

DHIS2 USER MANUAL UGANDA

Version 2.3

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About this guide

DHIS2 is a browser-based application that has a number of unique features which help to automate paper-based tools in different countries around the world. These features include providing data entry tools, providing data validation and data improvement features, among others. This guide is intended to aid those individuals or organizations that will need to use DHIS2 for its different features. It provides detailed descriptions on how to use the different features that DHIS2 provides, especially in Uganda.

There are a number of new unique features and functionalities that have been introduced in the new DHIS2 and this guide will describe all of them.

1. What is DHIS2?

After reading this section you will be able to understand:

- What DHIS2 is, and what purpose it serves with respect to health information systems (HIS) generally and in Uganda particularly?
- The major technological considerations when it comes to deploying DHIS2.

1.1 DHIS2 Background

DHIS2 is a tool for gathering, validation, analysis, and presentation of aggregate and patient-based statistical data, tailored nonetheless not limited to cohesive health information management activities. It is a generic tool rather than a pre-configured database application, with an open meta-data model and a flexible user interface that allows the user to design the contents of a specific information system without the need for core software design. DHIS2 is a modular web-based software package built with free and open source Java frameworks.

DHIS2 is open source software released under the BSD license and can be obtained at no cost. It runs on any platform with a Java Runtime Environment (JRE 7 or higher) installed.

DHIS2 is developed by the Health Information Systems Programme (HISP) as an open and worldwide distributed process with developers currently in India, Vietnam, Tanzania, Ireland, and Norway. However, there are other developers in other countries that use DHIS2 that help to develop, customize and maintain DHIS2 according to the country's health information systems guidelines and the nature of the different tools they use. In Uganda, that work is done by a

number of organizations including HISP Uganda, Makerere Monitoring and Evaluation Technical Support (METS) Program among others. The development is mainly coordinated by the University of Oslo with support from NORAD and other donors in the different countries.

The DHIS2 software is used in more than 40 countries in Africa, Asia, and Latin America, and countries that have adopted DHIS2 as their nation-wide HIS software include Kenya, Tanzania, Uganda, Rwanda, Ghana, Liberia, and Bangladesh. A rapidly increasing number of countries and organisations are starting up new deployments.

The documentation provided herewith, will attempt to provide a comprehensive overview of the application. Given the abstract nature of the application, this manual will try to serve as a rather complete step-by-step guide of how to use the application in each and every circumstance but not exhaust all of it, but rather will seek to provide illustrations and examples of how DHIS2 can be implemented and used in a variety of situations through generalized examples.

Before implementing DHIS2 in a new setting, we highly recommend reading the DHIS2 Implementation Guide (a separate manual from this one), also available at the main DHIS2 [website](#).

1.2 Key features and purpose of DHIS2

DHIS2 as an application has a purpose and a number of key features and they are summarized in this sub section as follows:

- DHIS2 provides a comprehensive data management solution built on data warehousing principles and a modular structure which can easily be customised to the different requirements of a management information system, supporting analysis at different levels of the organisational hierarchy.
- Customisation and local adaptation through the user interface. No programming required to start using DHIS2 in a new setting (country, region, district etc.). This has been done recently in Uganda.
- DHIS2 also provides data entry tools which can either be in the form of standard lists or tables, or can be customised to replicate paper forms in a particular country and for this case, Uganda.
- Provide easy to use - one-click reports with charts and tables for selected indicators or summary reports using the design of the data collection tools. Allow for integration with popular external report design tools (e.g. Jasper Reports) to add more custom or advanced reports.
- User management module for passwords, security, and fine-grained access control (user roles).
- Flexible and lively (on-the-fly) data analysis in the analytics components (i.e. GIS, Pivot Tables, Data Visualizer, Event reports, etc).
- A user-specific dashboard for quick access to the relevant monitoring and evaluation tools including indicator charts and links to favourite reports, maps and other key resources in the system.
- Further modules can be developed and integrated as per user needs, either as part of the DHIS2 portal user interface or a more loosely-coupled external application interacting through the DHIS2 Web-API.

- Users can share and discuss their data in charts and reports using Interpretations, enabling an active information-driven user community.
- Easy to use user-interfaces for metadata management e.g. for adding/editing datasets or health facilities. No programming needed to set up the system in a new setting.
- Functionality to design and modify calculated indicator formulas.
- Messages can be sent to system users for feedback and notifications. Messages can also be delivered to email and SMS.
- Functionalities of export-import of data and metadata, supporting synchronisation of offline installations as well as interoperability with other applications.
- Using the DHIS2 Web-API , allow for integration with external software and extension of the core platform through the use of custom apps.
- Provide different kinds of tools for data validation and improvement of data quality.
- Generally, DHIS2 provides a comprehensive HIS solution for the reporting and analysis needs of health information users at different levels.

1.3 Use of DHIS2 in HIS: Data collection, processing, interpretation, and analysis.

The wider context of HIS can be broadly described through the information cycle presented in Figure 1.1 below. The information cycle pictorially depicts the different components, stages and processes through which the data is collected, checked for quality, processed, analysed and used.

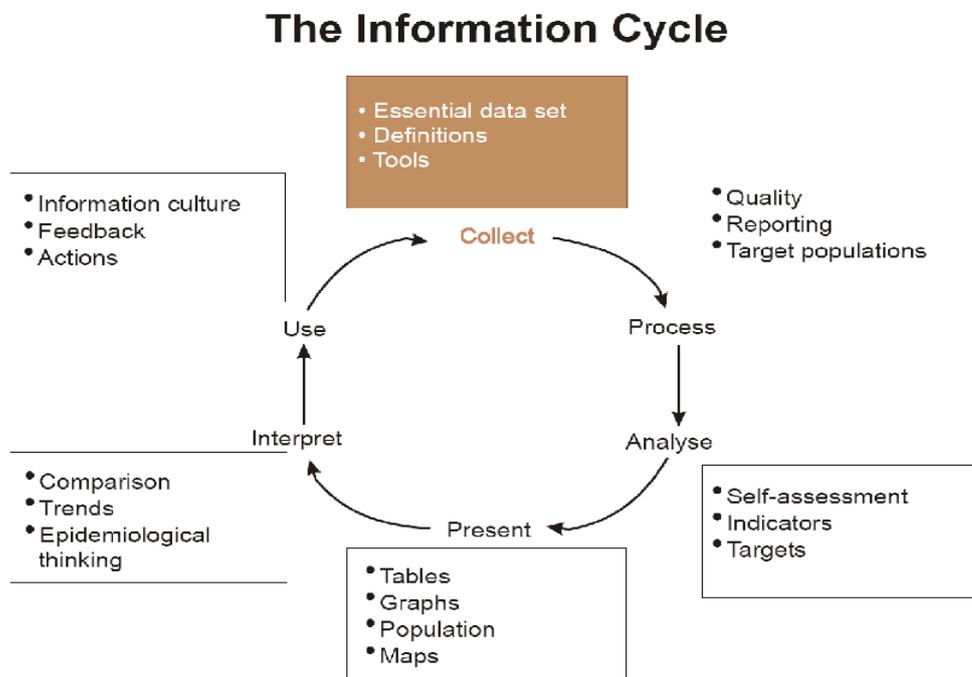


Figure 1.1. The health information cycle

DHIS2 supports different facets of the information life cycle including collecting data, running quality checks, data access at multiple levels, reporting, making graphs, maps and other forms of analysis, displaying data in time series to see their minimum and maximum

levels, enabling comparison across time and space, among others.

DHIS2 serves as a data collection, recording and compilation tool, and all data (be it in numbers or text form) can be entered into it. Data entry can be done in lists of data elements or in customised user defined forms which can be developed to mimic paper-based forms in order to ease the process of data entry by the different health workers at any level.

DHIS2 can also be used to increase data quality. First, at the point of data entry, a check can be made to see if data falls within acceptable range levels of minimum and maximum values for any particular data element also including the data type of the data entered. Such checking, for example, can help to identify typing errors at the time of data entry. Further, user can define various validation rules, and DHIS2 can run the data through the validation rules to identify violations. These types of checks help to ensure that data entered into the system is of good quality from the start, and can be improved by the people who are most familiar with it.

When data has been entered and verified, DHIS2 can help to make different kinds of reports. The first kind are the routine reports that can be predefined, so that all those reports that need to be routine generated can be done on a click of a button. Further, DHIS2 can help in the generation of analytical reports through comparisons of for example indicators across facilities or over time. Graphs, maps, reports and health profiles are among the outputs that DHIS2 can produce, and these should routinely be produced, analysed, and acted upon by health managers.

More about data entry and on how to report after data entry will be covered in the coming sections of this guide.

1.4 Difference between Aggregated and Patient data in a HIS

Patient data is data relating to a single patient, such as his/her diagnosis, name, age, earlier medical history etc. This data is typically based on a single patient-health care worker interaction. For instance, when a patient visits a health care clinic, a variety of details may be recorded, such as the patient's temperature, their weight, and various blood tests. Should this patient be diagnosed as having "Vitamin B 12 deficiency anaemia, unspecified" corresponding to ICD-10 code D51.9, this particular interaction might eventually get recorded as an instance of "Anaemia" in an aggregate based system. Patient based data is important when you want to track longitudinally the progress of a patient over time. For example, if we want to track how a patient is adhering to and responding to the process of TB treatment (typically taking place over 6-9 months), we would need patient-based data.

Aggregated data is the consolidation of data relating to multiple patients, and therefore cannot be traced back to a specific patient. They are merely counts, such as incidences of Malaria, TB, or other diseases. Typically, the routine data that a health facility deals with is this kind of aggregated statistics, and is used for the generation of routine reports and indicators, and most importantly, strategic planning within the health system. Aggregate data cannot provide the type of detailed information which patient level data can, but is crucial for planning and guidance of the performance of health systems.

In between the two you have case-based data, or anonymous "patient" data. A lot of details can be collected about a specific health event without necessarily having to identify the patient it involved. Inpatient or outpatient visits, a new case of cholera, a maternal death etc. are common use-cases where one would like to collect a lot more detail that just adding to the total count of

cases, or visits. This data is often collected in line-listing type of forms, or in more detailed audit forms. It is different from aggregate data in the sense that it contains many details about a specific event, whereas the aggregate data would count how many events of a certain type, e.g. how many outpatient visits with principal diagnosis "Malaria", or how many maternal deaths where the deceased did not attend ANC, or how many cholera outbreaks for children under 5 years. In DHIS2 this data is collected through programs of the type single event without registration.

Patient data is highly confidential and therefore must be protected so that no one other than doctors can get it. When in paper, it must be properly stored in a secure place. For computers, patient data needs secure systems with passwords, restrained access and audit logs.

Security concerns for aggregated data are not as crucial as for patient data, as it is usually impossible to identify a particular person to an aggregate statistic. However, data can still be misused and misinterpreted by others, and should not be distributed without adequate data dissemination policies in place.

2. Getting started with DHIS2

2.1 Using the DHIS2 Demo Server

The DHIS2 development team maintains a demonstration server aimed at helping DHIS2 users to get familiar with using the different features and unique functions that DHIS2 provides. This demo server is available at <https://play.dhis2.org/demo> and this demo is one of the easiest ways to try out DHIS2 and its excellent features. The user just needs to simply open the above link in a web browser, preferably Mozilla Firefox or Google Chrome, login with username = admin and password = district. Figure 2.1 below shows the login page after accessing the demo server and Figure 2.2 shows the home page of the demo server after logging in.

