Asia eHealth Information Network

Regional eHealth
Strategic Plan:

2012–2017
Implementation Plan

www.aehin.org

The Asia eHealth Information Network (AeHIN) (www.aehin.org)) is a unique forum of professionals that promotes optimal use of information and communication technology (ICT) to achieve better health. AeHIN is open to all eHealth, HIS, and CRVS professionals from various sectors within South and Southeast Asia—including developed and low- and middle-income countries—maximizing a regional approach for attaining greater country-level health impacts.

Asia eHealth Information Network

Secretariat
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National Institutes of Health
University of the Philippines Manila
Philippines

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Sign Off

The AeHIN Regional eHealth Strategic Plan - Implementation Plan
has been reviewed and accepted by:

AeHIN Chair Acceptance

| Name | Title | Signature | Date (dd/mm/yy) |

AeHIN Co-Chair Acceptance

| Name | Title | Signature | Date (dd/mm/yy) |

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Document Revision History

Version	Date	Prepared by	Comments
0.1	29 October 2012	Aliyah Lou Evangelista, AeHIN Secretariat	First draft
0.2	31 July 2013	Alvin B. Marcelo	Revised program management
0.3	13 August 2013	Alvin B. Marcelo	Added supporting partners
0.4	20 August 2013	Alvin B. Marcelo	Revised sequence of strategies
0.5	22 August 2013	Mark Landry	Added columns for lead agency and supporting agencies
0.6	28 August 2013	Alvin B. Marcelo	Merged documents and expanded the abbreviations
0.7	22 August 2013	Alvin B. Marcelo	Minor edits

Summary

The Asia eHealth Information Network (AeHIN) was formed to foster multi-sectoral collaboration towards eHealth development within countries in the region. The Regional eHealth Strategic Plan (ReHSP) was affirmed at the first AeHIN General Meeting in Bangkok last August 2012. It was designed to guide member countries towards a systematic and rational approach to building reliable country health information systems (HIS) with the goal of improving the health outcomes of their citizens. This document is the ReHSP Implementation Plan (ReHSP-IP) and provides a framework for defining activities directed at fulfilling the ReHSP.
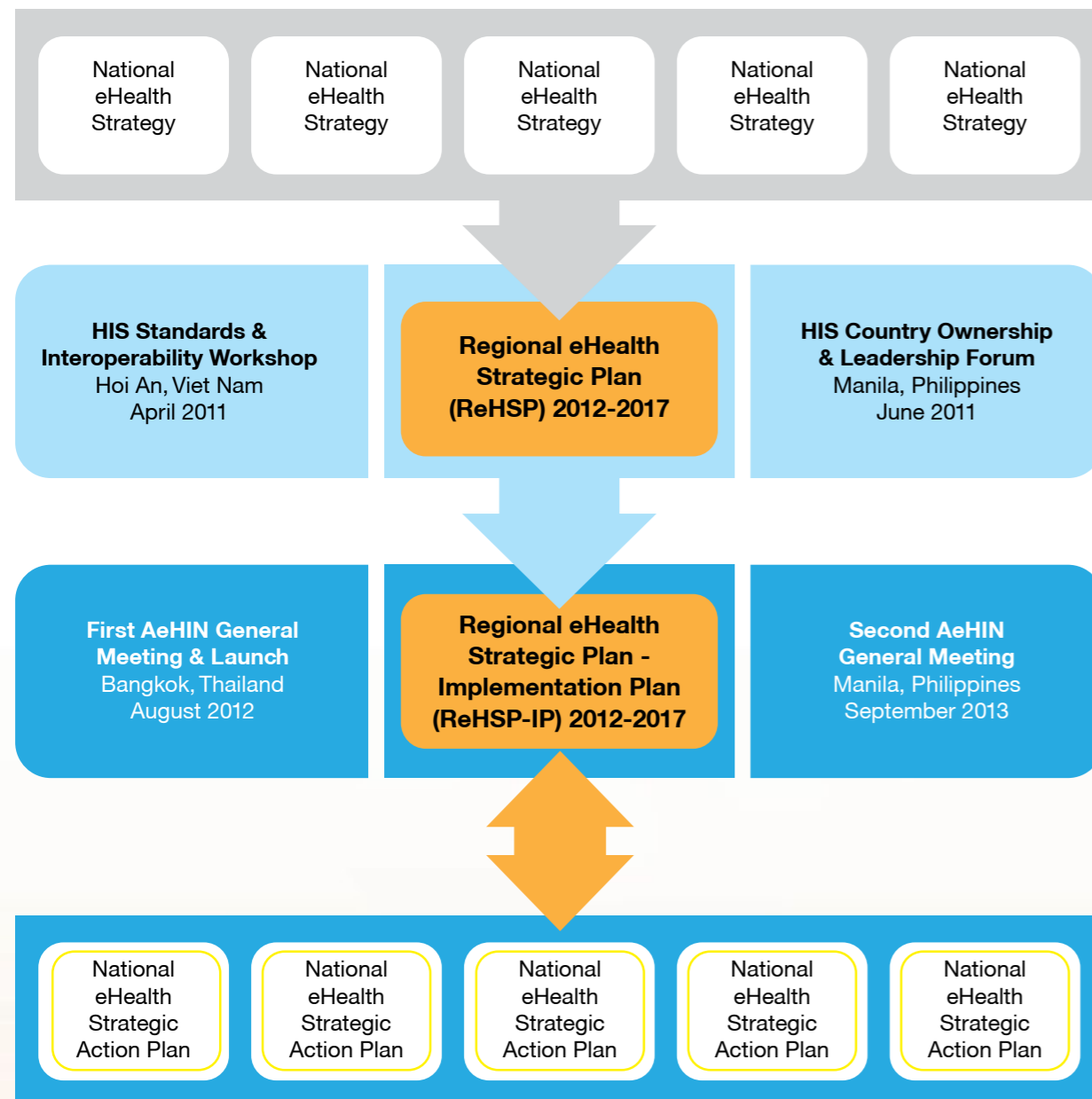
The goal of this ReHSP-IP is to gather relevant eHealth and HIS stakeholders around their respective national eHealth strategic plans and provide them with a framework for action. The need for the ReHSP was first elicited at the HIS Interoperability Workshop in Hoi An, Vietnam April 2011 and was reiterated at the HIS Country Ownership and Leadership Forum in Manila in June 2011. As stakeholders met in these conferences and shared their challenges with eHealth and HIS development, the need for guidance for national eHealth strategy development became clear and evident. In the first AeHIN General Meeting (Bangkok 2012), the Regional eHealth Strategic Plan (ReHSP) was formalized and member countries were consulted regarding possible activities that they can implement to achieve the goals of the strategy. At the end of the meeting, an agreement was reached to consolidate all the activities and organize them into short- and mid-term action plans that will direct the countries towards appropriate eHealth development. As an example, a common request among countries was guidance with implementing the WHO/ ITU National eHealth Strategy Toolkit to derive comprehensive national eHealth strategies and plans.

