CHAPTER 3

An International Perspective

Many international organisations have dealt with the different aspects of e-health. You may find it helpful to refer to these before you use your workbook. Three international e-health perspectives have come from the World Health Organization (WHO), the Bellagio Conference and the European Union (EU).

WHO Building Foundations for E-Health identifies many initiatives to support countries' e-health policies and strategies. Examples are:

*   *Connecting for Health: Global Vision, Local Insight* (WHO, 2005)
*   *Electronic Health Records: Manual for Developing Countries* (WHO, 2006a)
*   *Everybody's Business: Strengthening Health Systems to Improve Health Outcomes* (WHO, 2007)
*   *eHealth Tools and Services: Needs of the Member States* (WHO, 2006b)

Taken together, these show the vast range and complexity of e-health, and indicate the need to compile policies and strategies in way that is practical, flexible and relevant to your country's needs. A core theme is building capacity for e-health.

Bellagio E-Health Call to Action came from the Rockefeller Foundation conference on e-health (RF, 2008). It has a vision and goal for better health for everyone by using interoperable e-health. Three core themes are that:

*   Human capacity building is essential in using e-health systems and technical support
*   Emerging infrastructure and e-health present a window of opportunity to foster interoperability across geographies, technologies and programmes
*   Systems should be person-centred and emphasise strengthening people's health and health systems.

The EU e-Health Action Plan is taking longer than expected to achieve its objectives. This provides a valuable lesson. It reveals the challenges, complexities and timescales of e-health, and it is essential that you reflect these realities in your countries' e-health policies and strategies. There have been several EC initiatives to realise its action plan, such as identifying and promulgating the net benefits of e-health (EC, 2007 and EC, 2009a) and seeking financing opportunities to boost e-health investment (EC, 2009b). An important finding from the financing e-health study is that the biggest barrier to investment is lack of capacity: people do not have the skills and knowledge required, especially in order to take effective decisions for e-health. This is broadly consistent with the position identified by the East and West Africa High-Level E-Health Dialogues. Improving this position must be a core part of your country's e-health policies and strategies.

Table 1. Simple comparison of three international contributions to e-health development

E-health policy and strategy topic	Building Foundations for eHealth (WHO, 2006c)	Bellagio E-Health Call to Action 2008 (RF, 2008)	EU e-Health Action Plan 2004 (CEC, 2004)	Relevance to my country's e-health policies and strategies	Notes
Y = Yes, included; N = No, not included; P = included partially; I = implicit					
ICT	Y	Y	Y		
Organisational change	N	N	Y		
Integration with health strategy	N	N	N		
Leadership	P	Y	Y		
Benefits focus	Y I	Y I	Y I		
Benefits realisation	N	N	N		
Engagement	N	N	N		
Investment plan	N	N	Y		
Affordability	Y	N	N		
Interoperability	Y	Y	Y		
Functionality	N	N	N		
Usability	N	N	Y		
Architecture	N	Y	N		
Infrastructure	Y	Y	Y		
Procurement	Y	N	N		
Implementation	P	N	Y		
Programme management	N	N	N		
Project management	Y	N	N		
Training and capacity	Y	Y	N		
E-health investment risk	N	N	N		
Informatics	Y	P	N		
Identifiers	N	N	Y		
Standards	P	P	P		
Confidentiality	Y	N	Y		
Security	Y	N	Y		
Legal	Y	N	Y		
Realistic timescales	N	N	N		

Table 1 shows a simple comparison of the three perspectives. It has a column for you to make notes about the relevance for your work.

Core themes

The three e-health perspectives in Table 1 have different strategic emphases, but they offer a shared big picture for countries' e-health policies and strategies. Chart 1 shows some of the main themes and their links as part of an integrated e-health strategy loop.