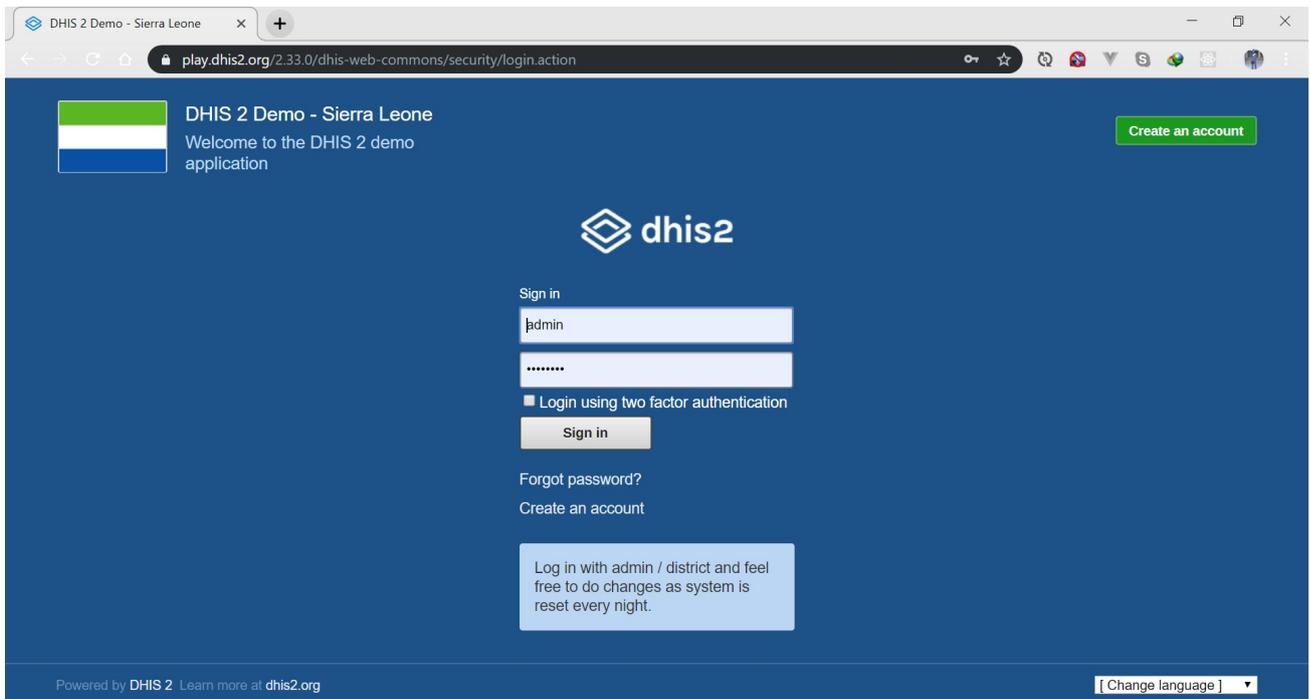


Figure 2.1. Demo server login page

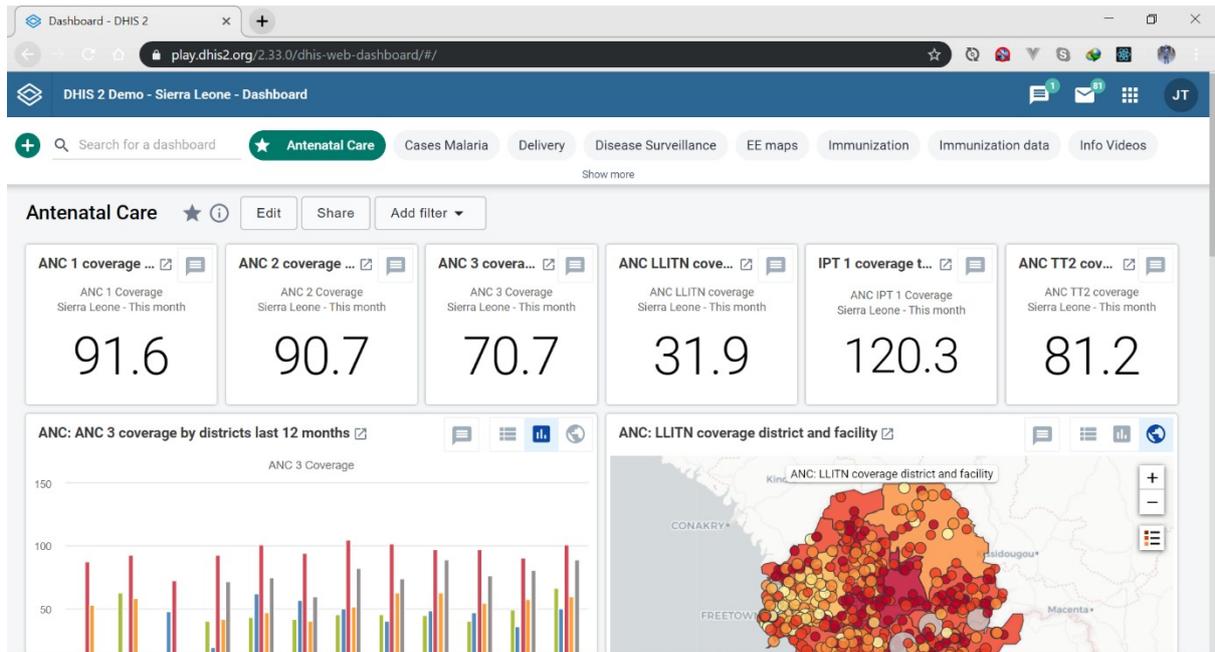


Figure 2.2. Demo server Home Dashboard

Note: All changes on this server are deleted each night, so it is advisable not to save any vital work on this server. It is strictly for demonstration purposes on only!

2.3. Logging on to DHIS2.

If one wants to access and use the features of DHIS2, one has to login into DHIS2. One will have to use a web-browser, preferably Google chrome or Mozilla Firefox as for the other browsers, one might not be able to access the different functions of the system. Once one of the above browsers is set, access dhis2 using this link <https://hmis-dev.health.go.ug> and this will display a login page as shown in figure 2.3 below.

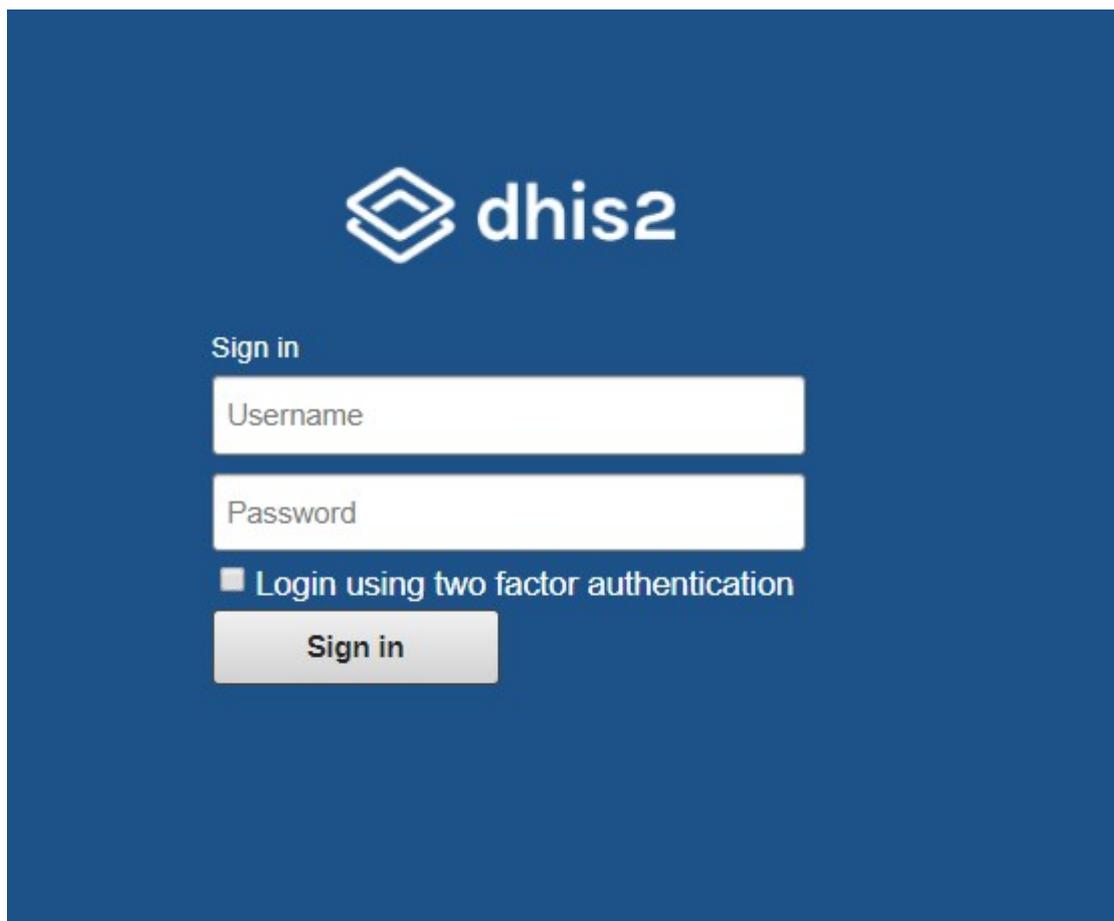


Figure 2.3. DHIS2 login page

The system will require the user to login with a registered user name and password as shown in the figure above. In this case, the user will have to login using the credentials that were provided by the Ministry of Health Uganda so as to access the home dashboard and start using the system.

Once the user has entered the registered credentials, click the **Sign in** button below and log onto the system. After successfully logging onto the system, a home dashboard will be displayed as shown in *figure 2.4* below.

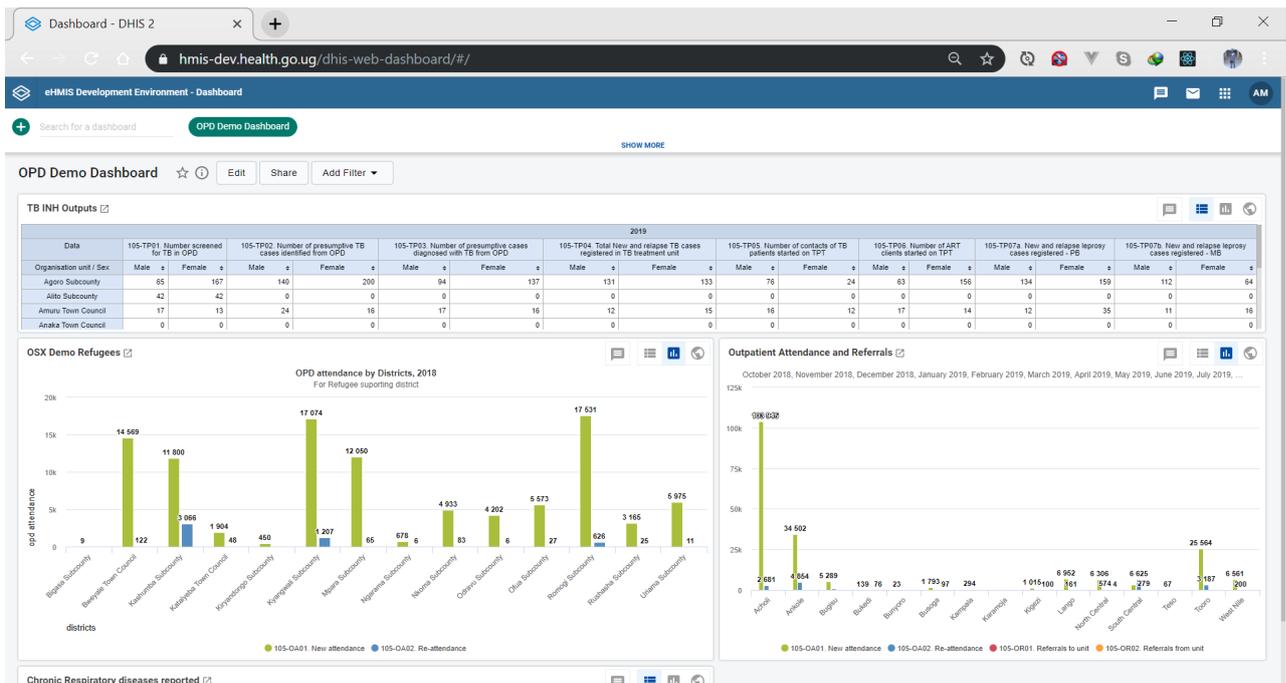


Figure 2.4. DHIS2 Home page

Please Note: User will not be able to access the system if the credentials entered are not registered or if either the username or password are incorrect. The system will provide a notification below the sign in button informing the user of the problem in the form of a button that says “Invalid login information”. This is shown in the figure 2.5 below.

