution, showing methods of implementing disease Surveillance and notification system in Atakumosa west local government area

Activities	Population of respondent	Frequency	Percentage	Rank
I.D.S.R. strategy	115	102	89%	2 <sup>nd</sup>
Sentinel surveillance		77	67%	5 <sup>th</sup>
Active surveillance		98	85%	3 <sup>rd</sup>
Passive surveillance		12	10%	6 <sup>th</sup>

SMS/online notification		88	77%	4 <sup>th</sup>
Use of notification forms		112	97%	1 <sup>st</sup>

**Source:** Field Survey, 2016

Table 4.2 shows that most respondents (97%) attested to the use of notification forms for reporting of notifiable disease. 89% of the respondents agreed that integrated disease surveillance and response strategy is used for surveillance activities in the local government area, because surveillance activities are streamline through the use of a uniform notification form (IDSR form 001, 002, &003) to harmonize data on all the targeted diseases.

77% of the respondents also established the fact that short messages and e-mails are used for the immediate reporting of epidemic prone diseases and sentinel surveillance strategy, involving selection of high priority health facilities for daily surveillance visit was also in place in Atakumosa west local government as responded by 67% of the respondent.

Surveillance in the local government area was adjudged to be an active one in which the surveillance officers use to embark on regular visit and records review at all health facilities within the local government area as indicated by 85% of the respondents. While 10% of the respondents opined that instances of passive surveillance also exist, where routine reports are sent to the local government disease surveillance office.

**Research Question 3: Is there any relationship between health records management practice and disease surveillance and notification system in Atakumosa west local government area of Osun State?**

**Table 4.3:-**Percentage distribution showing the relationship between health records management practice and disease surveillance and notification system in Atakumosa west local government area of Osun State

Activities	Population of respondent	Frequency	Percentage	Rank
Patient records and registers are the sources of surveillance information.	115	97	84%	4 <sup>th</sup>
Disease notification is done based on available information in health records.		105	91%	3 <sup>rd</sup>
Sociological and physiological data in health records are useful for case investigation and contact tracing.		113	98%	1 <sup>st</sup>
Trend analysis for early detection and control of outbreak is done through records' review.		109	95%	2 <sup>nd</sup>
Surveillance data validity and integrity are assured through health records.		89	77%	5 <sup>th</sup>

**Source:** Field Survey, 2016

Table, 4.3 establishes the relationship between health records management practice and disease surveillance and notification system in Atakumosa west local government area as 98% of the respondents opined that sociological and physiological data in health records are used for case investigation and contact tracing, 95% of the respondents indicated that trend analysis for early detection and control of outbreak is done through records review and 91% responded that disease notification is done based on available information from health records. Also 84% of the respondents identified patient records and registers as the main sources of surveillance information, while 77% of the respondents indicated that validity and integrity of surveillance data are assured via health records.

**Research Question 4: What are the effects of health records management practice on disease surveillance system in Atakumosa west local government area of Osun State?**

**Table 4.4:-**Percentage distribution showing the effects of health records management practice on disease surveillance and notification system in Atakumosa west local government area

Activities	Population of Respondents	Frequency	Percentage	Rank
Trend analysis by person, place and time		72	63%	4 <sup>th</sup>

is made possible via health records	115			
Next line of action is dictated by incidence and prevalence rates calculated from available health information		65	57%	5 <sup>th</sup>
Evidence - based resource mobilizations is made possible via available facts and figures in health records		81	70%	3 <sup>rd</sup>
Monitoring an Evaluation of specific health intervention is made easy through availability of data on selected in indicators.		105	91%	2 <sup>nd</sup>
Immediate response to outbreak is made easy by the available health information		109	95%	1 <sup>st</sup>

**Source:** Field Survey, 2016

Table 4:4; Confirms the effects of health records management practice on disease surveillance and notification system in Atakumosa west local government area as 95% of respondents indicated that Immediate response to outbreak is made easy by the available health information which lead to restriction of further spread of disease, 91% of the respondents are of the opinion that monitoring and evaluation of specific health intervention is made easy through availability of data on selected indicators and 70% of the respondents agreed that evidence – based resource mobilization is made possible via available facts and figures. Also 63% of the respondents indicated that trends analysis of diseases occurrence by person, place and time is made possible through accurate health records management: While 57% of the respondents are of the opinion that incidence and prevalence rates calculated via health information serves as a pointer to the next line of action for disease surveillance and epidemic control.

