Asia eHealth Information Network
Strategic Plan: 2012 – 2017

*DRAFT*
SUMMARY

Health information systems (HIS) and eHealth professionals in South and Southeast Asia are organising themselves into a collaborative community to strategically better plan and implement eHealth, HIS, and civil registration and vital statistics (CRVS) activities, accelerate innovation, and coordinate improvements in health outcomes across countries. The Asia eHealth Information Network (AeHIN) (www.aehin.org) is a unique peer assistance forum created by this community to promote better use of information and communication technology (ICT) to achieve better health.

The AeHIN is open to all HIS/eHealth professionals from multiple sectors within South and Southeast Asia—including developed and low- and middle-income countries—to maximize a regional approach for greater country-level impacts. The overall objectives of AeHIN are to empower individuals and institutions that can maximize sustainable eHealth, HIS, and CRVS solutions to derive better quality and timely health information for improving service delivery and the management of health systems.

Modification and adoption of this proposed 2012 – 2017 AeHIN Strategic Plan is envisioned as a means of promoting eHealth, HIS, and CRVS knowledge sharing, learning, and peer-to-peer assistance and establishing shared priorities across countries and among development partners. The proposed plan has four main strategic areas for action, including:

1. Build capacity for eHealth, Health Information Systems (HIS), and Civil Registration and Vital Statistics (CRVS) in the countries and in the region.
2. Increase peer assistance and knowledge exchange and sharing through effective networking.
3. Promote standards and interoperability within and across countries.
4. Enhance leadership, sustainable governance, and monitoring and evaluation.

Through consultation with AeHIN members and development partners, this plan will be prioritised and enhanced with detailed actions and next steps, costing, timelines, identification of roles and responsibilities of key partners, and include a monitoring and evaluation framework. This document can be used to influence national eHealth, HIS, and CRVS policies, strategies, plans, coordination, activities, and change/risk management through peer-to-peer learning and sharing.
ASIA eHEALTH INFORMATION NETWORK

1.0 Purpose

The Asia eHealth Information Network (AeHIN) promotes better use of information communication technology (ICT) to achieve better health through peer-to-peer assistance and knowledge sharing and learning through a regional approach for greater country-level impacts across South and Southeast Asia.

1.1 Aim

AeHIN maintains that better health can be achieved by strengthening evidence-based policies and health systems through better quality and timely health information systems (HIS) and civil registration and vital statistics (CRVS). AeHIN further asserts the role of ICT for health (eHealth) as an enabler to improve the flow of information, through electronic means, to support the delivery of quality and equitable healthcare services and management of health systems. To achieve this AeHIN works in four strategic areas to:

- Build capacity for eHealth, Health Information Systems (HIS), and Civil Registration and Vital Statistics (CRVS) in the countries and in the region.
- Increase peer assistance and knowledge exchange and sharing through effective networking.
- Promote standards and interoperability within and across countries.
- Enhance leadership, sustainable governance, and monitoring and evaluation.

1.2 Value Statement

In order to achieve wellness, safety, a better quality of life and better equity in health among populations, we recognize the importance of trust, confidentiality, mutual respect, and community-building. By employing proven (evidence-based) methods in promoting learning and innovation we will achieve efficiency and effectiveness in health services provision and education that will result in better quality of life.

1.3 Principles

AeHIN promotes four core principles for guiding its activities:

- Work towards country ownership and leadership
- Emphasize strategic reuse of eHealth and HIS investments
- Implement open standards to promote interoperability
- Promote openness through an open systems environment
2.0 Membership

AeHIN aims to expand country level-impact through intra-country and cross-country sharing and collaboration. The Network encourages membership among eHealth-related practitioners and organizations (government agencies, private and civil society organizations, development agencies) in the fields of health statistics, epidemiology, health/biomedical informatics, knowledge management, civil registration, health sector ICT project management, organisational development, and related disciplines to be part of AeHIN.

Membership of AeHIN is open and free of charge. Prospective members (individuals or organizations) can submit their membership application accessible on the AeHIN Website (www.aehin.org). Confirmation of membership will be done via email. All countries in the South and Southeast Asia Region are encouraged to be part of the network. Members are categorized as:

2.1 Individual Members

Professionals working eHealth, HIS, and CRVS, such as health statisticians, health planners, HIS programme managers and directors, medical records officers, eHealth scientists and engineers, health informatics specialists, knowledge managers, health ICT project managers and directors, civil registrars, demographers, and all related practitioners can register as individuals.

