Assessing Rehabilitation Data in Georgia's Health Information System: Current State, Challenges, and Roadmap for the Future

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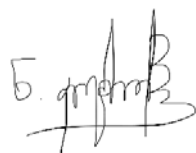Supervisor: George Gotsadze, Associated Professor

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Declaration of Originality

I hereby declare that this master's thesis is the result of my own work and research. To the best of my knowledge, it contains no material previously published or written by another person. Any ideas, quotations, or paraphrased content from the work of other authors have been properly cited and referenced.

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Abstract

Introduction: The growing demand for rehabilitation services due to demographic and epidemiological transitions poses a global challenge, resulting in higher prevalence of impairments and extended periods of limited functioning. Effective solutions require robust health information systems (HIS) to monitor and evaluate the accessibility, distribution, quality, and outcomes of rehabilitation services. However, evidence indicates that data on disability and rehabilitation in LMICs is often deficient, incomplete, fragmented, or not shared.

Objectives: This study aims to assess the state of rehabilitation data within Georgia's HIS, identify gaps in data collection and reporting, and recommend enhancements to improve rehabilitation data availability and quality.

Methodology: The study used a cross-sectional, exploratory approach with qualitative methods, including a desk review and 24 in-depth interviews with representatives from rehabilitation service facilities and policymakers. Data were organized and analyzed using the Health Metrics Network's (HMN) framework, focusing on HIS governance, data sources, and data management.

Results: The study identified challenges in managing rehabilitation data within Georgia's HIS. Data collection methods vary, with some facilities using paper formats and others electronic systems. Standardization of data, particularly for rehabilitation intervention recording, is lacking. Functional assessment tools, critical for rehabilitation, are not standardized across all providers. Additionally, diverse reporting practices affect data volume and format, challenging a unified approach and impacting data quality and usability.

Conclusion: The study underscores the need for accurate, complete, and standardized rehabilitation data collection to enable effective tracking and analysis. Challenges identified suggest that the current HIS may struggle to support the comprehensive data needs outlined in the national rehabilitation strategy, urging policymakers to prioritize measurement to ensure equitable service access.

Keywords: Rehabilitation, Disability, Health information systems, LMICs.

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