

Table 1 Coding framework

PRISM themes	Themes from ORCA	Codes
Technical factors	Denominator	<ul style="list-style-type: none"> • Wrong denominator • Outdated denominator
	Complexity of forms and procedures for data recording and reporting	<ul style="list-style-type: none"> • Lack of guideline for recording • Complexity of Indicator definitions • Multiple forms • Parallel reporting
	Language issues;	<ul style="list-style-type: none"> • Language barrier
Behavioral Factors	Knowledge and skills to manage HMIS	<ul style="list-style-type: none"> • understanding of health data • Experience on data collection and reporting • Lack of program knowledge • Poor capacity on recording • Low training • Lack of skill operating computers
	Indicator definitions	<ul style="list-style-type: none"> • Knowledge on Health data and indicator definition
	motivation	<ul style="list-style-type: none"> • motivation
	Perception towards data quality and the level of emphasis given	<ul style="list-style-type: none"> • Perception towards data quality and the level of emphasis given
	Available interventions to improve Data quality and use,	<ul style="list-style-type: none"> • Available interventions to improve Data quality and use,
	Data use	<ul style="list-style-type: none"> • Data use
	Organizational Factors	Communication between levels;
Monitoring,	<ul style="list-style-type: none"> • Routine data quality assessment • Performance monitoring team 	
supervision and evaluation	<ul style="list-style-type: none"> • feedback and learning • HMIS data quality assurance methods • Report evaluation practice 	
Accountability	<ul style="list-style-type: none"> • Incentive mechanism 	
Training: inadequate training,	<ul style="list-style-type: none"> • Capacity buildings • Trained man power • training for a wrong person 	
Staff turnover,	<ul style="list-style-type: none"> • staff Turnover 	
Staff retention	<ul style="list-style-type: none"> • attrition • Staff rotation • lack of HR resource 	
Workload	<ul style="list-style-type: none"> • Workload 	

Availability of resources	Supply and availability of equipment for HMIS activity	<ul style="list-style-type: none"> • Shortage of HMIS tools
	Availability of source documents;	<ul style="list-style-type: none"> • HMIS budget, logistics and infrastructure • transportation logistics
	Availability of computers and electricity	<ul style="list-style-type: none"> • availability of printing materials • availability of computer • availability of electricity
	Human resource for HMIS (shortage in number),	<ul style="list-style-type: none"> • Shortage of human resource for HMIS
	finance	<ul style="list-style-type: none"> • Finance
RHIS Processes	Data flow	<ul style="list-style-type: none"> • Data flow/Difference
	Data recording and reporting practice	<ul style="list-style-type: none"> • Wrong reporting/over reporting/under reporting
	Triangulation of data within routine health information system	<ul style="list-style-type: none"> • Different Reporting period • Separate Logistics and TB Service reporting
	Completeness,	<ul style="list-style-type: none"> • double reporting during referral
	timeliness,	<ul style="list-style-type: none"> • Delay in reporting
	accuracy of reporting	<ul style="list-style-type: none"> • Source of data • Reporting format difference (HC and HP) • Under report for private sector