2.2 Institutional Members

Public and private sector institutions or organizations fall under this category. These can be registered by submitting an official endorsement from the head of the organization/institution.

2.3 Development Partner Members

Donors, technical agencies, and other partner organisations that deliver eHealth, HIS, and CRVS technical and financial assistance to countries can be registered under this category.

3.0 Structure [TO BE DETERMINED AND FINALISED]

A General Assembly is proposed, which consists of all Individual, Institutional and Development Partner Members of AeHIN.

3.1 Executive Committee

An executive committee, consisting of a Chair, Co-Chair, Executive Officer, and members from a representative number of participating countries could potentially form the AeHIN Executive Committee. The latter can be chosen through democratic processes among all individual and institutional members of each country.
It is proposed the AeHIN Executive Committee shall:

- Plan and prepare calendar of activities, based on input of the General Assembly
- Review and monitor activities of the network
- Decide on organizational issues
- Prepare an annual report
- Meet virtually via teleconference quarterly

3.2 Chair and Co-Chair Qualifications, Roles and Responsibilities

It is proposed a Chair and Co-Chair shall be nominated by Members through an annual election process via electronic voting. The Chair or Co-Chair will represent AeHIN in relevant events and functions, as funds allow, and will be key contact persons of the AeHIN for their term of office. If the Chair is on leave for extended periods or is unable to exercise her/his functions, the Co-Chair will assume the Chair’s responsibilities. The Chair and Co-Chair shall:

- Hold the position for a period of 1-2 years (for a period and starting on a date agreed to by the AeHIN Executive Committee and members);
- Preside over meetings;
- Develop and review documents;
- Ensure implementation of AeHIN activities defined by the General Assembly and/or Executive Committee;
- Mobilise resources for AeHIN and coordinate with development partners; and
- Represent the Network, in eHealth and health informatics - related global meetings, subject to available funding.

The Chair and Co-Chair shall be known thought-leaders, successful managers, and champions in the field of eHealth, HIS, CRVS and/or health informatics in country of origin. If the individual will be representing an institution, it is required that permission of their respective Ministry of Health or institution is obtained to undertake the role.

3.3 AeHIN Secretariat

Currently, an ad hoc Secretariat for AeHIN exists and is hosted by the University of the Philippines National TeleHealth Center (NThC). This arrangement can be supported for the time being. The AeHIN Secretariat shall prepare necessary documents and logistics for the AeHIN Executive Committee and General Assembly meetings:

- Prepare preliminary reports on membership, progress of plans and status of resources.
- Keeps the repository of AeHIN documents and monitors those registered by members.
- Acts as communications arm of the AeHIN by preparing all print, broadcast, and online communication materials of the network including the AeHIN online newsletter.
- Maintains and updates the AeHIN website (www.aehin.org) content regularly.
- Coordinate with the AeHIN Executive Committee on messages to be communicated to the network.
- Ensures active discussion among members of the AeHIN.
# AeHIN STRATEGIC PLAN

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<th>STRATEGY</th>
<th>ACTIONS</th>
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| 1. Build capacity for eHealth, Health Information Systems (HIS), and Civil Registration and Vital Statistics (CRVS) in the countries and in the region. | 1.1 Implement national eHealth, HIS, CRVS strategies and plans.  
- Establish **multi-stakeholder governance** mechanism to advocate, coordinate, and manage changes and risks  
- Apply best practices for **assessment, strategic planning, costing, implementation plans, and monitoring and evaluation**  
  - eHealth – WHO-ITU "National eHealth Strategy Toolkit"  
  - HIS – HMN "Framework and Standards for Country HIS"  
  - CRVS – WHO-UQ "Improving the quality and use of birth, death and cause-of-death information: guidance for a standards-based review of country practices"  

