

**IDEAS Private Sector Study of Barriers and Facilitators to Data Sharing
Interview Guide for General Stakeholders / June 2014**

1. Role and functions related to the private health sector (with a focus on UP)
2. Existing data sharing practices
- Do **private sector providers** share any health data at present with the government of UP?
 - Details of types of data, health issues, mechanisms/processes/ for sharing data, frequency? Ask for concrete examples.
 - Explore:
 - Data collection
 - Data quality/completeness
 - Willingness to share
 - How is this used?
 - How was this initiated?
 - Is it working or not working?
 - What are the successes of this system and what are the challenges?

Other probe questions:

- How are these data processed and used? Are these integrated into the district HMIS/report? Which ones are included?
 - What kind of feedback are provided to the private facilities who submit the data?
 - What kind of actions are taken if data are not submitted/delayed?
3. Is there any informal data sharing also that occurs? What is the forum in which this happens?

4. CRITICAL DATA

What in your view are some of the most critical data (indicators) on which private service providers should provide data to the government?

5. BARRIERS AND ENABLERS TO HEALTH DATA SHARING

Are there **barriers and enablers** to private providers sharing health data with government? What are these? Which of these are the main barriers/enablers/ the most critical ones?

Institutions

Does the regulatory environment in UP affect private sector data sharing? How?

Probe questions:

Regulatory environment– existence and strength of mandatory enforcement, ask for concrete examples]

Rules and ways of working– do government rules and ways of working make it difficult to make changes? Ask for concrete examples]

Data collection and management formats and procedures

Do data collection and management formats and systems affect private sector data sharing?

Do government data/HMIS **formats and procedures** enable or prevent private sector Health providers sharing health data? How? [probe – complexity of government data formats/procedures and ask for concrete examples of formats – see a few samples if possible]

Do these issues stem from state-level barriers, district or lower level (through to individual level)

Motivation and incentives

Do public and private sector providers’ motivations and incentives prevent or enable data sharing?

Probes:

Are private sector health providers **motivated/incentivised** to share health data with government/or not? How or how not? [probe - financial interests/taxes, incentives to share data, effort/staff/resources required]

Are government officials **motivated/incentivised** to collect and use private sector health data? How?

Attitudes

Do **private sector providers’ attitudes** enable or prevent them sharing health data? How? [probe - Trust/ relationships between sectors; willingness/resistance to change; understanding the value of data sharing]

Do **government officials’ attitudes** enable or prevent private sector health providers sharing health data? How? [probe - Trust/ relationships between sectors; willingness/resistance to change; fears; understanding the value of data sharing]

Also probe for whether any of the motivational and attitudinal issues are more specific to different levels – state, or district level.

6. Where in your view do most blockages occur?

- Data collection
- Completeness of data
- Quality of data
- Motivation and willingness to share

- Ability to share etc

7. SUGGESTIONS AND RECOMMENDATIONS

7.1. What steps you think government/private sector providers should take or can take to encourage private health service providers to submit data to the government?

Probe for: what can be done with individual providers at different levels and with associations