This Implementation Plan consolidates action items elicited from these previous conferences and employs a logical framework for organizing these into activities that will support eHealth and HIS development at the country level and subsequently, the region. A key principle of AeHIN is that positive regional eHealth impactcan only be achieved with country success. The purposes of the activities under this Implementation Plan are to:

- Support countries towards the implementation of their national eHealth and HIS strategies and plans and collaborate with WHO and other development partners to mobilize cost-effective technical assistance

- Advocate for eHealth, HIS, and CRVS investments and identify common areas of priority that can be consolidated into a shared regional eHealth strategic implementation plan

- Elucidate components of the regional eHealth strategy where support will be needed and build capacity to optimize peer-to-peer, external assistance and resource sharing when and where available

- Provide a platform for knowledge sharing and learning, repository of technical resources, and document alignment of past in-country eHealth activities to the regional eHealth strategic plan where applicable

- Monitor and evaluate impacts of eHealth, HIS, and ICT-enhanced CRVS solutions impacting health outcomes and align current country eHealth activities and partner support to this logical framework

Figure shows a conceptual map depicting the relationship of Regional eHealth Systems Plan and its Implementation Plan with the national eHealth strategies.

Conceptual Map of ReHSP and ReHSP-IP

| National eHealth Strategy | National eHealth Strategy | National eHealth Strategy | National eHealth Strategy | National eHealth Strategy |

HIS Standards & Interoperability Workshop
Hoi An, Viet Nam
April 2011

Regional eHealth Strategic Plan (ReHSP) 2012-2017

HIS Country Ownership & Leadership Forum
Manila, Philippines
June 2011

First AeHIN General Meeting & Launch
Bangkok, Thailand
August 2012

Regional eHealth Strategic Plan - Implementation Plan (ReHSP-IP) 2012-2017

Second AeHIN General Meeting
Manila, Philippines
September 2013

| National eHealth Strategic Action Plan | National eHealth Strategic Action Plan | National eHealth Strategic Action Plan | National eHealth Strategic Action Plan | National eHealth Strategic Action Plan |

The Implementation Plan provides a framework for action designed to achieve the four major components of the Strategic Plan. The action items were synthesized from the country feedback at the first AeHIN General Meeting in Bangkok, Thailand (August 2012), consultation with the AeHIN Scientific Committee and Advisory Group, and presented and discussed at the second AeHIN General Meeting in Manila, Philippines (September 2013).

The objective of Strategic Action Plan-1 (SAP-1) is to support country ownership and leadership, sustain multi-sectoral governance mechanisms, and enhance monitoring and evaluation of eHealth and HIS improvements.