**Research Question 5: What are the major challenges facing health records management practice as related to disease surveillance and notification system in Atakumosa west local government area of Osun State?**

**Table 4.5:-**Percentage distribution, showing challenges facing health records management practice as related to disease surveillance and notification system in Atakumosa west local government area of Osun State?

Challenges	Population of Respondents	Frequency	Percentage	Rank
Poor records management facilities	115	69	60%	6 <sup>th</sup>
Inadequate funding/ financial resources		95	83%	3 <sup>rd</sup>
Poor logistics and inadequate working materials		98	85%	2 <sup>nd</sup>
Lack of regular sensitization training		106	92%	1 <sup>st</sup>
Inactive case search and poor work motivation		61	53%	7 <sup>th</sup>
Irregular drugs supply and consumables' supply		78	69%	5 <sup>th</sup>
Poor perception of importance of records management by health workers		84	73%	4 <sup>th</sup>

**Source:** Field Survey, 2016

Table 4:5 identifies seven (7) major challenges confronting health records management practice as related to disease surveillance and notification system in Atakumosa west local government area as indicated by the responses of the respondents as follows; lack of regular sensitization (92%), poor logistics and inadequate working materials (85%), inadequate funding and financial resources (83%), poor perception of importance of records management by health workers (73%) Irregular drugs and consumable supply (69%), and poor records management facilities (60%)

**Summary of Findings**

The study investigated the influence of health records management practice on disease surveillance and notification system in Atakumosa west local government area of Osun State. Five research questions were posed in determining

the relationship between health records management practice and disease surveillance and notification system. The findings are discussed below;

1. Findings revealed that health records are managed in all health facilities in Atakumosa west local government area; that is records are manually managed (paper form). More attention is paid to manual records management than computerized or electronic health records system.
2. The study further revealed that integrated disease surveillance and response approach and active surveillances methods including use of notification forms are the main strategies adopted for surveillance activities in the local government area.
3. Finding from this study revealed that relationship exists between health record management practice and disease surveillance and notification system.
4. The study showed the effect of health records management practice on disease surveillance and notification system in Atakumosa west local government area as indicated in the literature. And
5. Finally, the study revealed the major challenges confronting health records management practice as related to disease surveillance and notification system in Atakumosa west local government area.

### **Conclusion:-**

Health record management practice by all standards is the back bone of diseases surveillance and notification system, which involves the official reporting of designated disease to designated health authority for action. The information to be reported are contained in the patients' health records, the information needs to be compiled, analyzed, interpreted and disseminated for decision making and feedback for efficient allocation of resources for an effective disease control activities.

In the course of this study, inferences were drawn from existing literatures, postulated theories and collected data that correlation exists between health records management practice and disease surveillance and notification system as evident in the findings obtained from the data analysis and the work of Omole (2008) which reported that, the quality, efficiency, and effectiveness of disease prevention and control, depends on an evidence-based, and result-oriented disease surveillance and notification system that rest solemnly on a good health records management practice, for generation of accurate and reliable health information for action. Therefore the management of Atakumosa West Local Government is advised to give maximum support and required encouragement to health records management practice and disease surveillance and notification system so as to ensure availability of accurate health data and information for action.

