



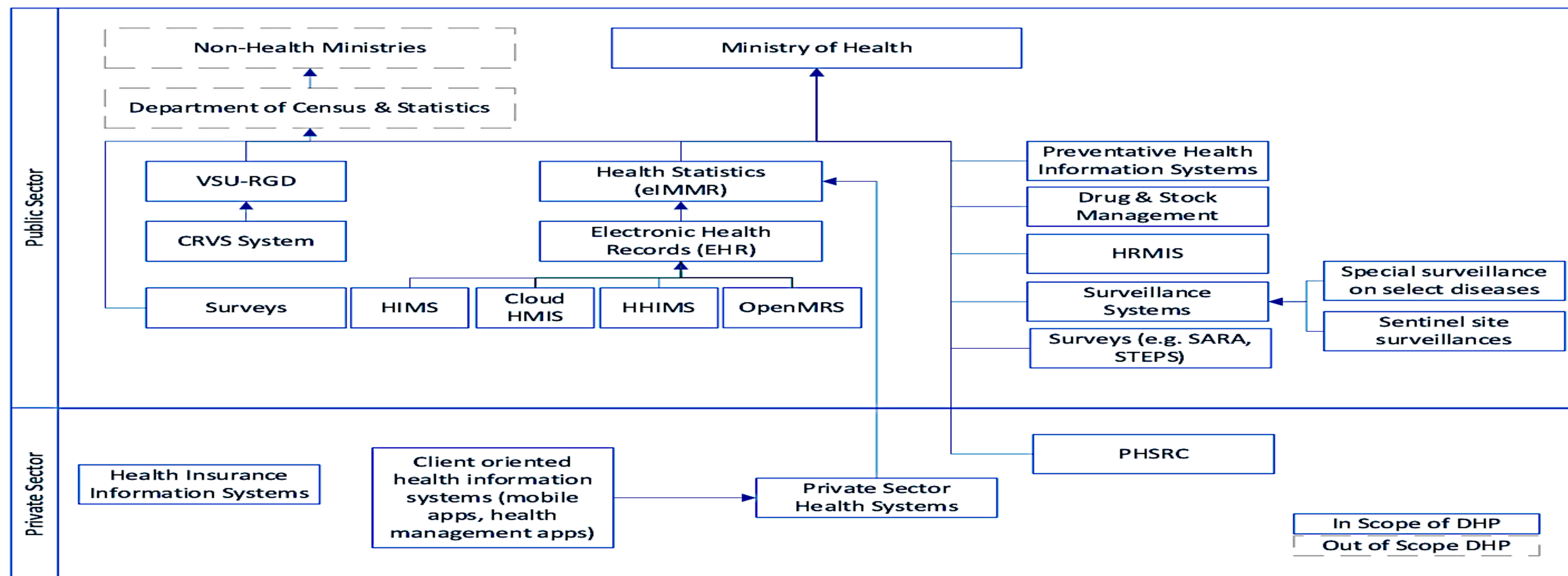
Karunapema P¹, Siribaddana P², Sylva KKP¹, Kulatunga GGAK¹, Fernando SKPA¹, Jayakody DH¹, Mendis K¹, Weerabaddana C¹, Ariyaratne MHB¹
¹Ministry of Health, Sri Lanka, ²World Health Organization, Geneva, Switzerland