The objective of Strategic Action Plan-2 (SAP-2) is build capacity for eHealth, health information systems (HIS), and civil registration and vital statistics (CRVS) in the countries and in the region.

The objective of Strategic Action Plan-3 (SAP-3) is to increase peer assistance, knowledge exchange, and resource sharing through effective networking.

The objective of Strategic Action Plan-4 (SAP-4) is to promote the use of standards and encourage interoperability within and across countries.

The activities listed in this implementation plan are designed to address at least one of the strategic action plans, with priorities for those which cut-across more than one. An example is the AeHIN General Meeting that serves as a regular summit of official eHealth country representatives and advocates (SAP-3: Networking). In the General Meeting, country progress is reviewed (SAP-1: Leadership, governance, monitoring and evaluation) and future needs are identified (SAP-2: Capability-building).

Since eHealth activities have been ongoing in many countries to some extent even prior to the ReHSP, these are mentioned in the document, including:

1. Regional workshops on national eHealth strategy development and health enterprise architecture

2. Capacity-building on standards and interoperability

3. Capacity-building and networking on emerging eHealth topics including webinars

4. Capacity-building and networking through effective exchange of experts as resource persons in country eHealth conferences

5. Connectathons and similar activities

The ReHSP-Implementation Plan will cover the six-year period from 2012-2017. The AeHIN Management Committee will take responsibility for the execution of the implementation plan after thorough discussions and planning with the Advisory Committee.

List of Acronyms

ADB	Asian Development Bank
aIWG	Innovations Working Group—Asia
AeHIN	Asia eHealth Information Network
CDC	US Centers for Disease Control and Prevention
CRVS	Civil Registration and Vital Statistics
EA	Enterprise Architecture
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit
HIE	Health Information Exchange
HingX	Health Ingenuity Exchange
HIS	Health Information Systems
HL7	Health Level 7
HMN	Health Metrics Network
ICT	Information and Communications Technology
IDRC	International Development Research Centre (Canada)
IHE	Integrating the Healthcare Enterprise
IHTSDO	International Health Technology Standards Development Organization
ISO	International Standards Organization
ITU	International Telecommunications Union
NORAD	Norwegian Agency for Development Cooperation
NTHC	National Telehealth Center
OpenEHR	Open Electronic Health Record
OpenHIE	Open Health Information Exchange
PEPFAR	US President's Emergency Plan for AIDS Relief
SDO	Standards Development Organization
SEARO	WHO Southeast Asia Regional Office
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
USAID	United States Agency for International Development
WB	World Bank
WHO	World Health Organization
WPRO	WHO Western Pacific Regional Office

1. Introduction

1.1 Purpose

The Asia eHealth Information Network (AeHIN) believes that open communication and learning is central to improving capacities in the region. As such, this document is drafted to align and focus eHealth, Health Information Systems (HIS), and information and communications technology (ICT) for Civil Registration and Vital Statistics (CRVS) initiatives in the region to maximize current investments and improve health outcomes.

This Implementation Plan (ReHSP-IP) describes how the AeHIN Strategic Plan 2012-2017 will be implemented and defines the governance, management, priorities, sequence, and adaptive technical assistance (ATA) work packages needed to achieve the goals of the network.

AeHIN promotes appropriate use of ICT to achieve better health through peer-to-peer assistance and knowledge sharing. It aims to attain greater country-level impacts through a regional approach across South and Southeast Asia.

1.2 Audience

This document is intended for:
- Government officials in ministries of Health and other departments involved with national health information systems development

- HIS/eHealth practitioners and organizations from multiple sectors (government agencies, private and civil society organizations, development agencies) within South and Southeast Asia-including developed and low-to-middle-income countries (LMICs)

- Professionals in the fields of health statistics, epidemiology, health/biomedical informatics, knowledge management, civil registration, health sector ICT project management, organisational development, and related disciplines.

- Development partners with interest in health information systems development including donors, technical agencies, academe, non-government organizations, implementing partners and solutions providers

- The general public

1.3 How to use this document

This document will guide countries and development partners in identifying regional activities that directly and indirectly support their national eHealth, HIS, and CRVS strategies and action plans. The Implementation Plan will help access and align relevant resources for achieving their eHealth strategy objectives.

The Implementation Plan reflects outcomes, summaries, roadmaps, and agreed priorities and approaches discussed during multiple regional meetings and workshops since 2011:

- Proceedings of the Health Information Systems Inter-operability Workshop in Hoi An, Vietnam, April 2011

- Proceedings of the Health Information Systems Forum in Manila, June 2011

- Proceedings of the AeHIN Scientific Committee meeting in Bangkok, December 2011

- Proceedings of the 1st AeHIN General Meeting and Launch in Bangkok, August 2012

- AeHIN Regional eHealth Strategic Plan (2012-2017)

1.4 Feedback

Feedback on the ReHSP-IP are welcome and may be sent to the AeHIN co-chairs and/or the Secretariat.