1.2 Advocate for eHealth, HIS, and CRVS **career paths** to be addressed in annual sector budgets, training and work plans.  
- Define **ehealth/HIS/health informatics competencies** for public health professionals in low and middle income countries  
- Promote development of **national associations and conferences** for health informatics  
- Convene national **workshops**, conduct pre- and in-service **training**, and support international **exchanges and fellowships** for eHealth, HIS, CRVS professionals and members of AeHIN  
- Support inter-universities collaboration on **curriculum development** on e-health/HIS/health informatics for undergraduate and graduate program  
- Promote **joint research/publication** on ehealth, HIS, health informatics, and CRVS issues  

1.3 Promote eHealth, HIS, and CRVS among key **non-health stakeholders** (e.g., Bureau of Statistics; Ministries of ICT, Finance, Planning, Justice or Civil Registry; and private health providers)  
- Express **call to action** on eHealth, HIS, and CRVS to relevant multi-sector ministers in national and international forums (e.g., World Health Assembly, high-level meetings, Regional Committee Meetings)
2. Increase peer assistance and knowledge exchange and sharing through effective networking.

2.1 Convene regular multi-country conference and workshops consisting of policy makers and implementers.

- Promote eHealth, HIS, CRVS systems sharing, learning, peer-to-peer assistance
- Explore innovative techniques and tools to resolve eHealth, HIS, CRVS technical issues
- Promote standard frameworks, data sets, and platforms of standardisation and interoperability

2.2 Develop open eLearning platform and repository for AeHIN.

- Establish AeHIN Website (www.aehin.org)
- Utilize the Health Ingenuity Exchange (HingX) (www.hingx.org) to access and share artefacts (such as open standards/open source infrastructure and solution stacks)
- Develop eHealth, HIS, CRVS map of activities across AeHIN
- Initiate AeHIN open ehealth academy
- Support the development of Centres of Excellences in ehealth, HIS, and CRVS in each country

3. Promote standards and interoperability within and across countries.

3.1 Implement eHealth, HIS, CRVS best practices for systems and solutions planning, design, development, implementation, operations, and maintenance.

- Promote standardisation and interoperability of health systems (organizational and technological interoperability)
- Apply enterprise architectural approaches, such as the Collaborative Requirements Development Methodology (CRDM), to assess user needs, gather requirements, and design specifications
- Demonstrate country and regional interoperability of eHealth systems and solutions
- Implement programme management techniques for planning, costing, technical documentation, changes, risks, testing, quality assurance, operations, and maintenance.

3.2 Identify, develop, implement appropriate health data standards.

- Conduct country health data standards and interoperability workshops
- Conduct training on specific priority standards
4. Enhance leadership, sustainable governance, and monitoring and evaluation.

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<tr>
<th>4.1 Establish and maintain an official <strong>interagency coordinating mechanism</strong> for eHealth, HIS, and CRVS management and oversight.</th>
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<td>4.2 Enhance <strong>leadership skills, organisational development, change and risk management</strong> of eHealth, HIS, and CRVS.</td>
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<td>4.3 Expand <strong>linkages between public and private sectors</strong>.</td>
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<tr>
<td>- Develop partnerships, technical advisory, and consultative groups</td>
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<td>- Extend <strong>coordination at the sub-national level</strong></td>
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<td>- Promote <strong>corporate social responsibility</strong> pilots, such as within the telecommunications industry</td>
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<td>4.4 Provide or <strong>strengthen the legal basis and polices</strong> for improving eHealth, HIS, and CRVS systems and solutions.</td>
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<td>4.5 Conduct <strong>monitoring and evaluation</strong> to ensure that eHealth, HIS, and CRVS systems strengthening delivers according to health priorities.</td>
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The **AeHIN Workshop** convened 7 – 10 August 2012 in Bangkok, Thailand provides an opportunity for existing and prospective members of AeHIN from more than 20 countries in South and Southeast Asia to review this draft strategic plan. Through consultation with AeHIN members and development partners, this plan will be prioritised and enhanced with detailed actions and next steps, costing, timelines, identification of roles and responsibilities of key partners, and include a monitoring and evaluation framework. This document can be used to influence national eHealth, HIS, and CRVS policies, strategies, plans, coordination, activities, and change/risk management through peer-to-peer learning and sharing.

**Collaborating partners supporting the August 2012 AeHIN Workshop and next steps include:**

![Collaborating partners logos](image-url)