Chart 1. Main themes for e-health policies and strategies and their links
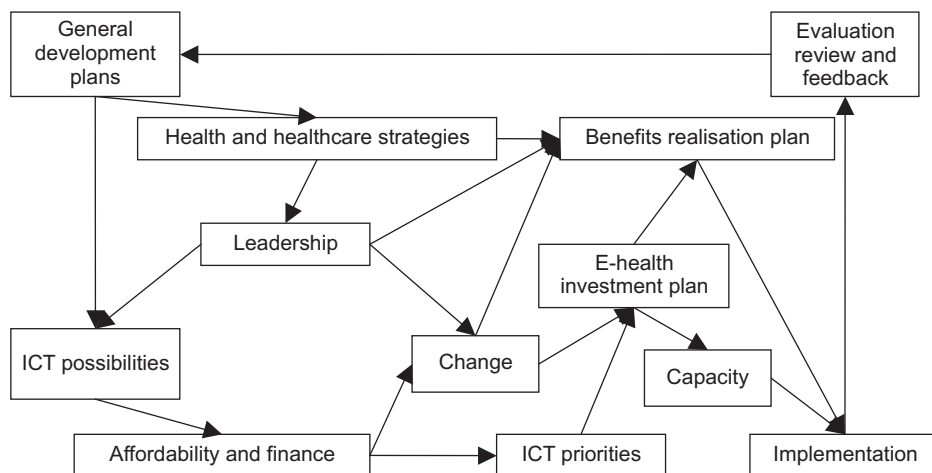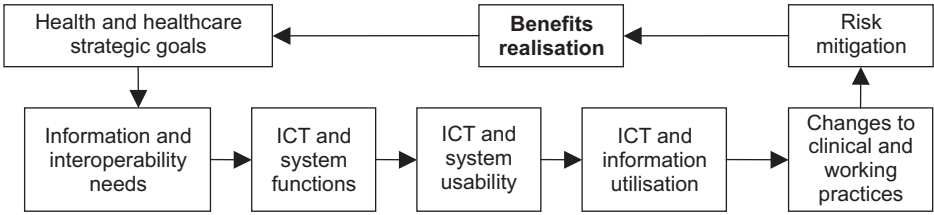

Table 2. Questions and answers on the main policy themes

Questions for you	Answers
Which topics in Chart 1 do you already have in place?	
Which topics do you need to do more about?	
Which topics are the most important for your work?	

You need your colleagues to work with you to identify and link the dependencies in the loop that enable each e-health project to contribute to achieving the goals of your country's health strategy. Chart 2 shows a simplified, generic connection of interdependencies for each e-health project selected as part of the e-health investment plan.

Chart 2. Illustrative simplified connection between factors for successful e-health

The remainder of the workbook deals with each of the topics in Charts 1 and 2. The templates help to identify, quantify and link affordable e-health themes to reflect each country's e-health strategy.

Table 3. Questions and answers on successful e-health

Questions for you	Answers
Which topics in Chart 2 do you already have in place?	
Which topics do you need to do more about?	
Which topics are the most important for your work?	

Benchmarking

In addition to information from the international sources in Table 1, you may want to benchmark your position against equivalent countries and organisations. It could be between ministries, hospitals and districts. Examples of benchmark topics are:

- E-health policies and strategies, including interoperability standards, confidentiality and security
- E-health investment plans
- Types of e-health projects, including performance and costs
- Engagement with patients and patient groups
- Engagement with healthcare professionals
- Partnerships with ICT vendors, donors and civil society
- Procurement arrangements
- Project management
- Capacity initiatives

- Changes to clinical and working practices in place
- Costs over the whole lifecycle
- Benefits realised for all stakeholders, including citizens and patients, healthcare professionals, healthcare provider organisations and third parties
- Risks encountered, avoided and mitigated.

Successful e-health benchmarking needs information and analysis of current investment and service provision and performance completed before benchmark data is used. It is essential to identify the reasons for the good performance of your service and the services that you are using as a benchmark. Benchmarking can be time consuming to complete, and relies on effective partnerships and collaboration between all parties involved. These are challenging to set up, so you if you want to benchmark you may want to wait until you have a draft e-health strategy that you can use as one of the information sources.