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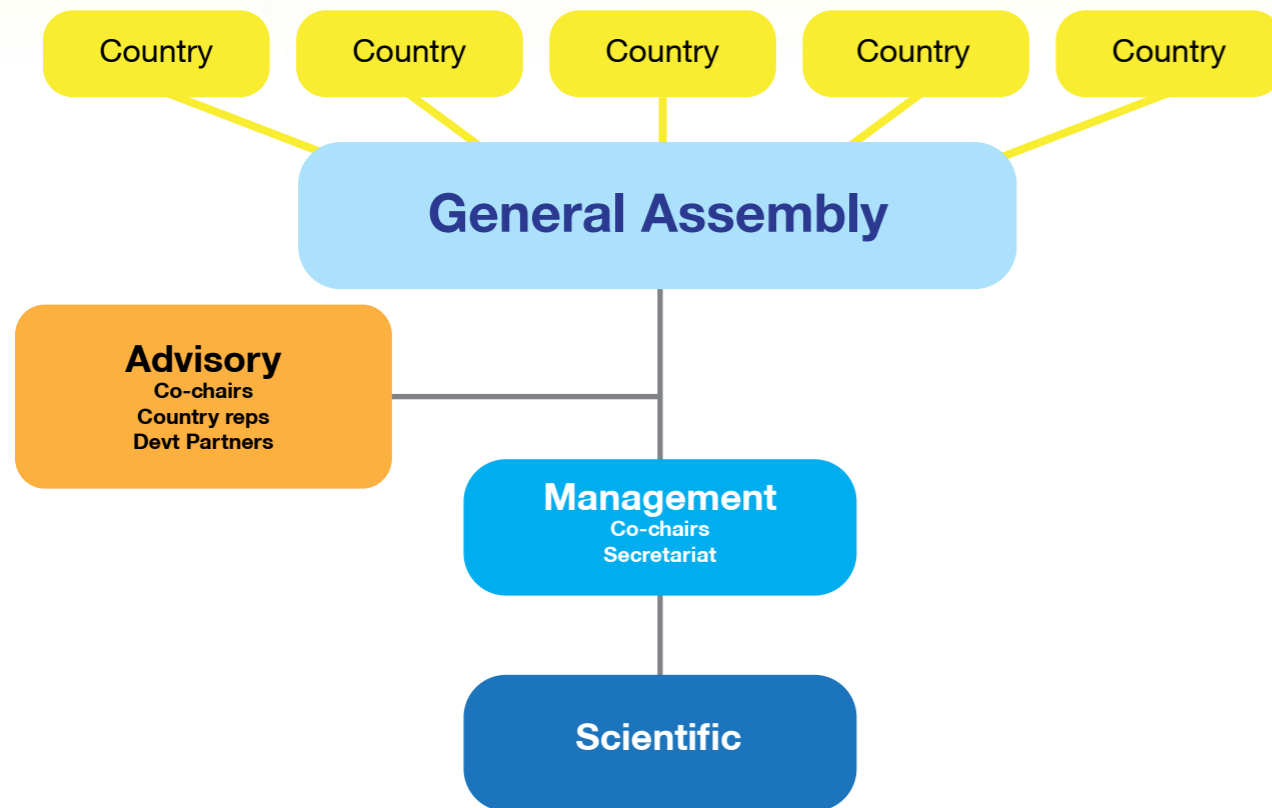Dr Boonchai Kijsanayotin
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2. Implementation Overview

Title	Regional eHealth Strategic Plan - Implementation Plan 2012-2017
Starting Date	January 2013
Duration	60 months
Personnel	**Advisory Committee** • Country representatives • Two representatives from WHO—WPRO and SEARO • One representative from each development partner members (ITU, UN ESCAP, Rockefeller Foundation, USAID/US CDC, NORAD, ADB, WB, and IDRC) • AeHIN Co-chairs • Technical Advisers **Management Committee** • AeHIN Co-chair (Dr Alvin Marcelo) • AeHIN Co-chair (Dr Boonchai Kijsanayotin) • AeHIN Secretariat (Aliyah Lou Evangelista) **Scientific Committee** • Dr Mean Reatanak Sambath, Cambodia • Prof Anis Fuad, Indonesia • Dr Jai Mohan, Malaysia • Dr Portia Marcelo, Philippines • Dr Nguyen Phuong Hoang, Viet Nam • Mr Mark Landry, WPRO **General Assembly** • individual members • institutional members • development partner members
Phases	Phase 1: January 2012-December 2013 Phase 2: January 2014-December 2015 Phase 3: January 2016-December 2017

2.1 Governance

The network shall be governed by the AeHIN Management Committee and the Advisory Committee.