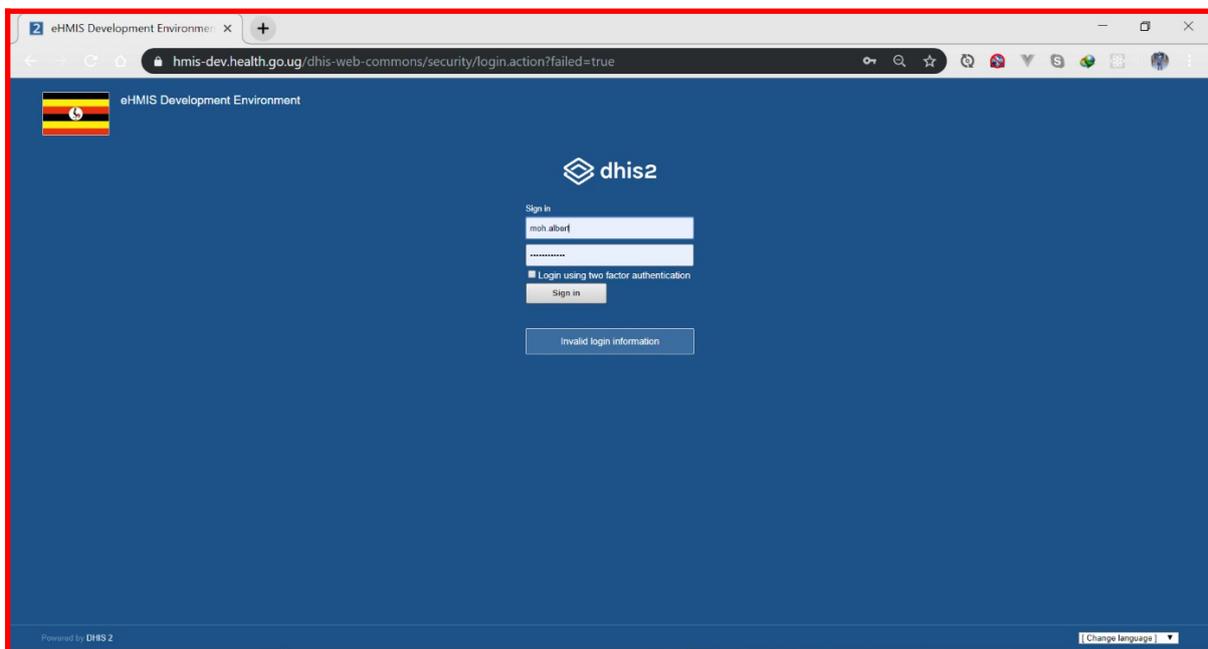
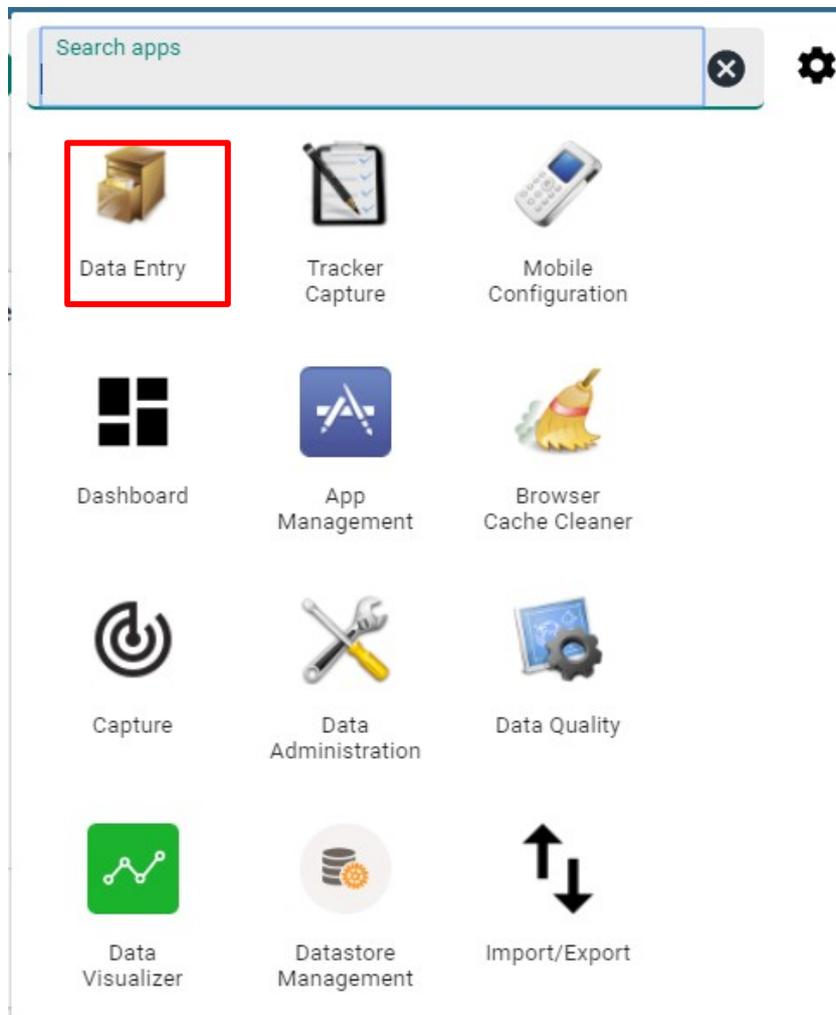


Figure 2.5. DHIS2 Home page with features

Once the above occurs, the user will have to re-login with the correct information or consult the hmis support team (hmissupport@health.go.ug).

On accessing the Home dashboard as shown in figure 2.4, one should be able to access the

different features provided by DHIS2 after clicking on the apps button (box-like icon  in the top corner next to the message icon) in the DHIS2 Menu. *figure 2.6* below shows the different DHIS2 features.



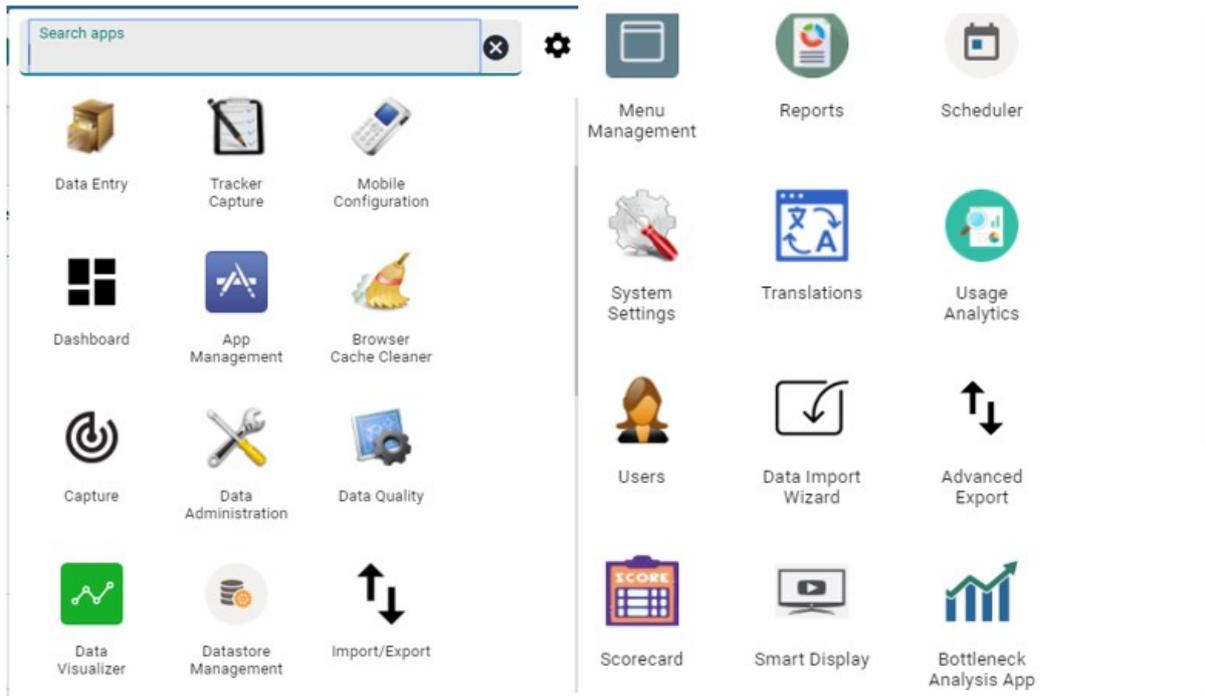


Figure 2.6. DHIS2 apps menu

Once you have logged into DHIS2 successfully, refer to the specific sections in this user manual for the different functionality which is available.

2.4. Logging out of DHIS2

Once You are done using the system and you wish to log out of the system, click on the Profile and the click "Log out" the top-right corner of the DHIS2 menu. This is better shown in the figure 2.7 below.

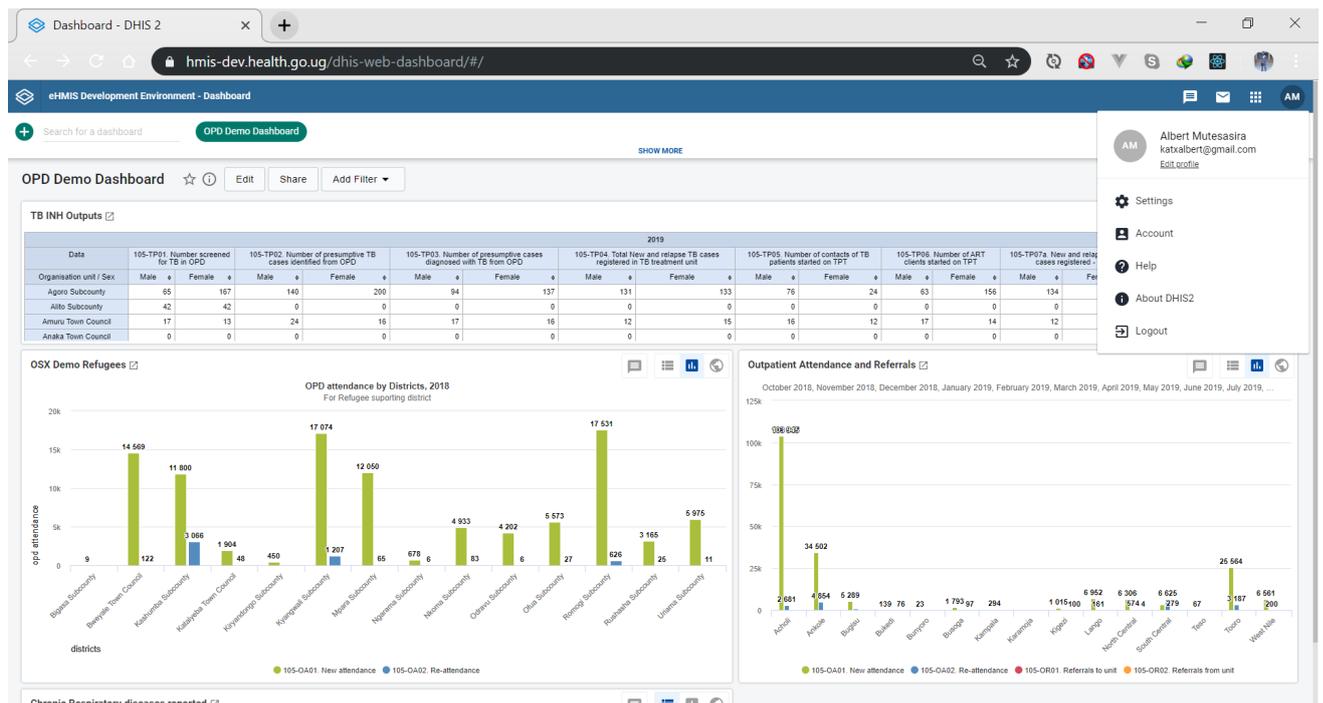


Figure 2.7. DHIS2 Logout

3. Data entry

3.1 Data entry with DHIS2

In order for one to be able to enter data into DHIS2, one has to first have successfully logged onto the system. (See section 2 above on how to log into DHIS2).

