

# Introduction

The [G4 Alliance](#) is an advocacy coalition of more than 70 associations and organizations around the world working to increase awareness, foster political will, shape policy, and mobilize resources to make access to quality, safe, timely, and affordable emergency, and essential surgical, obstetric, trauma and anaesthesia care a global health priority and a reality for all. The G4 Alliance formed an expert working group to create a minimum dataset on a digital platform designed for acceptability by providers in LMICs.

## PROJECT RATIONALE

An estimated five billion people, especially in low- and lower-middle-income countries (LMICs), lack access to basic surgical care. WHO Member States have committed to tracking surgical volumes and outcomes through clinical registries, as stated in WHA Resolution 68.15, Decision 70.22, and Resolution 76.2. Without reliable data from these registries, it's challenging to quantify the gap in surgical care, plan quality improvements, and strengthen national surgical systems.

## PROJECT DEVELOPMENT



Under WHO guidance, the G4 Alliance developed an online Operative Encounter Registry to address this data gap. This tool enables routine data collection on operative cases, helping healthcare professionals plan, allocate resources, and advocate for patients. The G4 Alliance will pilot and support the registry's sustainable use through a global Community of Practice. The registry was developed in collaboration with WHO's Clinical Services and Systems unit and is hosted on the DHIS2 platform. This minimum data set will improve operative case management and support the inclusion of surgical care in primary health care, enhancing universal health coverage.

# Project Description

## KEY FEATURES

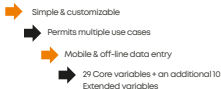
The Operative Encounter Registry is a minimum dataset comprising 29 Core variables plus an additional 10 Extended variables for institutions and centers with greater capacity for data collection.

Variables in the Operative Encounter Registry enable the following capabilities:

- De-identification of patients and providers to promote acceptability
- Tracking of surgical complications and outcomes
- Quality improvement, including monitoring internal delays and promoting best practices
- Assessment of system-level factors affecting access to care

## INCLUDED VARIABLES:

- Demographic Data
- Operative/Trauma
- Primary and Re-operation
- Primary Source of Payment
- Indication for Surgery
- Date of Decision for Surgery
- Urgency of Surgery
- Planned Date of Surgery
- Operative Intervention



## GLOBAL PILOT PROJECT + COMMUNITY OF PRACTICE

The Operative Encounter Registry (OER) DHIS2 module is the first specific Operative Database. It will be implemented in various global locations and managed by a G4 Alliance Community of Practice. Through a memorandum of understanding, the WHO asked the G4 Alliance to upscale this registry's dissemination. The pilots will evaluate the module's usability at the facility level, leading to its potential national use. Data will be collected on implementation metrics, user acceptability, and scalability at both local and national levels. The program will be conducted in diverse healthcare facilities, including first-level hospitals, particularly in LMICs across all WHO regions.

The G4 Alliance's CoP will engage diverse stakeholders, including its members, to encourage the uptake of OER and support users with the resources they need for implementation. Coordinated through a virtual platform, we will provide different modalities for learning and interaction among OER users. The Community of Practice will allow the G4 Alliance to gather real-time information on the implementation and impacts of the Operative Encounter Registry.