### **Recommendation:-**

On the basis of the findings and conclusion of this study, the following recommendations are made:

1. Management of Atakumosa west local government area should extend procurement and installation of appropriate information technology, staff training and capacity building, to enhance functional health records management practice to facilitate effective disease surveillance and notification system in all health facilities within the local government area.
2. Appropriate logistics and working materials must be put in place to facilitate timely collection, processing, storage, analysis, dissemination and the use of surveillance information as well as adequate financing of its essential sub-systems and components.
3. Regular and constant supply of drugs and other consumables are very essential to an effective disease control intervention and the management of Atakumosa west local government area should ensure constant and regular supply of these items.
4. The attitude and perception of health workers towards health records management practice must be a positive one. They should see health information as public goods, which the onus of its collection, analysis and availability rested on them for active disease surveillance and notification system at Local government area level.
5. Management of Atakumosa west local government area should facilitates standardization of health records management facilities and ensures adequate financing of health data infrastructure in order to strengthen relevant structures for a functional disease surveillance and notification system within her catchment area.

**References:-**

1. Adetola, B.A. (2007). Problems militating against disease surveillance and Notification System in Nigeria; an unpublished work: pp 11.
2. Ajayi, W.(2000). Health Informatics Transfer, published by Omega publishing company, Lagos. First Edition, Pg. 6.
3. Awosemo, A.O. (2007). Handbook on Atakumosa West Local Government; Hostony, Policy, and structure; published by community development and Information Department, Atakumosa west Local Government Council.
4. Fatiregun, A.(2006).Introduction to Health Information System Published by EMSEH Department, College of Medicine, University of Ibadan.
5. Fatiregun, A. (2012). Overview of Disease Surveillance update in Osun- State, Nigeria, seminar paper presented at Disease surveillance annual review meeting at Osogbo Osun State.
6. Fatiregun, A. (2013). Big Hospital sensitization on integrated Disease surveillance and response system in Niger: an unpublished work.
7. Fawole, A. (2006). Strategies for Implementing Disease Surveillance and Notification system in Nigeria; published by *EMSEH Department, College of medicine university of Ibadan*.
8. Federal Ministry of Health,(2014).National Policy on integrated disease surveillance and Response implementation in Nigeria.
9. Federal Ministry of Health,(2013). National health management information system instructional manual and guide on training; published by *department of health planning, Research & Statistics, of Federal Ministry of Health*.
10. Federal Ministry of health (2014) *National technical guidelines for integrated disease surveillance and response, published by Federal Ministry of Health*
11. Helen N. Perry (2015) Planning an integrated disease surveillance and response system: a matrix of skills and activities; *Journal of Institute of medicine. Vol.5. an online resource accessed on 17/11/2015*.
12. Huffman, E. (2011).Health Information management; New Price Edition; Physicians Records Company Illinois, U.S.A.
13. Lucas, (2014). Preventive medicine for the tropics; published by the chances press, Great Britain New Edition. Pg 146.
14. Mogli, G. (2001). Medical Records Organization and Management Published by Jaypee Brothers Medical Publishers (P) ltd. B-3. EMCA House, New Delhi, India.
15. National Health Management Information System Policy,(2006) Published by Federal Ministry of Health, Abuja.
16. Olumide, A.A. (2006). Bulleting of Health Plain Implication, June (3) pp. 44-57.
17. Omole, S. M. (2008). Effects of disease surveillance and notification system on prevention and control of diseases; Master Degree Thesis submitted to the department of LARIS, university of Ibadan.
18. Omole, S. M. (2013) Career prospects of health information management in the new millennium: Seminar paper, presented at College of Health Technology Offa, Kwara-State.
19. Osundina, K.S. (2007) Health Information utilization in selected teaching hospitals in South-Western Nigeria; Master Degree thesis submitted to LARIS Department University of Ibadan.
20. Omole, S. M. (2015) Surveillance Bulleting of Atakumosa west local government area: Volume 10, N0. 11 pg. 12
21. WHO-Nigeria, (2013).Guidelines for acute flaccid paralysis Surveillance, Revised Edition, published by World Health Organization