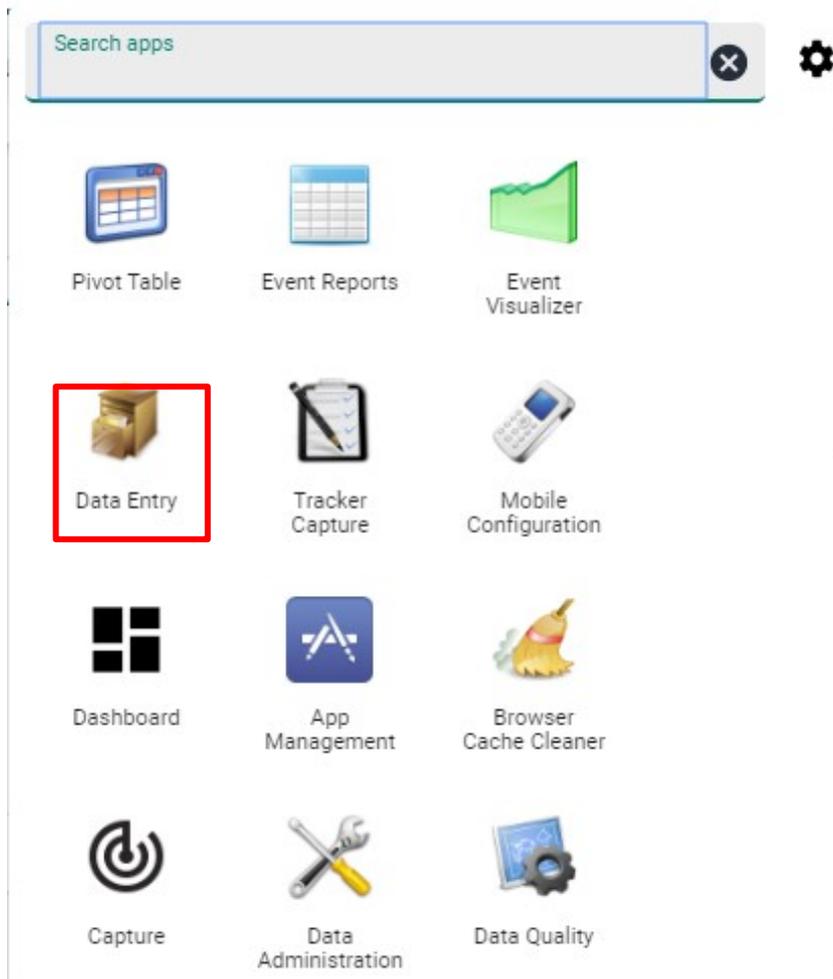
To open the data entry window hover over the Apps button in the DHIS2 menu. A dropdown menu will appear listing over the apps provided by DHIS2. Scroll down and click on the Data Entry option. Alternatively, the system provides a search option where you can search using the keyword data entry and the system will filter the applications.

The data entry module is where aggregated data is manually registered in the DHIS2 database. Data is registered for an organisation unit, a period, and a set of data elements (data set) at a time. A data set in most cases corresponds to a paper-based data collection tool which is already in existence.

There are a number of different data sets in the system that correspond to different organization units. It is important to note that for one to be able to access a data set, one has to first select an

organization unit (org unit) on the left side of the system. These org units are grouped according to the different regions in the country , then further categorized according to the different districts and then sub counties.

Open the data entry app



In the organisation unit tree to the left, select an organisation unit



Data Entry ?

Organisation Unit: Adilang HC III

Data Set: [Select data set]

Period: [] [Prev year] [Next year]

Select a Data set.



Data Entry ?

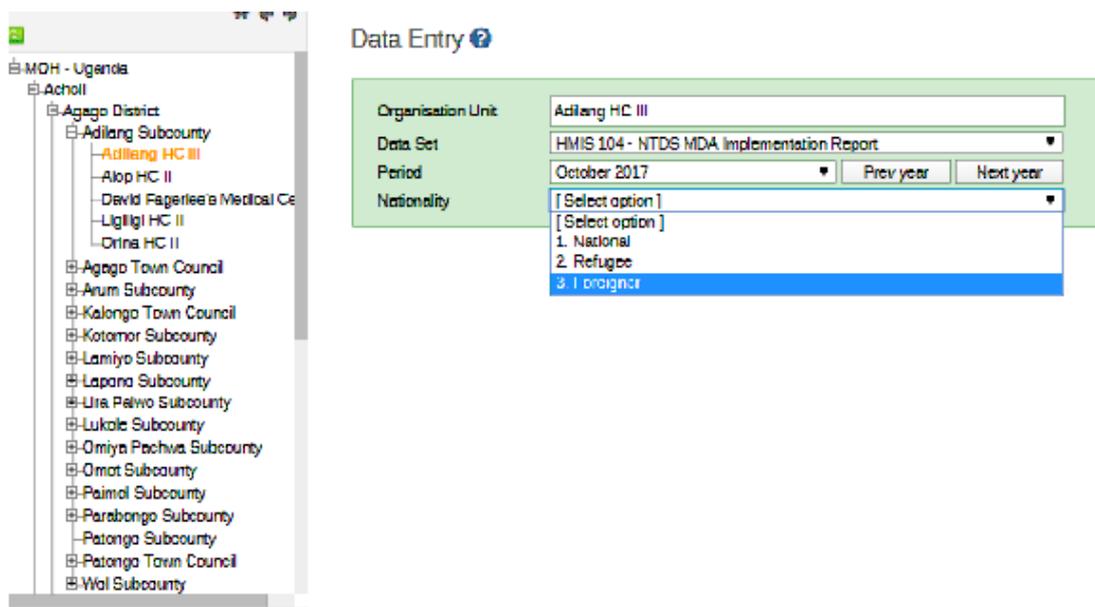
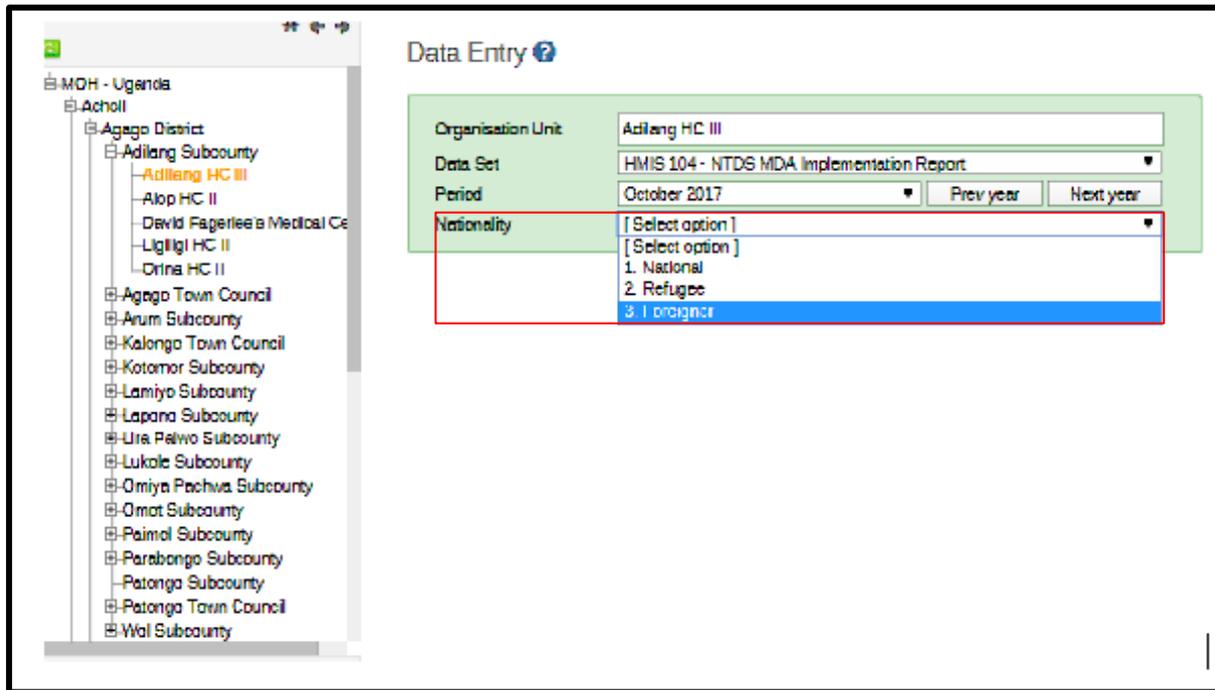
Organisation Unit: Adilang HC III

Data Set: HMIS 104 - NTDS MDA Implementation Report

Period: [Select data set]

- HMIS 033b - Weekly Epidemiological Surveillance Report
- HMIS 097b - VHT/CCM Quarterly Report
- HMIS 104 - NTDS MDA Implementation Report
- HMIS 106.01 - OPD Monthly Report (Attendance, Referrals, Conditions, TB, Nutrition)
- HMIS 106.02-03 - OPD Monthly Report (MCH, FP, EID, EPI & HEPB)
- HMIS 106.04-06 - OPD Monthly Report (HTS & SMC)
- HMIS 106.06-09 - OPD Monthly Report (Supplies, Outreaches & Supervision)
- HMIS 105:10 - OPD Monthly Report (Lab)
- HMIS 106a:01-02 - HIV Quarterly Report
- HMIS 106a:03 - TB/Leprosy Quarterly Report
- HMIS 106a:04 - Lab Quarterly Report
- HMIS 107c - Health facility human resource inventory
- HMIS 105 - IPD Monthly Report

Select nationality



The following subsections will describe the steps one has to go through while entering the data.

3.2 Selecting the data entry form

<ul style="list-style-type: none"> <input type="checkbox"/> Kelango Town Council <input type="checkbox"/> Kotomer Subcounty <input type="checkbox"/> Lemmye Subcounty <input type="checkbox"/> Lepano Subcounty <input type="checkbox"/> Lira Pawa Subcounty <input type="checkbox"/> Lukole Subcounty <input type="checkbox"/> Omnye Pachwa Subcounty <input type="checkbox"/> Ormat Subcounty <input type="checkbox"/> Omalot Subcounty <input type="checkbox"/> Perebanga Subcounty <input type="checkbox"/> Petanga Subcounty <input type="checkbox"/> Petanga Town Council <input type="checkbox"/> Wel Subcounty 	IU01. Number of villages targeted <input type="text"/>	<input type="text"/>	<input type="text"/>																																																											
	IU02. Number of villages covered <input type="text"/>	<input type="text"/>	<input type="text"/>																																																											
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the form cells. Note that the values are saved immediately and do not require to be saved at a later stage. When you are done entering a value, a cell turning into green indicates that the entered value has been successfully saved in the system or on the server.

Authentication of the Input: In case you type in an invalid value, for example, a character in a field that only accepts numeric values, the cell or field you have typed in the wrong value will

turn into red and you will get a pop-up that explains the problem and the field will be coloured yellow (not saved) until you have corrected the value. If you have defined a min/max range for the field (data element+organisation unit combination) a pop-up message will notify you when the value is out of range, and the value will remain unsaved until you have changed the value (or updated the range and then re-entered the value).

Blocked Cells: If a field is disabled (dark grey) it means that the field can and should not be filled. The cursor will automatically jump to the next open field.

Data history: By double-clicking on any input field in the form a data history window opens showing the last 12 values registered for the current field (organisation unit+data element +categoryoptioncombo) in a bar chart. This window also shows the min and max range and allows for adjusting the range for the specific organisation unit and data element combination.

3.5 Editing and Deleting data

If you wish to enter data which has previously been entered, simply replace the data entry value with the update values.

If you want to delete a data value completely, you should select the value of interest, and press "Delete" on your keyboard. If you enter a zero and the data element has been configured to not store zeros, the previous data value (i.e. the one you wish to modify) will not be overwritten with the new value. Therefore, it is better practice to delete the data value completely (waiting for the cell to turn green) and then to enter the new value.

3.6 Validating Data in the Form

When all the available values for the form has been filled in you can run a validation check on the data in the form. Click on the "Run Validation" button in the top right (at the beginning of the data entry page) or lower left (at the end of your data entry page) corner. All validation rules which involve data elements in the current form (dataset) will be run against the new data. Upon completion you will be presented with a list of violations or a simply a message that says "The data entry screen successfully passed validation". See the Data Quality chapter for information on

how to define such validation rules.

When you have corrected any erroneous values and are done with the form the recommended practice is to click on the Complete button below the form to register the form as complete. This information is used when generating completeness reports for district, county, province or the national level.