- The Management Committee (ManComm) is composed of the AeHIN Chair, Co-Chair, and Secretariat. All activities, including but not limited to: technical assistance workshops, trainings, learning and sharing activities, collaborative partnerships, agreements, and proposals will be reviewed by the group periodically. Monitoring and re-alignment of activities, risk management, membership shall be done across the region to support current eHealth, HIS, and ICT for CRVS implementations.

- AeHIN Advisory Committee is composed of the AeHIN co-chairs, country representatives, development partners, and technical advisers. They will oversee the progress of the implementation and monitor alignment of activities with the strategic thrusts. The Advisory Committee also, shall act as consulting body for providing technical and financial assistance needed by the network.

- AeHIN Scientific Committee is composed of experts who have demonstrated leadership in various field of eHealth, HIS, and IT for CRVS in the region. They assist the network organize its body of knowledge and identify areas of opportunity for growth. Their inputs are consolidated by the ManComm and referred to the Advisory Committee and subsequently to the General Assembly.

- AeHIN General Assembly consists of all members of the network who have formally expressed support to its mandate and strategic plan. The members of the assembly are expected to understand the philosophy behind the strategy and contribute their expertise to further enhance the network.

To ensure progress on this implementation plan, the Management Committee shall conduct online meetings and conference calls regularly and shall use free and available platforms for managing knowledge bases and resources within the network. They will also be forefront in organizing and planning for the annual AeHIN General Meeting. The Management Committee will also regularly seek input and incorporate feedback from the Advisory Committee and Scientific Committee on special topics and issues.

2.2 Terms of Reference

Specific duties and responsibilities of the AeHIN Chair, Co-Chair, Secretariat, and Executive Committee is indicated in the AeHIN Terms of Reference which can be found at www.aehin.org.

2.3 Levels of Communication

Though the AeHIN Secretariat currently serves as the hub for general queries on the network, AeHIN supports holistic communication approach where every member, be it an individual, institution, or a development partner, could communicate as peers to others.

3. Background

3.1 The Asia eHealth Information Network (AeHIN)

AeHIN is a network of professionals from government, non-profit- and for-profit- private sector, and non-government organizations in South and Southeast Asia interested in promoting better use of ICTs to achieve better health. In 7-10 August 2012, ninety eHealth, HIS, and CRVS professionals across the region met and finalized a 5-year strategic plan for AeHIN geared towards the following thrusts:

- Enhance leadership, sustainable governance, and monitoring and evaluation.

- 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, knowledge exchange and sharing through effective networking.

- Promote standards and interoperability within and across countries.

4. Summary of AeHIN Strategic Plan 2012- 2017

4.1 Vision and Guiding Principles

AeHIN's vision is to a network of professionals who support national eHealth development towards regional interoperability. Through this support, better ICT solutions are developed that lead to better decision making and improved health outcomes.

4.2 Goal

AeHIN's goal is to create a network of professionals who can contribute to national and regional eHealth development particularly in the area of standardization and interoperability.

4.3 Potential Risks of Not Implementing

Ref	Strategic Action Points, Objectives and Outputs	Risks to the Region of Not Implementing
SAP 1: Enhance Leadership, Governance, Monitoring and Evaluation *To support country ownership and leadership, sustain multi-sectoral governance mechanisms, and enhance monitoring and evaluation of eHealth and HIS improvements*		
1.1	Official interagency coordinating mechanism that manages and oversees activities established in each member country	National databases will remain silos and will lead to poorer options for decision makings on health and vital statistics.
1.2	Enhance leadership skills, organisational development, change and risk management of eHealth, HIS, and CRVS	Development efforts will remain small and scattered producing no positive change in the current problem being solved.
1.3	Expand linkages between public and private sectors	Existing efforts on instituting HIS policies and implementation will possibly not be realized. Informal and formal sectors may encounter conflicts of interest as they attend to their responsibilities.
1.4	Policies for improving eHealth, HIS, and CRVS systems and solutions established	Health workforce will have little or no interest in cooperating with recommended practices for implementing HIS and monitoring CRVS.

