

**DH&I WG All-member meeting**  
**April 20, 2017**

Action items:

- Next month's meeting: May 18
- Email [lwall@path.org](mailto:lwall@path.org) if you would like to share updates.
- Maturity Model Meeting: took place on April 26. Next will be May 24 (email [lwall@path.org](mailto:lwall@path.org) if you would like to join).
- Fill out the [Country Activity Tracker](#)
- Review, edit, and add to the [Country selection methodology](#)

DH&I strategic discussion

**DH&I WG value proposition - Adele**

- There are two scenarios for which we need value propositions. The first is this WG's current situation-coordinating existing investments and advocating for countries' identified needs. The second scenario is for fundraising to meet country-identified needs and proactively coordinating future investments.
- This WG can explore some ways to pool funds to help countries achieve large scale implementation success.
- Going through the process of developing a value proposition will help us align expectations of and within this WG.
- ➤ We will begin a group discussion and enable opt-in for those who want to continue discussion offline. We will create a slack channel for this discussion.

**DH&I WG country engagement selection methodology - Lesley-Anne Long (PATH's Digital Health Initiative)**

- The PATH Digital Health Initiative team has a core staff of 4 people, so they need to be able to prioritize requests for support. They drafted a methodology for country selection because they were receiving a number of requests (from within this WG as well as externally) for country engagement.
- They elaborated on 5 areas: political will, existing ICT infrastructure, stability, donor priority, and current health spending.
- PATH is sharing those categories in the [country selection methodology](#). This may provide the WG a starting place, in combination with the HDC country engagement strategy, to think about how to prioritize country requests.
- ➤ **Please add to this tool and iterate so that the WG may operationalize it.**

**Country activity tracker - Adele**

- The WG is also sharing a [country activity tracker](#) that has been developed to help members of the WG track what activities members are involved in and to ensure that investments are coordinated in the countries the WG is considering engaging in.
- There are rows available for WG members to provide basic information about existing investments in those countries, including what activities they cover, and who the point of contact is for coordination, budget, etc.
- Please review the country requests for assistance, which are at the top of each page. These were the requests made in December 2016. Please fill out your activities and indicate which of the requests they align with.
- **➤Please indicate using RACI model your interest in ongoing country-level coordination between monthly calls ([Responsible-Accountable-Consulted-Informed](#))**
- Members can add additional worksheets for other countries in which they have activities they would like to report out on.
- **➤For ongoing updates on activities covered through these existing investments, please use the country channels in the WG Slack account ([dhiwg.slack.com](https://dhiwg.slack.com))**

#### Country update: Malawi

##### **Eduardo Celades (on behalf of HDC Country Action WG)**

- There's been an effort by WHO to help coordinate locally spent resources in Malawi. For example, there is a new commitment of \$1M from Global Fund for HMIS support and there have been new resources from Gates as well.
- The primary focus has been harmonizing a common approach to M&E. Everything is now integrated into DHIS2 and there's a metadata registry being developed as well.
- MoH, supported by partners (WHO and others), is currently working on a future-looking common investment framework (to be released in Q2-Q3 2017). The framework builds on the mapping of investments, which maps the investments from 17 partners who are investing into Health Information Systems. The investment mapping captured over \$40 million distributed across the six main areas of the national HIS. The framework will be completed in the next quarter.

##### **Maganizo Monawe (Ministry of Health - Malawi)**

- The MoH has been focused on digital health and interoperability work. Since the last update they've been working on the harmonizing the systems in general. Interoperability is one component, but they've been focused recently on metadata such as harmonization of indicators. They have plugged this work into the HMIS framework.
- The Ministry has also been working on harmonizing the data collection tools and so far four registers have been harmonized, though they are not yet complete, and the questions within these four registers have been made more consistent.
- There was also an assessment of the HIS landscape in Malawi to understand the types of systems that currently operate within the country, with a specific focus on which systems need to integrate their data. The Ministry has been working towards developing the national HIT framework that will describe the technologies needed to provide this integration.

- Some of these registries already are underway:
  - health worker registry
  - facility registry
  - commodity registry
- As far as digital health in general, the MOH is working to strengthen existing successful implementations: for example: helping key implementers of EMRs figure out how to expand their work across the country.
- There are additional systems which they're focusing on, including drug supply chain management systems, and they plan to adopt OpenLMIS nationally.
- They have recently been discussing single country platforms, using an open platform and locally customizing it based upon local needs. They hope this will help their efforts to enable interoperable data at the country level.
- HSSP2 will be used to drive their HIS strategy. HSSP2 is being developed actively, and the formal release will be a precursor to a reconsideration of their HIS national strategy.
- They have a local HDC working group, housed at CMED (Central Monitoring and Evaluation Division).
- **➤You can track some of this work on the Country Action WG sharepoint:**  
<https://workspace.who.int/sites/hdc/Country%20documents/Forms/By%20country%20list.aspx> (Email [ruscianof@who.int](mailto:ruscianof@who.int) for access.)

#### Other Member Updates

##### **East Africa Digital Health Summit - Andrew Karlyn (USAID)**

- Outcomes of the Malawi meeting (1.5 years ago) included gaining a better understanding of private sector plans and to get better alignment with host government strategies.
- Their focus is on the East African region is because of East Africa Community Health Research Commission.
- The event will be held in Kampala, with about 75 representatives from Ministries of ICT and Health, the private sector, and trade and umbrella organizations.
- Objectives:
  - Present landscape analysis of policy across private and public sector (through collecting information prior to conference at country level).
  - Delegates from each country will come forward and discuss investments with the goal of getting harmonization at country level.
  - Emphasize data governance.
  - Help country level operationalize plans and road maps of how to engage the private sector.
- The steering committee is considering inviting representatives from other regions.
- The Summit will take place during the first week of September. The steering committee will consider participation of the WG, but the focus is at the policy/declaration level of private sector engagement in countries.

## **MEASURE Evaluation Interoperability Capability Maturity Model: Sam Wumbugu (MEASURE) -**

<https://drive.google.com/file/d/0BwaERMI3v-rpQ2ZMOW9CNjEzbGs/view?usp=sharing>

- During the small working group for the maturity model meeting, the group discovered MEASURE's work is a great starting point for our group.
- This work is a package of tools, including the interoperability capability maturity model and a diagnostic tool.
- The CMM should help the country find where they are now. They can also use it to define their goal of maturity.
- This draft has been shared.
- We reviewed literature and other existing CMMs (from health and other sectors), and got ideas from Kenya's interoperability working group. MEASURE is working on a report of their process that will be shared in the next few weeks.
- They identified four domains that are the drivers of interoperability:
  - Leadership and governance
  - HR
  - Finance
  - Technology
- They divided them into sub-domains and applied levels of maturity across the different domains.
- This is a work in progress draft and MEASURE is happy to continue to receive feedback (and is receiving feedback from the small working group.)
- MEASURE will also develop a diagnostic tool for countries to self-identify where they are and what areas they need to improve on to graduate to the next level.
- **➤You can contribute to this work through the Small Working Group (next call May 24)**