The image shows a screenshot of a data entry form. On the left, there is a green-bordered box containing the following fields: 'Organization Unit' with the value 'Adiling HC III', 'Data Set' with the value 'HMIS 104 - NTDS MDA Implementation Report', 'Period' with the value 'October 2017' and sub-buttons for 'Prev year' and 'Next year', and 'Nationality' with the value '1. National'. To the right of this box, there are three buttons: 'Run validation', 'Print form', and 'Print blank form'. Below the form, there is a green bar containing three buttons: 'Complete', 'Incomplete', and 'Run validation'. The 'Run validation' button in the bottom bar is highlighted with a red border.

3.7 Offline Data Entry

The data entry module will function even if during data entry the Internet connectivity is not stable. In order to utilize this functionality, you must login to the server while Internet connectivity is present, but if during data entry, the Internet link between your computer and the server becomes unstable, data can still be entered into the data entry form, saved to your local computer, and then pushed to the server once the Internet connectivity has been restored. Data can be entered and stored locally while being off-line and uploaded to the central server when on-line. This means that the on-line deployment strategy will be more viable in areas with unstable Internet connectivity. The total bandwidth usage is greatly reduced since forms no longer are retrieved from the server for each rendering.

When the server is able to be reached through the Internet connection, a message is displayed at the top of the data entry screen below.

If the Internet connection should disconnect for some reason during the data entry process, this will be detected by the application, and you will be informed that your data will be stored locally.

3.8 Important Notes on Data Entry in DHIS2

There are a number of unique features that have been introduced in the new DHIS2 and some of those are related to data entry. Most of these have been described in the previous subsections of section 3 but those that have been left out include the following:

- The big data sets such as 106a and 105 have been divided into different sections to ease data entry.
- A menu on each data set has been introduced on the left hand side to ease navigation through the different sections while entering data in a particular data set.
- Blocked cells (Grey cells) do not allow data entry into the system.
-
-
-

Adilang HC III

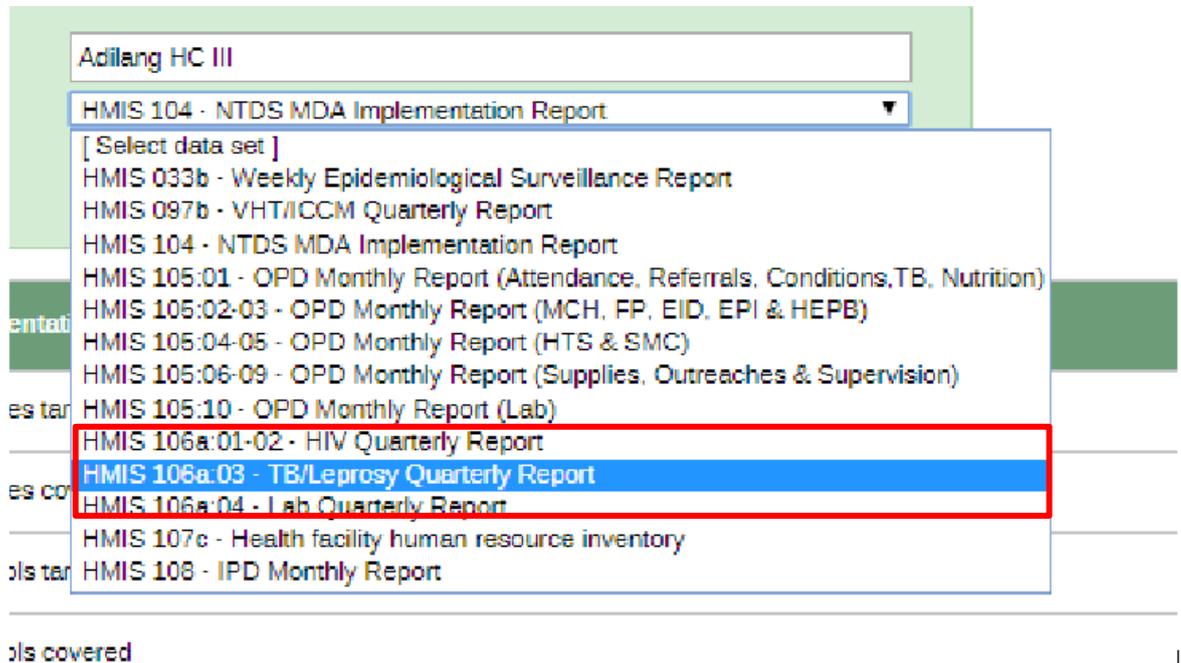
HMIS 104 - NTDS MDA Implementation Report

[Select data set]

- HMIS 033b - Weekly Epidemiological Surveillance Report
- HMIS 097b - VHT/ICCM Quarterly Report
- HMIS 104 - NTDS MDA Implementation Report
- HMIS 105:01 - OPD Monthly Report (Attendance, Referrals, Conditions, TB, Nutrition)
- HMIS 105:02-03 - OPD Monthly Report (MCH, FP, EID, EPI & HEPB)
- HMIS 105:04-05 - OPD Monthly Report (HTS & SMC)
- HMIS 105:06-09 - OPD Monthly Report (Supplies, Outreaches & Supervision)
- HMIS 105:10 - OPD Monthly Report (Lab)
- HMIS 106a:01-02 - HIV Quarterly Report
- HMIS 106a:03 - TB/Leprosy Quarterly Report
- HMIS 106a:04 - Lab Quarterly Report
- HMIS 107c - Health facility human resource inventory
- HMIS 108 - IPD Monthly Report

ents covered

-



4. Pivot Tables application

4.1 About the Pivot table app

A user can use the Pivot Table app to generate pivot tables building on all the available data dimensions in DHIS2. A pivot table is a dynamic tool used for data analysis which lets a user summarize and arrange data according to its dimensions.

Examples of data dimensions in DHIS2 may include:

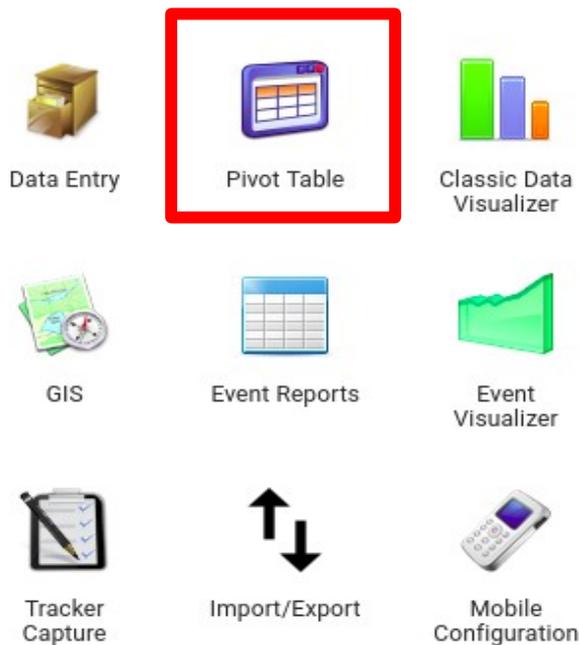
- Data dimension itself (for example data elements, indicators and events).
- Periods (representing the time period for which the data represents).
- Organisation hierarchy (representing the geographical location of the data).

From these dimensions a user can freely select dimension items to include in the pivot table. A user can also create additional dimensions in DHIS2 with the group set functionality.

4.2 Create a pivot table

To create Pivot Tables:

1. Access pivot tables module by clicking the **Pivot Table** icon in the **Apps** menu.



Dimension items:

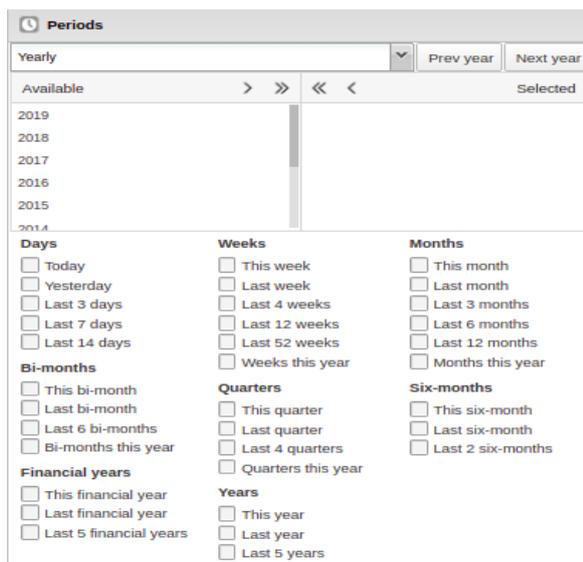
- The Pivot Table screen displays with two window panes: The **Dimensions** pane on the left, and the **Results** pane on the right. The Dimensions pane is where the data dimensions for your analysis are selected; the Results pane displays/returns the results of the dimensions pane.

- In the menu to the left, select the dimension items to be analyzed, for example either **data elements** or **program indicators**



- **Data elements:** Specific data or data elements represent the raw data being collected
- **Program Indicators:** Represent formulas providing coverage rates, incidence rates, ratios and other formula-based units of analysis.
- **Reporting rate:** Reporting rate summaries show how many forms have been submitted by organisation unit for a given period. There are two methods available to calculate reporting rates: completeness and timeliness reports.

4. Select time **Period (s)** for analysis. These can be fixed periods (top pane), or periods relative to the current date (bottom pane)



Fixed vs Relative Periods: If a **Fixed** period is selected, whenever a report is generated, the data values of the table will always reflect the selected periods, and thus be static.

If a **Relative** period is selected, whenever a report is generated, the data values of the table will be relative to the current time within the system, following the reporting parameters selected; and thus alter over time.

5. Select the Organisation Unit(s) (OU) you are reporting on. Multiples can be selected utilizing [shift] or [ctrl] keys.

Note that if there are any child organization units under your selected OU, the data for the children will aggregate together.

6. Click **Update** to see the table display in the results pane.

	2018	
Awach Subcounty	147	7
Bardage Division	0	39
Bungatira Subcounty	100	23
Imanyiro Subcounty	50	12
Jagusi Subcounty	134	71
Kigandalo Subcounty	38	40
Kiyerera Subcounty	31	73
Magamaga Town Council	83	48
Malongo Subcounty (Mayuge District)	101	66
Mayuge Town Council	285	203
Mpungwe Subcounty	152	330
Patiko Subcounty	119	27
Pece Division	131	37
Uryama Subcounty	176	60
Wairasa Subcounty	49	52

4.3 Favorites

Saving pivot tables and charts as favorites enables you to return to your data and makes them easy to find. They can also be shared with other users as an interpretation or can be displayed on the dashboard.

4.3.1 Open Favorites

1. Click **Favorites** then click **Open** from the dropdown list that is displayed.

Update ▾ Favorites ▾ Layout ▾

- New
- Open
- Save
- Save as
- Rename
- Translate
- Share
- Write interpretation
- Get link
- Delete

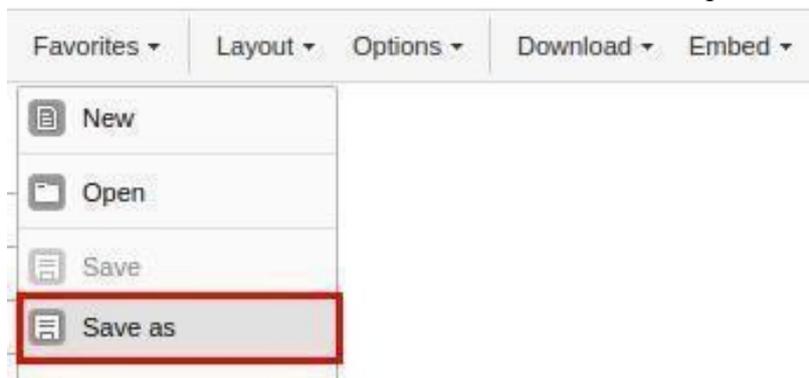
Enter the name of a favorite in the search field to narrow the options, or click Prev and Next to manually search through multiple pages. Favorites are arranged in alphabetical order.

2. Select the favorite by clicking on it.



4.3.2 Save Favorites

1. Create your desired pivot table.
2. Click **Favorites** and then **Save as** from the dropdown list displayed.



3. Enter a **name** and **description** for the favorite. It is important to name your favourite properly.
4. Click **save**.