Ref	Strategic Action Points, Objectives and Outputs	Risks to the Region of Not Implementing
1.5	Monitoring and evaluation systems plan developed to ensure eHealth, HIS, and CRVS systems deliver according to health priorities	Countries may miss their targets, waste more resources, and worsen the health situation of their population. Targets and priorities may took time to be achieved.
SAP 2: Capacity Building To build capacity for eHealth, health information systems (HIS), and civil registration and vital statistics (CRVS) in the countries and in the region.		
2.1	Advocacy activities institutionalizing eHealth, HIS, and CRVS career paths are implemented and supported at the national level	No adequate manpower will support human resources needs and requirements for managing health information in public and private institutions.
2.2	Non-health stakeholders are partners and collaborators in multi-stakeholder HIS and CRVS initiatives	Responsibility of improving health information systems will not be shared, thus, implementing policies on improving HIS and HIS investments will not be realized.
SAP 3: Peer Assistance To increase peer assistance, knowledge exchange and sharing through effective networking		
3.1	Convene regular multi-country conferences and workshops consisting of policy makers and implementers	Countries will not have access to relevant technical assistance and resources available within the region which will hinder them from maximizing plans and implementation of their HIS.
3.2	An Open eLearning platform and repository for AeHIN developed and used	Possibility of pervasive wastage of HIS resources / investments from employing action plans.
SAP 4: Promoting Standards and Interoperability To promote use of standards and encourage interoperability within and across countries		
4.1	eHealth, HIS, CRVS best practices for systems and solutions planning, design, development, implementation, operations, and maintenance carried out	Existing practices on implementing systems will perpetuate and may result to branching problems that will worsen health status of countries.
4.2	Technical document on health data standards developed, disseminated, and implemented	Data mined from the ground by various national agencies will not help for accurate and timely decision making on monitoring each country's health program in the region.

5. Regional eHealth, HIS, and CRVS Implementation Plan

5.1 Strategy Action Plans

Enhancing Leadership and Governance
Objective1: To harness support by enhance leadership, sustainable governance, and monitoring and evaluation

Output 1.1 Official interagency coordinating mechanism that manages and oversees activities established in each member country

Output 1.2 Enhance leadership skills, organisational development, change and risk management of eHealth, HIS, and CRVS

Output 1.3 Expand linkages between public and private sectors

Output 1.4 Policies for improving eHealth, HIS, and CRVS systems and solutions established

Output 1.5 Monitoring and evaluation systems plan developed to ensure eHealth, HIS, and CRVS systems deliver according to health priorities

Capacity Building
Objective 2: To build capacity for eHealth, Health Information Systems (HIS), and ICT-enhanced Civil Registration and Vital Statistics (CRVS) in the countries and in the region

Output 2.1 Advocacy activities institutionalizing eHealth, HIS, and CRVS career paths are implemented and supported at the national level

Output 2.2 Non-health stakeholders are partners and collaborators in multi-stakeholder HIS and CRVS initiatives

Peer Assistance
Objective 3: To increase peer assistance and knowledge exchange and sharing through effective networking.

Output 3.1 Convene regular multi-country conferences and workshops consisting of policy makers and implementers

Output 3.2 An Open eLearning platform and repository for AeHIN developed and used

Promoting Standards and Interoperability
Objective 4: To promote use of standards and encourage interoperability within and across countries

Output 4.1 eHealth, HIS, CRVS best practices for systems and solutions planning, design, development, implementation, operations, and maintenance carried out

Output 4.2 Technical document on health data standards developed, disseminated, and implemented

6. Implementation Schedule

Ref	Description	Timing						Lead Technical Agency	Supporting Partners	Estimated Cost (USD)
		Phase 1		Phase 2		Phase 3				
		2012	2013	2014	2015	2016	2017			
Strategic Action Plan 1: Leadership, Governance and Monitoring & Evaluation *Objective: To enhance country ownership and leadership, sustain multi-sectoral governance mechanisms, and increase monitoring and evaluation of eHealth and HIS improvements.*										
Output 1.1 National eHealth and/or HIS interagency coordinating mechanisms functioning in each country for managing and overseeing activities.										
1.1.1	Establish or support maintenance of fully functioning multi-sectoral eHealth/HIS/CRVS coordinating mechanisms in 20 countries	5	5	5	5			WHO, ITU		
1.1.2	Establish informal national eHealth networks in 10 countries		2	3	5			WHO, ITU		
1.1.3	Develop a strategy for a cooperating structure within countries to ensure life of the network (AeHIN organizational structure)							WHO, ITU		
1.1.4	Document best practice for organizational development structure for similar networks within countries							WHO, ITU		
Output 1.2 Develop and implement national eHealth, HIS, CRVS strategies and plans.										
1.2.1	Conduct regional eHealth/HIS/CRVS training workshops and forums: • 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"							WHO, ITU, ESCAP	UNICEF, UQ, HMN, ADB	
1.2.2	National multi–year eHealth or HIS strategies developed and being implemented in 20 countries	5	5	5	5			WHO, ITU		
Output 1.3 Enhance leadership skills, organisational development, change and risk management of eHealth, HIS, and CRVS.										
1.3.1	Implement tools to quantify costs of investments and conduct research on monetary and non–monetary returns on investments (AeHIN Tools and AeHIN Cost–benefit Research)								IDRC, GF	
1.3.2	Provide adaptive technical assistance (ATA) for multi–stakeholder engagement and funding for sustaining and scaling activities							WHO, ESCAP	Norad, AusAID, ADB	
1.3.3	Implement change and risk management plans for activities (Change management and risk management)							WHO		