Country Overview

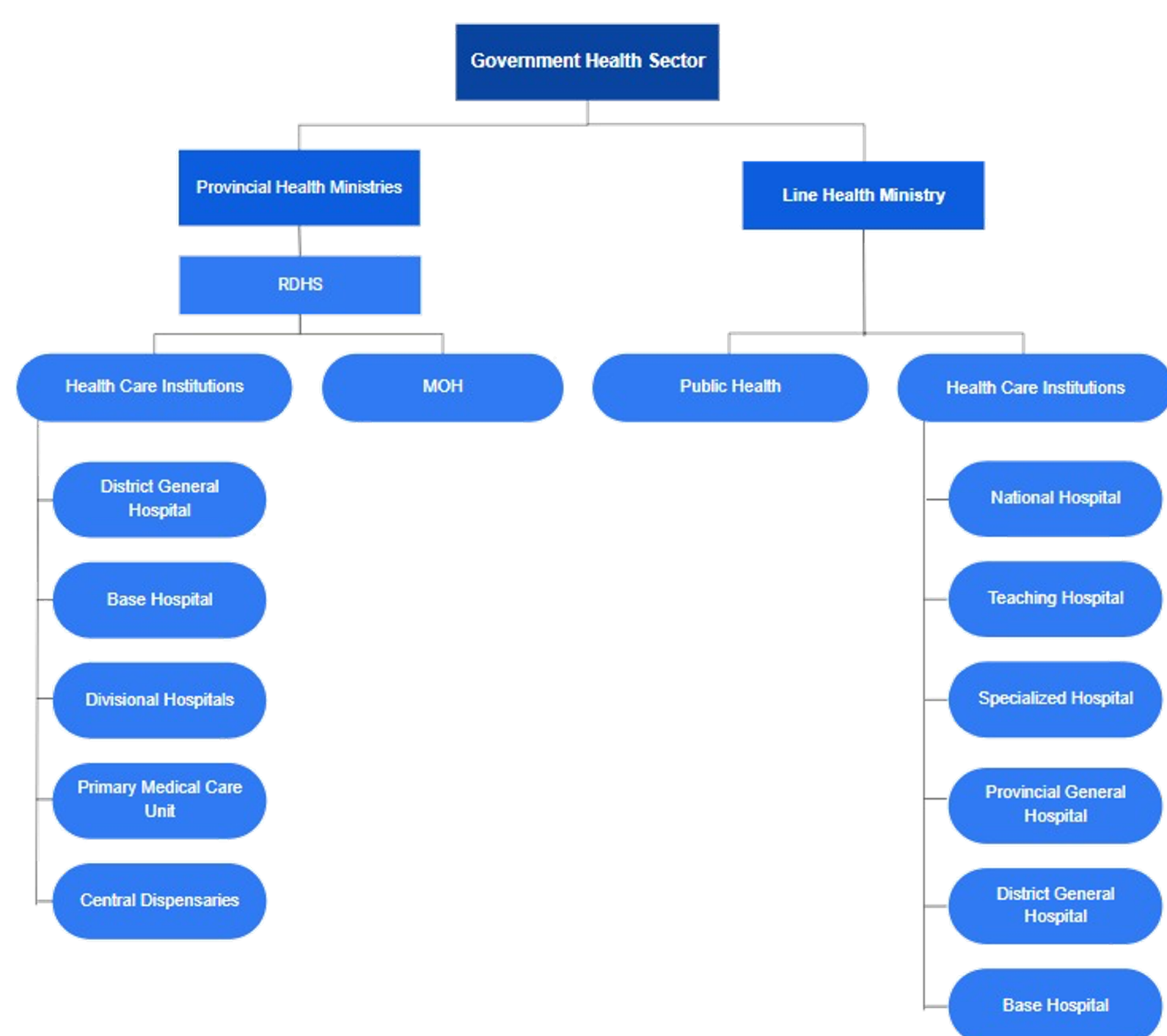
use selected indicators, e.g.:

Population	22.2 million
GDP/Capita	USD 3,474
THE/Capita	3.9% of GDP
Public health spending %GGE	1.5% of GDP
HIS spending %Public spending	
HIS spending %THE	

Overview of the Health Information System



Organization of Health System



Status of HIS (Based on SCORE)

Surveys	CRVS	Optimizing health service data	Review of progress and performance	Enabling data use for policy and action
STEPS survey	CRVS system	HHIMS, HIMIS, SWASTHA	Human Resource Information System	Logistics Information Management Sys
National oral health survey		ePIMS, PIMS, eRHIMS	TCS Connect, MS Connect	Document Information Management Sys
Survey for major diseases		Cluster information System, CloudHIMS, eIMMR,	Planning IMS	Digital Health Atlas, National Health Dashboard

Why HDC?

1. The Health Data Collaborative brings together a diverse network of over 220 partner organizations with expertise in various aspects of health data. Collaborating provides the Ministry of Health with access to global knowledge, best practices, and innovative solutions that can enhance the country's health data infrastructure.
2. By participating in collaborative efforts, the Ministry of Health can benefit from shared standards and methodologies for data collection, analysis, and reporting. This collaboration can contribute to the improvement of data quality, making it more reliable and actionable for decision-makers.

Success

1. Collaborative efforts leading to national and international partnerships with clear understanding of health information and digital health needs
2. Avoid any redundancy of HISs or work process by donor
3. When partners are looking for partnerships / investment should align with existing policies, strategic frameworks and digital health blueprint
4. The alignment of technical, financial, and human resources with country-owned strategies can lead to more effective and targeted health interventions.
5. Uplift Health Informatics speciality to be inline with the increasing demand for human resources for digital health

Bottlenecks and challenges

1. Ensuring the sustainability of the collaborative efforts over the long term can be challenging.
2. Partners within the country are not very aware of the regional and national level partnerships
3. No proper mechanism to communicate our priorities during collaborations

Lessons Learned and Recommendations

1. The involvement of medical specialties related to Digital Health Applications will enhance the sustainability of HDC collaborations
2. The establishment of joint work groups with partners will enhance trust and acceptance of data exchange

Top 5 HIS priorities for 2024-25

1. Develop an integrated Digital Health Platform and a National Electronic Health Record and ensuring their sustainability
2. Establishing seamless information exchange between curative, public health and private sectors, along with strengthening the infrastructure
3. Strengthening health data governance mechanisms
4. Capacity building of health workforce on digital transformation
5. Implementation of a National Telemedicine platform and innovative applications to enhance the continuation and quality of care

Actionable next steps

Establish a country level coordination mechanism to between partners on digital health and health information

Partners

Global Fund
 WHO
 ADB
 UNICEF
 World Bank
 APAMI
 AeHIN
 OpenHIE
 Jembi
 IMIA
 HISSL
 SLCHI