5. Immediately you should share your favourite with the adequate groups.

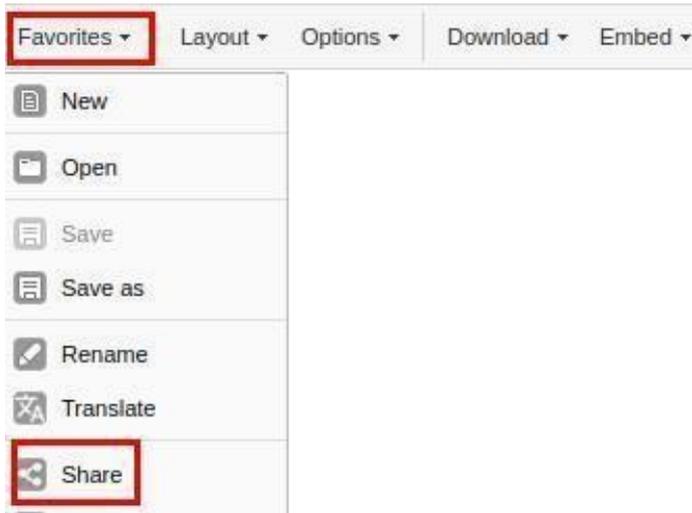
4.3.3 Rename Favorites

1. Open the favourite you want to rename.
2. Click **Favorites** and then select **Rename** from the dropdown list.
3. Enter the new **name** for the favorite.
4. Click **Update**.



4.3.4 Share Favorites

1. Open the favorite you want to share.
2. Click **Favorites** and then select **Share** from the dropdown list.



3. Select sharing settings:
 - Select User group to share with
 - Do not allow external access
 - Turn off public access (i.e. none)
 - Click **save**



4.3.5 Delete Favorites

1. Click **Favorites** and then select **Delete** from the dropdown list
2. Click **OK** to confirm.

4.4 Download Pivot Tables

1. To download the data in the current pivot table:
2. Click **Download**.

3. Under **Table layout**, select the desired download format: Excel, CSV or HTML.



4.4.1 Download Plain Data Source Format

To download plain data source formats:

1. Click **Download**.
2. Under **Plain data source**, select the desired file format.



4.5 Visualize Pivot Tables as chart

This section explains how to switch between pivot table, chart and map visualizations of your data.

1. Open a favourite or create a new pivot table, within the pivot table app.
2. Click the **Chart** icon on the top right, then select **Open this table as chart** from the dropdown list. The current pivot table then opens as a chart.



4.6 Open Pivot Tables selection as chart

It is possible to visualize a small part of the pivot table as a chart by clicking directly on a value in the table instead of opening the whole table.

1. In the pivot table, click a value.

2018		
	PRI - Extracurricular Participation, Female ↕	PRI - Enrollment, 10 years, Female ↕
Awach Subcounty	147	7
Bardege Division	0	39
Bungatira Subcounty	100	23
Imanyiro Subcounty	50	12
Jagusi Subcounty	134	71
Kigandalo Subcounty	38	40
Kityerera Subcounty	31	73
Magamaga Town Council	83	48
Malongo Subcounty (Mayuge District)	101	66
Mayuge Town Council	285	15
Mpungwe Subcounty	152	27
Patiko Subcounty	119	27
Pece Division	131	37
Unyama Subcounty	176	60
Wairasa Subcounty	49	52

1. To verify the selection, hold the cursor over Open selection as chart. The highlighted dimension headers in the table indicate what data will be visualized as a chart.
2. Click **Open selection as chart**.

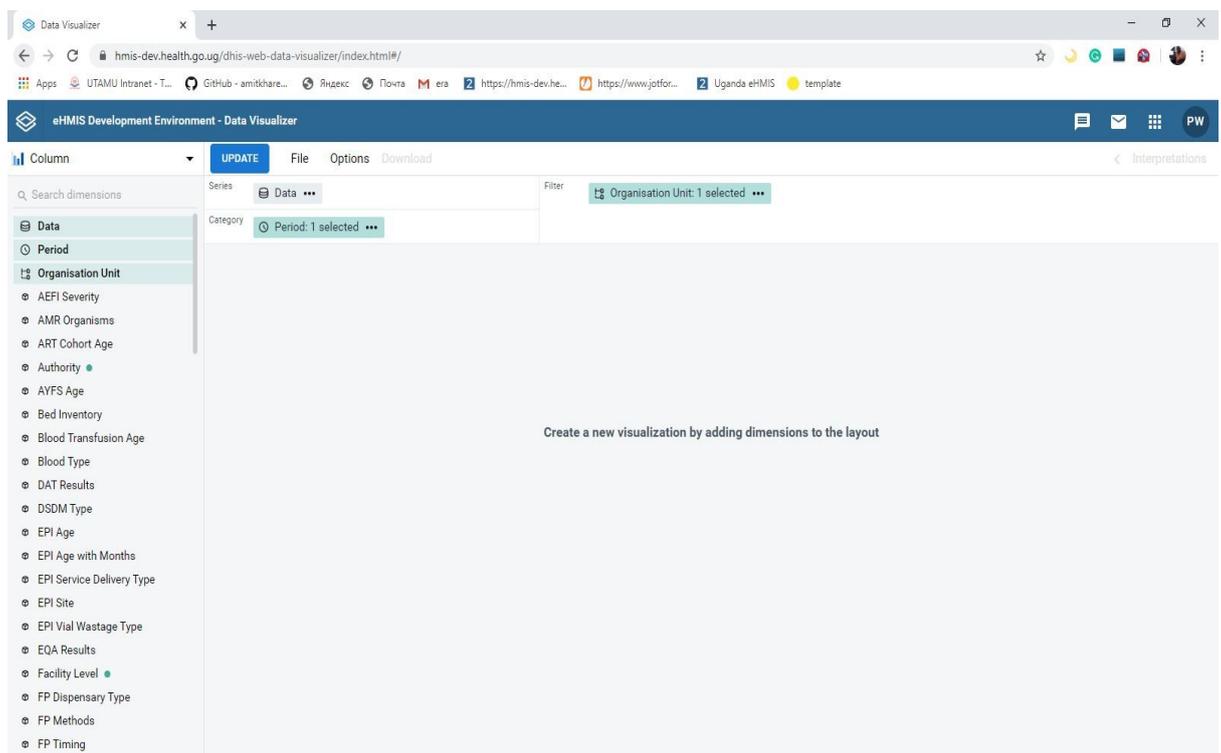
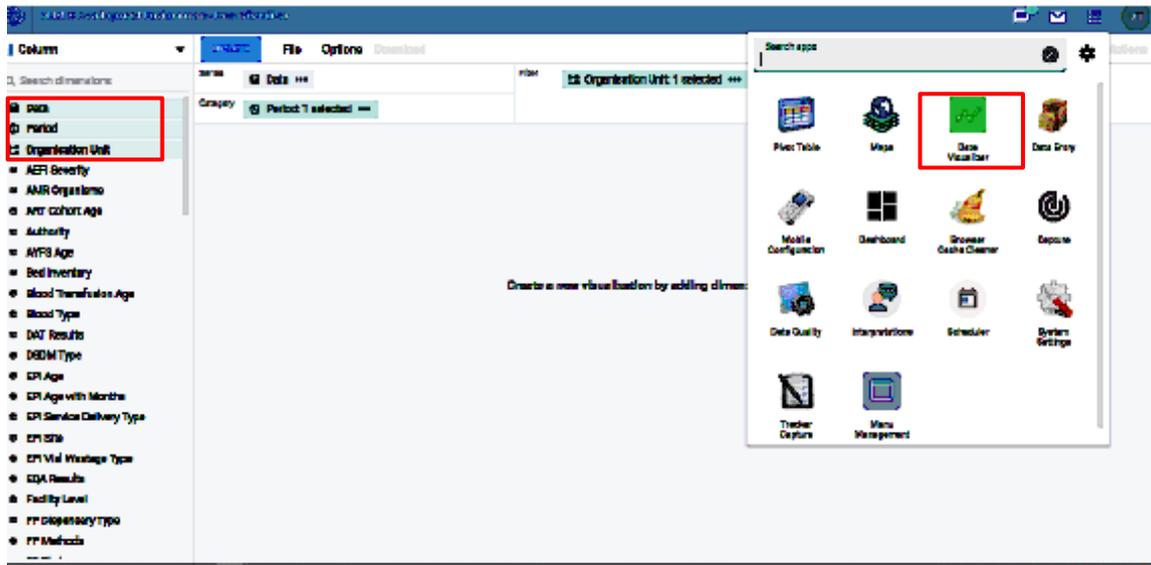
5. Data Visualizer Application

5.1 Overview of the data visualizer application

The data visualizer module enables users to easily create dynamic data analysis and visualizations through charts and data tables. You can freely select content (like indicators, periods and organisation units) for your analysis. This module can be accessed by selecting

Data Visualizer from the app menu. The image below shows the viewport of the module. For a quick start:

1. Look under the "Data" heading and select an indicator group from the list of groups.



2. Look under "Available indicators" and select a few indicators from the list by double-clicking on them.

Data

Data Type
Indicators

Select indicator group
[All groups]

Q Search

- 105a - Female Cardiovascular Diseases(0-28 days)
- 105a - Male Cardiovascular Diseases(10 - 14 Yrs)
- 105a - Male Cardiovascular Diseases(15-19 Yrs)
- 105a - Male Cardiovascular Diseases(20 Yrs & above)
- 105a - Male Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(5 - 9Yrs)
- 105a - No. of Samples Referred (For those you received results)
- 105a - RT- Cryoprecipitates(0-4 yrs Female)
- 105a - RT- Cryoprecipitates(0-4 yrs Male)
- 105a - RT- Cryoprecipitates(15+ yrs Female)
- 105a - RT- Cryoprecipitates(15+ yrs Male)
- 105a - RT- Cryoprecipitates(5-14 yrs Female)

SELECT ALL

Selected Data

- 105a - Average Turn Around Time x
- 105a - Female Cardiovascular Diseases(10 - 14 Yrs) x
- 105a - Female Cardiovascular Diseases(15-19 Yrs) x
- 105a - Female Cardiovascular Diseases(20 Yrs & above) x
- 105a - Female Cardiovascular Diseases(29 days - 4 Yrs) x
- 105a - Female Cardiovascular Diseases(5 - 9Yrs) x
- 105a - Male Cardiovascular Diseases(0-28 days) x

DESELECT ALL

HIDE UPDATE

Data

Data Type
Indicators

Select indicator group
[All groups]

Q Search

- 105a - Average Turn Around Time
- 105a - Female Cardiovascular Diseases(10 - 14 Yrs)
- 105a - Female Cardiovascular Diseases(20 Yrs & above)
- 105a - Female Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Female Cardiovascular Diseases(5 - 9Yrs)
- 105a - Male Cardiovascular Diseases(10 - 14 Yrs)
- 105a - Male Cardiovascular Diseases(15-19 Yrs)
- 105a - Male Cardiovascular Diseases(20 Yrs & above)
- 105a - Male Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(5 - 9Yrs)
- 105a - No. of Samples Referred (For those you received results)
- 105a - RT- Cryoprecipitates(0-4 yrs Female)

SELECT ALL

Selected Data

- 105a - Female Cardiovascular Diseases(0-28 days) x
- 105a - Female Cardiovascular Diseases(15-19 Yrs) x
- 105a - Male Cardiovascular Diseases(0-28 days) x

DESELECT ALL

HIDE UPDATE

3. Click "Update" in the top bar and see the chart unfold.

The data visualizer is designed firstly to be easy-to-use - you can simply select the indicators, data elements, periods and organisation units you want to include and click "Update" to get your visualization. Secondly it is designed to be fast and work well over poor Internet connections - charts are generated in the web browser and very little data is transferred over the Internet.

5.2 Creating a chart and selecting a chart type

The visualizer module provides nine different chart types, each with different characteristics. You can select the type of your chart by clicking on one of the icons in the top left bar titled "Chart type".