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Ref	Description	Phase 1 2012	Phase 1 2013	Phase 2 2014	Phase 2 2015	Phase 3 2016	Phase 3 2017	Lead Technical Agency	Supporting Partners	Estimated Cost (USD)
Output 1.4	**Expand linkages between public and private sectors.**									
1.4.1	Conduct stakeholder analysis that will track actors in the public and private sectors and will identify their motivations, interests, and impact across local and national activities on eHealth, HIS, and CRVS (AeHIN Network Map at aehin.hingx.org)			X				IOSN, aIWG, LIRNEasia, DFI	national eHealth associations	
1.4.2	Develop and implement a system of engaging public–private partnerships that will encourage positive social and economic impact in ICT for health projects (eHealth news and updates)			X	X	X				
1.4.3	Foster partnerships and collaborations to maximize implementation of national eHealth, HIS, and CRVS plans			X	X	X	X	WHO		
Output 1.5	**Establish policies for improving eHealth, HIS, and CRVS systems and ICT–enhanced solutions.**									
1.5.1	Perform policy network mapping that will focus the network's efforts on relevant actors, degrees of access, and lines of authority within and across countries	X	X					WHO	HMN	
1.5.2	Communicate existing and needed policies to support implementation and initiatives		X	X	X	X		WHO, ITU, ESCAP		
1.5.3	Collate and share in–country insights for developing / sustaining locally relevant policies (knowledge sharing: eHealth policies)			X	X	X			WHO	
Output 1.6	**Monitoring and evaluation systems plan developed to ensure eHealth and HIS solutions deliver according to health priorities.**									
1.6.1	Engage participation of members for a set of criteria and performance indicators for monitoring and evaluating AeHIN progress (AeHIN Evaluation Working Group)		X	X	X					
1.6.2	Monitor country eHealth and HIS progress, activities and investments			X	X	X		WHO, ITU		
1.6.3	Implement country assessments and progress reviews to feedback country improvements			X	X	X	X	WHO, ITU, ESCAP		
1.6.4	Highlight positive efforts and impact of small–scale initiatives to encourage best practices through online and face to face efforts (AeHIN Hours, General Meetings, and Technical Workshops)		X	X	X	X			WHO	
Output 1.7	**Collaborate with development partners and mobilize resources for AeHIN which impact country–level health improvements.**									
1.7.1	Develop and maintain open collaborative community of development partners, formalize memorandums of understanding (MOUs), and align common objectives and expected outcomes	X	X	X	X	X	X		WHO	
1.7.2	Implement eHealth, HIS, and ICT for CRVS components of strategic global and regional health initiatives, including the Commissions on Information and Accountability (CoIA) and Life–Saving Commodities (CoLSC) for Women's and Children's Health	X	X	X	X	X	X	WHO, ITU, ESCAP, UNICEF	aIWG, mHA	

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Ref	Description	Phase 1 2012	Phase 1 2013	Phase 2 2014	Phase 2 2015	Phase 3 2016	Phase 3 2017	Lead Technical Agency	Supporting Partners	Estimated Cost (USD)
Strategic Action Plan 2: Capacity Building	Objective: To build capacity for eHealth, Health Information Systems (HIS), and Civil Registration and Vital Statistics (CRVS) in the countries and in the region									
Output 2.1	Advocacy activities institutionalizing eHealth, HIS, and CRVS career paths are implemented and supported at the national level									
2.1.1	Support inter–university collaboration on curriculum development on e–health/HIS/health informatics for formal and non–formal educational programs (AeHIN Academy, National eHealth Forum, National Health Informatics Meetings [eg, FIKI–Indonesia, TMI–Thailand])	X		X	X	X			APAMI, IMIA, AUN	
2.1.2	Engage multiple stakeholders to develop national competencies on eHealth/HIS/health informatics in low and middle income countries (e.g., connecting with IMIA Health Informatics Education Technical Working Group and UQ on 40–hour HIS short course, identifying sub national level capacity building institutions and programs)		X	X	X				IMIA, UQ	
2.1.3	Encourage development of national associations and conduct of conferences and national workshops on health informatics (informatics society development)		X	X					APAMI, WHO	
2.1.4	Promote joint research/publication and international exchanges / fellowships on eHealth, HIS, health informatics, and ICT for CRVS (study tours)			X	X	X			APAMI, AUN	
Output 2.2	Non–health stakeholders are partners and collaborators in multi–stakeholder HIS and CRVS initiatives									
2.2.1	Engage non–health stakeholders' participation on the development of policy papers and technical plans			X	X			WHO, ITU		
2.2.2	Conduct and document public fora and discussions on ethico–legal, privacy and confidentiality, and other issues that concern the practice of eHealth and HIS (in three countries)			X	X				Privacy International	
2.2.3	Provide training and technical support on eHealth, HIS, and CRVS to non–health stakeholders	X	X					ITU, ESCAP	WHO	
2.2.4	Devise incentives to sustain stakeholder participation in in–country and regional activities of the network (Use of AeHIN webmeetings for eHealth related regional and in–country discussion)		X	X	X					
Strategic Action Plan 3: Peer Assistance	Objective: To increase peer assistance and knowledge exchange and sharing through effective networking									
Output 3.1	Convene regular multi–country conferences and workshops consisting of policy makers and implementers									
3.1.1	Convene AeHIN General Meeting annually to facilitate knowledge exchange, networking, and to address common challenges	X	X	X	X	X			WHO	
3.1.2	Conduct bi–weekly online conferences / Webinars to support sharing of technical resources and expertise, learning from best practices and experiences (AeHIN Hour)	X	X	X	X	X				