1. Column chart: Chart which displays information as vertical rectangular columns with lengths proportional to the values they represent. Useful e.g. for comparing performance of different districts.
2. Stacked column chart: Chart with vertical rectangular columns where bars representing multiple categories are stacked on top of each other. Useful e.g. for displaying trends or sums of related data elements.
3. Bar chart: Same as column chart, only with horizontal bars.
4. Stacked bar chart: Same as stacked column chart, only with horizontal bars.
5. Line chart: Graph which displays information as a series of points connected by straight lines. Also referred to as time series. Useful e.g. to visualize trends in indicator data over multiple time periods.
6. Area chart: Chart which is based on line chart, with the space between the axis and the line filled with colors and the lines stacked on top of each other. Useful for comparing the trends of related indicators.
7. Pie chart: Circular chart divided into sectors (or slices). Useful e.g. to visualize the proportion of data for individual data elements compared to the total sum of all data elements in the chart.
8. Radar chart: Displaying multivariate data on axes starting from the same point. Also known as spider chart.
9. Speedometer Chart: Semi-circle chart which displays values out of 100%. Sometimes referred to as a gauge chart.



Column ▼

UPDATE

File

Options

Doc

Search dimensions

- Data
- Period
- Organisation Unit
 - AEFI Severity
 - AMR Organisms
 - ART Cohort Age
 - Authority
 - AYFS Age
 - Bed Inventory
 - Blood Transfusion Age
 - Blood Type
 - DAT Results
 - DSDM Type
 - EPI Age
 - EPI Age with Months
 - EPI Service Delivery Type
 - EPI Site
 - EPI Vial Wastage Type
 - EQA Results
 - Facility Level

Series

Data ...

Category

Period: 1 selected ...



Column

UPDATE

File

Options

Doc

Search dimensions

Data

Period

Organisation Unit

AEFI Severity

AMR Organisms

ART Cohort Age

Authority

AYFS Age

Bed Inventory

Blood Transfusion Age

Blood Type

DAT Results

DSDM Type

EPI Age

EPI Age with Months

EPI Service Delivery Type

EPI Site

EPI Vial Wastage Type

EQA Results

Facility Level

Series



Data

Category



Period: 1 selected

Column	Stacked column	Bar	Stacked bar
 Line	 Area	 Pie	 Radar
 Gauge	 Year over year (line)	 Year over year (column)	 Single value
 Open as Map			

- ⊗ Facility Level
- ⊗ FP Dispensary Type
- ⊗ FP Methods
- ⊗ FP Timing
- ⊗ FP Visit Type
- ⊗ HepB Age
- ⊗ HIV Age



Column

UPDATE

File

Options

Download



Column



Stacked column



Bar



Stacked bar



Line



Area



Pie



Radar



Gauge



Year over year (line)



Year over year (column)



123

Single value



Open as Map

Facility Level

5.3 Selecting Dimension Items

5.3.1 Select indicators

The visualizer module can display any number of indicators and data elements in a chart and data table. Both indicators and data elements can be selected and appear together in the same chart, with their order of appearance the same as the order in which they are selected. You can select indicators by choosing Indicators from the "Data" header and selecting an indicator group from the list of groups below it. This will make the indicators in the selected group appear in the list under "Available indicators" to the left. From that list you can double click on any indicator in order to select it, this will move it to the list under "Selected indicators". Alternatively you can mark one or more indicators and click the single-arrow button. To select all indicators you simply click on the double-arrow button. To deselect indicators you can do correspondingly in the "Selected indicators" list.

Data

Data Type
Indicators ▼

Select indicator group
[All groups] ▼

Q Search

- 105a - Average Turn Around Time
- 105a - Female Cardiovascular Diseases(0-28 days)
- 105a - Female Cardiovascular Diseases(15-19 Yrs)
- 105a - Female Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(10 - 14 Yrs)
- 105a - Male Cardiovascular Diseases(15-19 Yrs)
- 105a - Male Cardiovascular Diseases(20 Yrs & above)
- 105a - Male Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(5 - 9Yrs)
- 105a - No. of Samples Referred (For those you received results)
- 105a - RT-Cryoprecipitates(0-4 yrs Female)
- 105a - RT-Cryoprecipitates(0-4 yrs Male)

SELECT ALL

Selected Data

- 105a - Female Cardiovascular Diseases(10 - 14 Yrs) x
- 105a - Female Cardiovascular Diseases(20 Yrs & above) x
- 105a - Female Cardiovascular Diseases(5 - 9Yrs) x
- 105a - Male Cardiovascular Diseases(0-28 days) x



DESELECT ALL

HIDE

UPDATE

Data

Data Type: Indicators

Select indicator group: [All groups]

Q Search

- 105a - Average Turn Around Time
- 105a - Female Cardiovascular Diseases(0-28 days)
- 105a - Female Cardiovascular Diseases(15-19 Yrs)
- 105a - Female Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(10 - 14 Yrs)
- 105a - Male Cardiovascular Diseases(15-19 Yrs)
- 105a - Male Cardiovascular Diseases(20 Yrs & above)
- 105a - Male Cardiovascular Diseases(29 days - 4 Yrs)
- 105a - Male Cardiovascular Diseases(5 - 9Yrs)
- 105a - No. of Samples Referred (For those you received results)
- 105a - RT- Cryoprecipitates(0-4 yrs Female)
- 105a - RT- Cryoprecipitates(0-4 yrs Male)

SELECT ALL

Selected Data

- 105a - Female Cardiovascular Diseases(10 - 14 Yrs) x
- 105a - Female Cardiovascular Diseases(20 Yrs & above) x
- 105a - Female Cardiovascular Diseases(5 - 9Yrs) x
- 105a - Male Cardiovascular Diseases(0-28 days) x

DESELECT ALL

HIDE UPDATE

5.3.2. Select data elements

To select data elements choose Data Elements from the "Data" header. The same principle for selecting and deselecting indicators applies for data elements.

Data

Indicators

Data elements

Data sets

Event data items

Program indicators

- 033B-AP03. Expected eMTCT Mothers in Appt
- 033B-AP04. eMTCT Missed Appointments
- 033B-CD01a. Malaria (diagnosed) - Cases
- 033B-CD01b. Malaria (diagnosed) - Deaths
- 033B-CD02a. Dysentery - Cases
- 033B-CD02b. Dysentery - Deaths
- 033B-CD02c. Dysentery - Cases Tested
- 033B-CD02d. Dysentery - Cases Positive
- 033B-CD03a. SARI - Cases
- 033B-CD03b. SARI - Deaths

SELECT ALL



Selected Data

DESELECT ALL

HIDE

UPDATE

Data

- Indicators
- Data elements**
- Data sets
- Event data items
- Program indicators

- 033B-AP03. Expected eMTCT Mothers in Appt
- 033B-AP04. eMTCT Missed Appointments
- 033B-CD01a. Malaria (diagnosed) - Cases
- 033B-CD01b. Malaria (diagnosed) - Deaths
- 033B-CD02a. Dysentery - Cases
- 033B-CD02b. Dysentery - Deaths
- 033B-CD02c. Dysentery - Cases Tested
- 033B-CD02d. Dysentery - Cases Positive
- 033B-CD03a. SARI - Cases
- 033B-CD03b. SARI- Deaths

SELECT ALL

→

←

Selected Data

DESELECT ALL

HIDE

UPDATE

5.3.3. Select reporting rates

The visualizer can display reporting rates in a chart, by itself or together with indicators and data elements. Reporting rates can be selected by choosing Reporting Rates from the "Data" header. Reporting rates are defined by data sets. It can be selected by double-clicking in the list of available data sets to the left.

Indicators

Data elements

Data sets

Event data items

Program indicators

- HMIS 033b - Weekly Epidemiological Surveillance Report (Reporting rate)
- HMIS 097b - VHT/ICCM Quarterly Report (Reporting rate)
- HMIS 104 - NTDS MDA Implementation Report (Reporting rate)
- HMIS 105:01 - OPD Monthly Report (Attendance, Referrals, Conditions, TB, Nutrition) (Reporting rate)
- HMIS 105:02-03 - OPD Monthly Report (MCH, FP, EID, EPI & HEPB) (Reporting rate)
- HMIS 105:04-05 - OPD Monthly Report (HTS & SMC) (Reporting rate)
- HMIS 105:06-09 - OPD Monthly Report (Supplies, Outreaches & Supervision) (Reporting rate)
- HMIS 105:10 - OPD Monthly Report (Lab) (Reporting rate)
- HMIS 105C- Palliative Care Monthly Report (Reporting rate)

SELECT ALL



Selected Data

DESELECT ALL

HIDE

UPDATE

Data

- Indicators
- Data elements
- Data sets**
- Event data items
- Program indicators

- 033B-AP03. Expected eMTCT Mothers in Appt
- 033B-AP04. eMTCT Missed Appointments
- 033B-CD01a. Malaria (diagnosed) - Cases
- 033B-CD01b. Malaria (diagnosed) - Deaths
- 033B-CD02a. Dysentery - Cases
- 033B-CD02b. Dysentery - Deaths
- 033B-CD02c. Dysentery - Cases Tested
- 033B-CD02d. Dysentery - Cases Positive
- 033B-CD03a. SARI - Cases
- 033B-CD03b. SARI - Deaths

SELECT ALL

Selected Data

DESELECT ALL

→

←

HIDE

UPDATE

5.3.4. Select fixed and relative periods

Click on the "Periods" header. For fixed periods, select a period type from the combo box. You can select any number of fixed periods from any period type. Below the fixed period you will find the relative period checkboxes and you may select as many as you like. The names should be fairly self-descriptive and they are relative to the current date, meaning that if the current month is March and you select "Last month", the month of February will be included in the chart. You are also free to combine fixed periods and relative periods in the same chart. Overlapping periods will be filtered so that they only appear once.

Period

Relative periods

Fixed periods

Period type Year

Monthly 2020

- January 2020
- May 2020
- June 2020
- July 2020
- August 2020
- September 2020
- October 2020
- November 2020
- December 2020

SELECT ALL

Selected Data

- February 2020
- March 2020
- April 2020



DESELECT ALL

HIDE

UPDATE

Period

Relative periods **Fixed periods**

Period type Year
Monthly 2020

- January 2020
- May 2020
- June 2020
- July 2020
- August 2020
- September 2020
- October 2020
- November 2020
- December 2020

SELECT ALL

Selected Data

- February 2020 x
- March 2020 x
- April 2020 x

→

←

DESELECT ALL

HIDE **UPDATE**

5.3.5. Select organisation units

You can select which organisation units to include in the chart by clicking the "Organisation units" header. This section features three ways of selecting organisation units, which can be selected by clicking on the gear icon directly below the organisation units header. The default mode is called "Organisation units" and lets you select the organisation units you want to appear in the chart from the tree. This mode also features three checkboxes. Checking "User org unit" will disable the organisation unit tree and give you the organisation unit that is related to the current/logged in user instead. This is also useful for administrators as they can create a meaningful "system" favorite with this option checked and all users will find their respective organisation unit when they open it. The the same concept goes for "User sub-units" and "User sub-x2-units". The second mode is called "Select levels". Here you can select all organisation units at one or more levels. However, at the same time you also have the option to select parent organisation units in the tree, which makes it easy to select e.g. all facilities inside one or more districts. The same thing goes for the third mode called "Select groups". Here you can select all organisation units inside one or more groups and parent organisation units at the same time.

5.3.6 Change Display of Chart

5.3.7 Download Chart as Image, PDF or data source

5.3.8 Manage Chart Favorites

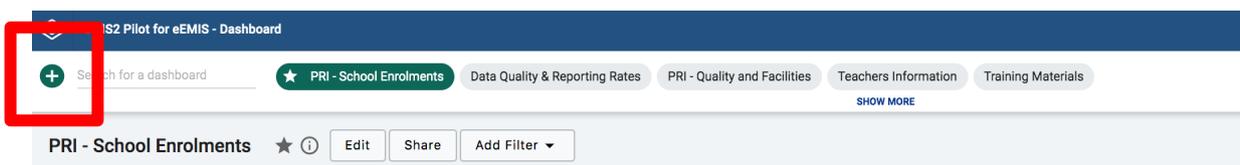
5.3.9 Visualize Chart as Pivot table

6. Dashboards

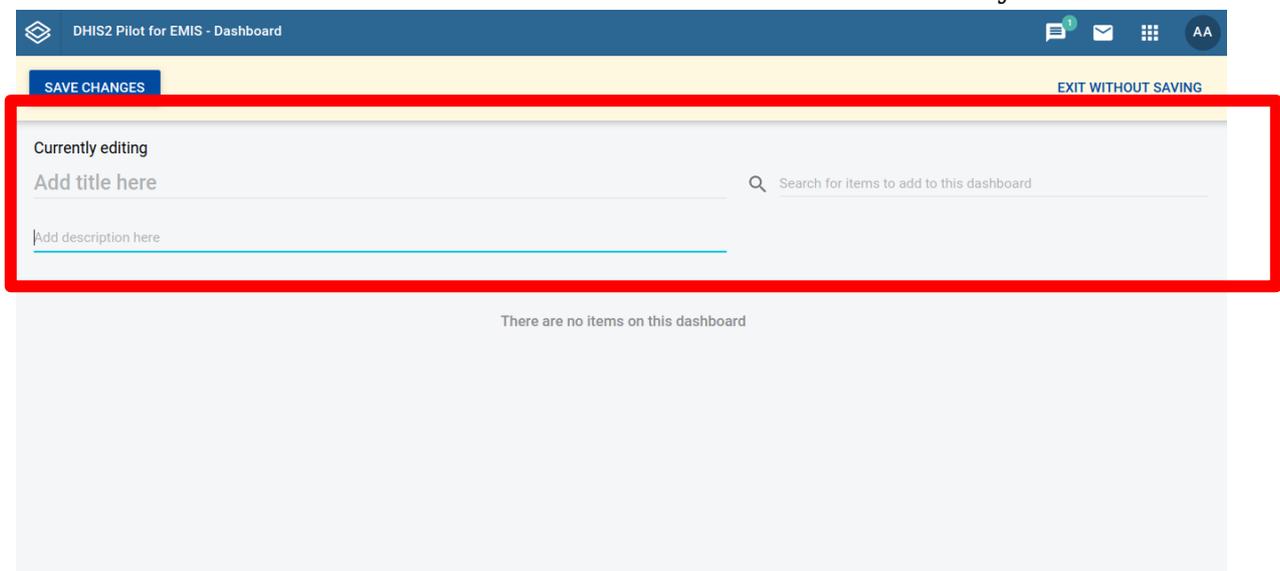
After login, HMIS your default Dashboard. Dashboards are a collection of charts and tables that display dynamic information. You can either use dashboards defined by your administrator, or build your own dashboards on the basis of the charts or pivot tables visible to you.

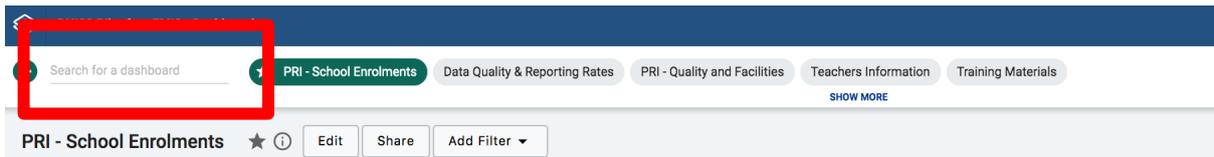
6.1 Create Dashboards

1. From the home screen, click the  button to add a new dashboard.



2. Enter a title and description of your dashboard and use the **'search for items to this dashboard'** to add the items saved in your favorites





6.4 Resize the Dashboard Pane

You can set a specific height for the dashboards pane by down-clicking and dragging the bottom edge of the control bar. When you finish dragging, the new height will be set. Clicking on **SHOW MORE** will expand the control bar to its maximum height (10 “rows”). Clicking on **SHOW LESS** will reset the height to your customized height.



6.5 Filter Dashboard Data

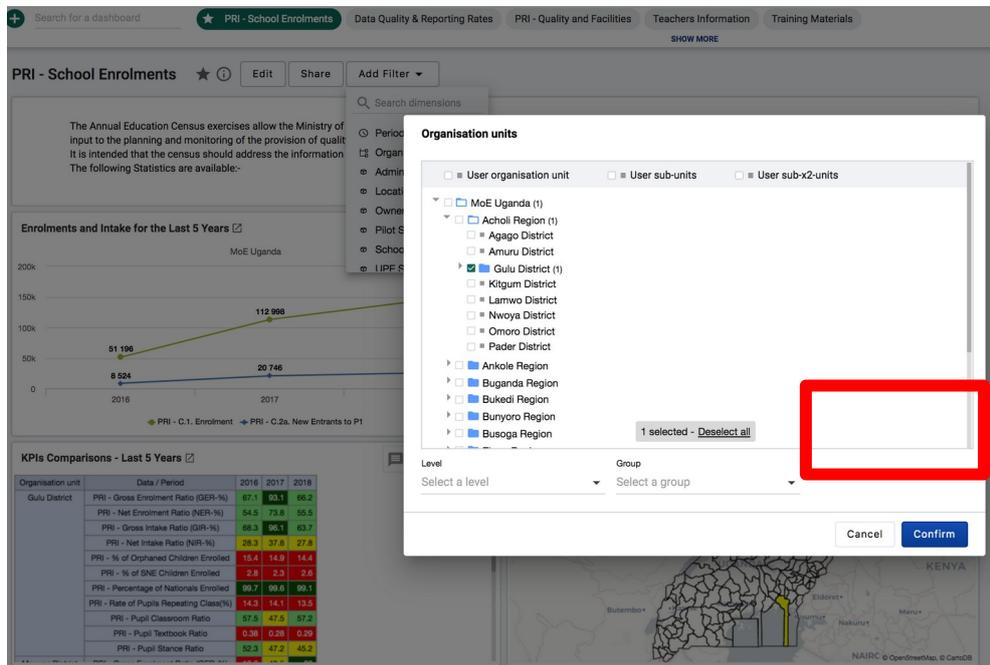
To add a filter of the dashboard, the “Add Filter”

The image shows the dashboard with the 'Add Filter' dropdown menu open. The menu lists several filter categories: Period, Organisation Unit, Administrative Units, Location, Ownership, Pilot Schools, School Type, and UPE Status. The dashboard content includes a text block about the Annual Education Census, a line chart for 'Enrolments and Intake for the Last 5 Years', a bar chart for 'Net and Gross Enrolment Ratio', a table for 'KPIs Comparisons - Last 5 Years', and a map for 'GER in Districts'.

Organisation unit	Data / Period	2016	2017	2018
Gulu District	PRI - Gross Enrolment Ratio (GER-%)	67.1	63.1	66.2
	PRI - Net Enrolment Ratio (NER-%)	64.5	73.8	55.5
	PRI - Gross Intake Ratio (GIR-%)	68.3	66.1	63.7
	PRI - Net Intake Ratio (NIR-%)	28.3	37.8	27.8
	PRI - % of Orphaned Children Enrolled	15.4	14.0	14.4
	PRI - % of SNE Children Enrolled	2.8	2.3	2.6
	PRI - Percentage of Nationals Enrolled	99.7	99.6	99.1
	PRI - Rate of Pupils Repeating Class(%)	14.3	14.1	13.5
	PRI - Pupil Classroom Ratio	57.5	47.5	57.2
	PRI - Pupil Textbook Ratio	0.88	0.88	0.89
PRI - Pupil Stance Ratio	52.3	47.2	45.2	

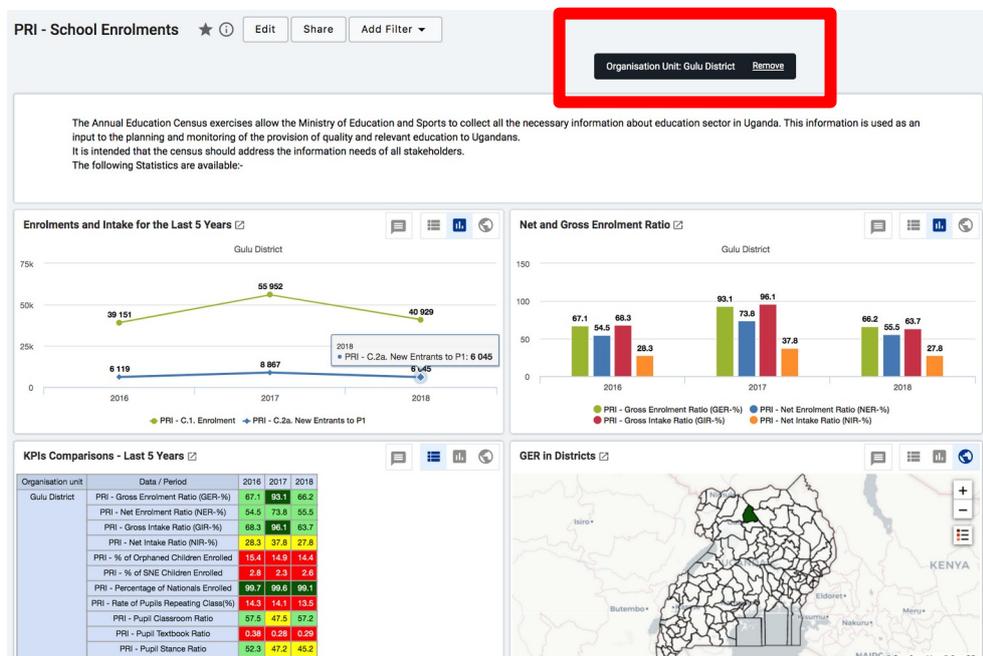
Choose Period, Organisation Unit, Administrative Units, Location, Ownership etc depending on the variable that you want to alter to view more meaningful data.

In the example below, when Organisation Unit is chosen



One is able to view and choose the administrative unit of analysis as seen above

The dashboard immediately changes to cater for the choice above as seen below



6.6 Interpret Dashboard Data

You can write interpretations for the chart, pivot table, map, event report, and event chart items. Click on the interpretations button



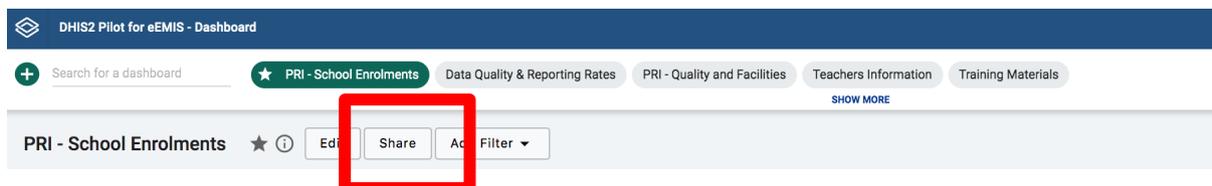
and the item will be expanded vertically underneath to show the interpretations and replies. You can like an interpretation, reply to an interpretation, and add your own interpretation. You can edit or delete your own interpretations and replies, and if you have moderator access, you can delete others' interpretations.

It is possible to format the description field, and interpretations with **bold** , *italic* by using the Markdown style markers * and _ for **bold** and *italic* respectively. The text field for writing new interpretations have a toolbar for adding rich text. Keyboard shortcuts are also available: Ctrl/Cmd + B and Ctrl/Cmd + I. A limited set of smilies is supported and can be used by typing one of the following character combinations: :) :-) : (:-(:+1 :-1. URLs are automatically detected and converted into a clickable link.

Interpretations are sorted by date descending, with the most recent shown on top. Interpretation replies are sorted by date ascending, with the oldest shown on top.

6.7 Share Dashboard Data

In order to share a dashboard with user groups, click on the **SHARE** button to the right of the dashboard title to display the dashboard sharing settings options. To share the dashboard with specific users or user groups, type in the name in the input field to add them to the dashboard sharing settings



All dashboards have two sharing groups set by default.

- External access (without login)
This option, when selected, provides access to the dashboard as an external resource. This is useful for when you are creating an external web portal but would like to call information from a dashboard you have made internally within DHIS2. By default, this option is not selected.
- Public access (with login)
This option allows the selected dashboard to be pushed to all users within your DHIS2 instance. This can also be hidden from public view by selecting the “None” option, which is the default option for new dashboards.

User groups that have been added manually can be assigned two types of permissions within the dashboard

- Can view
Provides the user group with view only rights to the dashboard.
- Can edit and view
Allows the user groups to edit the dashboard in addition to viewing it. Editing allows for altering the layout, resizing and removing items, renaming/deleting the dashboard etc.

You can provide users with the url of the dashboard, allowing them to navigate directly to the dashboard. To get the dashboard url, just access the dashboard in view mode, and copy the browser url