Ref	Description	Timing Phase 1 2012	Phase 1 2013	Phase 2 2014	Phase 2 2015	Phase 3 2016	Phase 3 2017	Lead Technical Agency	Supporting Partners	Estimated Cost (USD)
3.1.3	Maximize available techniques, tools, principles to resolve technical issues by bridging the gap of information / resource–poor setting to information / resource–rich setting (Cisco Webex Tool, webmeetings, HingX)			✓	✓	✓	✓		HingX, OpenHIE, INSTEDD	
3.1.4	Support integration of fragmented HIS–CRVS systems to increase information utilization (e.g., expert faculty exchange, support development of eCRVS module in DHIS2)			✓	✓	✓	✓	WHO		
3.1.5	Utilize informal and formal communication through appropriate media / platform that will increase interest and participation in key initiatives in the region (Website: www.aehin.org, AeHIN mailing list, posters, brochures)	✓	✓	✓	✓	✓	✓			
Output 3.2 An Open eLearning platform and repository for AeHIN developed and used										
3.2.1	Map technical documents and artefacts available in the region and make it accessible in the AeHIN technical resource repository powered by the Health Ingenuity Exchange (HingX) (http://aehin.hingx.org)	✓	✓	✓	✓	✓	✓		HingX , WHO	
3.2.2	Utilize the AeHIN website as an Open eHealth Academy were members can regularly share insights, research publications, presentations, news, profiles, and events, for discussion.		✓	✓	✓	✓	✓		APAMI	
3.2.3	Recognize Centres of Excellence in eHealth, HIS, and CRVS in every member country				✓	✓				
Strategic Action Plan 4: Standards and Interoperability *Objective: To promote standards and interoperability within and across countries*										
Output 4.1 eHealth, HIS, CRVS best practices for systems and solutions planning, design, development, implementation, operations, and maintenance carried out using enterprise architecture (EA)										
4.1.1	Identify and monitor implementation of global eHealth standards and health information exchanges (HIEs) for increasing interoperability for health information		✓	✓	✓	✓	✓	WHO, ITU	OpenHIE	
4.1.2	Apply enterprise architectural approaches, such as training and use of The Open Group Enterprise Architecture Framework (TOGAF) and/ or the Collaborative Requirements Development Methodology (CRDM)	✓						WHO	TOGAF, PATH, OpenHIE	
4.1.3	Capture user stories/user needs, gather requirements, and design and document eHealth interoperability profiles and specifications (AeHIN General Meeting)	✓	✓	✓	✓			WHO, OpenHIE		
4.1.4	Communicate the benefits of country and regional interoperability of eHealth systems and solutions by adopting a service–oriented communications strategy (Connectathon)			✓	✓	✓	✓		OpenHIE, WHO	

Ref	Description	Timing Phase 1 2012	Phase 1 2013	Phase 2 2014	Phase 2 2015	Phase 3 2016	Phase 3 2017	Lead Technical Agency	Supporting Partners	Estimated Cost (USD)
4.1.5	Implement programme management techniques for planning, costing, technical documentation, changes, risks, testing, quality assurance, operations, and maintenance (support for National eHealth Strategy that used WHO ITU Toolkit)	✓	✓	✓	✓	✓	✓	WHO, ITU		
Output 4.2 Technical document on health data standards developed, disseminated, and implemented										
4.2.1	Conduct country–wide health data standards and interoperability workshops (National HIS Conferences)	✓	✓	✓	✓			WHO, ITU		
4.2.2	Negotiate service agreements, provide access and training, and collaborate with SDOs to implement eHealth standards and stacks of standards to support national eHealth strategies and plans		✓	✓	✓			WHO	HL7, IHTSDO, IHE, ISO, OpenEHR	
4.2.3	Produce national enterprise architecture and health data standards documents (knowledge sharing through www.aehin.hingx.org)		✓	✓	✓			WHO	HingX	