

**Measuring and Achieving Universal Health Coverage (UHC) with Information and
Communications Technology (ICT)**
Asian Development Bank Auditorium, Manila, Philippines
02 - 03 December 2014

Session Brief for Plenary Panel
“ICT for Development for UHC”
December 2, 1400-1500

Background

Health care challenges are common in many countries and persist even as they move from low to high-income status. Expectation of better health care and healthier living conditions keep rising, while resources will always be limited. This requires new approaches, which allow achieving better health with less and in managing the health sector in innovative ways, more effectively with better quality and at lower cost. Quality, efficiency and cost-effectiveness are the key words. They are also the principles for achieving Universal Health Coverage (UHC).

UHC has been defined by the World Health Organization (WHO) as a way to ensure that all people obtain the health services they need without suffering financial hardship when paying for them.

Achieving UHC requires tackling the healthcare challenges specific to each country's development level and health profile. To know the level of development and the health profile, ICT tools to measure, assess, and monitor are needed. To respond to these assessments, ICT tools are required to deliver and manage health service delivery, and continuously adapted to changing needs. ICT is recognized in development as an enabling tool to achieve cheaper, faster and better services. ICT is also used in other sectors, to link and integrate evidence from planning and budgeting, ultimately to support decision-making.

This session brings together thought leaders to share their experience and discuss their perspectives on how ICT can drive development in a more efficient way and bring quality service delivery for achieving Universal Health Coverage.

Session Objectives

1. Discuss **why ICT investments** are needed- *the rationale to invest in ICT for development in general and for UHC specifically and key arguments to increase ICT investments to achieve UHC.*
2. Discuss **what kind of ICT investments** should be considered- *country examples (health sector specific and broader public sector management) which illustrate how ICT is used to improve planning, budgeting, decision making and service delivery.*
3. Discuss **how ICT investments** should be coordinated- *coordination needs with other line ministries, agencies and at national and provincial level, identification of champions, development of two pronged strategies for ICT investment to benefit more than one sector.*

Session Format: Talk Show

This session will be conducted in a “talk show” style panel discussion. In this modified panel discussion format, discussants will take part in conversation driven by the questions of a moderator. The atmosphere will be more relaxed and intimate than a typical panel discussion, with panelists seated in armchairs (or chairs) and no formal, prepared presentations.

The panel will begin with a short introduction to the session by the emcee who will also introduce the moderator. This is then followed by the Talk Show in a question and answer style driven by the

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expert moderator who will ask introductory and provocative questions to bring out the interesting perspectives, information, and knowledge.

At the end of the discussion, members of the audience will have an opportunity to ask their own questions to the panelists (only if time permits or the conversation flow becomes slow)

Session Format: Participants (tbc)

- **Vivian Lin, Director, Health Systems, WHO WPRO**
- **Haitham El-Noush, Senior Health Advisor, Norad**
- **Rajendra Pratap Gupta, Public Policy Expert, India**
- **Fazilah Binti Shaik Allaudin, Deputy Director, Telehealth Division, MoH, Malaysia**
- **Teodoro Herbosa, Undersecretary, Department of Health (DoH), Philippines**
- **Shivnay Naidu, President, Pacific Health Information Network**

Moderator:
Patricia Moser, Lead Health Specialist, ADB

Your Role:

Patricia Moser: Your role as moderator is to lead the discussion by posing introductory and challenging questions to individual panelists to bring out the answers and themes/questions identified below.

To all panelists: During the welcome and introduction, the moderator will introduce you to the audience and ask you to answer briefly 1-2 of the questions under each segment of the discussion below.

1. Discuss **why ICT investments** are needed- *the rationale to invest in ICT for development in general and for UHC specifically and key arguments to increase ICT investments to achieve UHC.*
 - How would a lobbyist get your votes to support ICT investments for improving health outcomes?
 - What kind of evidence do you need to demonstrate the benefit of ICT investments, what specifically would you look for (question for academia)?
 - What was the "aha" experience, the tipping point, or moment when investing in ICT for health made sense to you (question for government representatives)?
 - How would you justify a dollar spent for ICT versus other competing priorities in health (question for academia)?

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2. Discuss **what kind of ICT investments** should be considered- *country examples (health sector specific and broader public sector management) which illustrate how ICT is used to improve planning, budgeting, decision making and quality/efficiency/effectiveness of service delivery.*
 - How do you prioritize ICT investments (infrastructure, information systems, monitoring and surveillance) in the government health budget?
 - What for you is the most important role for ICT to achieve Universal Health Coverage (question for academia)?
 - What to watch out when making ICT investment decisions?
 - For what purposes have you used ICT investments to better achieve UHC priorities? What have you learned from both failures and success?
 - What kind of long-term ICT investments have you made and who championed these investments?
 - What kind of results do we wish to see from ICT investments in health? What does success look like?

3. Discuss **how ICT investments** should be coordinated- *coordination needs with other line ministries, agencies and at national and provincial level, identification of champions, development of two pronged strategies for ICT investment to benefit more than one sector.*
 - How were ICT investments in health linked to ICT investments in other sectors?
 - How do you work effectively with another line ministry to achieve results and to ensure interoperability of ICT systems?
 - What experiences have you had with the private ICT sector to make a difference?
 - What practices do you use for effective planning, development, implementation and scale-up of ICT investments in health?
 - What is your current ICT capacity and what are you looking for to increase efficiency and effectiveness of ICT investments in the future?

Sequence of activities

Introduction to Panel and of the Moderator	Emcee	2 mi
Welcome and Introduction of Talk Show Guests	Moderator and all panelists	8 min
Questions and Answer by the Moderator to the guests	Moderator/Panelists	30 min
Questions from the audience	Moderators/Audience	15 min
Summary, closing and handing over to Facilitator for outlook of next session	Moderator	5 min

Bios (tbc)

Dr Janette Garin, Acting Secretary, Department of Health, Philippines

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Dr. Vivian Lin, Director, Health Systems, WHO WPRO

Vivian Lin is the Chair of Public Health and was Head of the School of Public Health from 2000-2005. Since arriving in Australia in 1982, she has worked in NSW Health, Victorian Health Department and its successor, National Occupational Health and Safety Commission and Commonwealth Department of Health and Family Services. During this time, she has had responsibility for policy, planning, and program development across a wide range of health issues, including health promotion, ethnic health, Aboriginal health, aged care, health technology, pharmaceuticals, intergovernmental relations, regional planning, and health export. From 1997-2000, she was Executive Officer for the National Public Health Partnership.

Haitham El-Noush, Senior Health Advisor, Norad

Haitham El-Noush manages the innovation portfolio within global health for the Norwegian Agency for Development Corporation (Norad). He is the project manager for the UNSG Innovation Working Group (IWG). He has a master's in international development and has worked for the government, INGOs and for the UN in nine different countries.

Rajendra Pratap Gupta

Rajendra Pratap Gupta is one of the most influential and sought after public policy expert in the country. He is known globally for his innovative approach and strategic thinking. He has been invited by global organisations like the United Nations, World Health Organization, World Economic Forum, ITU, Embassy of the United States of America, Govt. of Japan & Finland, and also by the MOHFW & The Planning Commission - Government of India for his views on diverse range of topics, and he authored the Election Manifesto for BJP in 2009 and in 2014 under the Chairmanship of Dr. Murlis Manohar Joshi. Policies of the Modi led NDA Government are entirely based on the Election Manifesto authored by him. He is credited with proposing the creation of National eHealth Authority and for proposing the name National Health Assurance Mission for the new health mission and the pre-emptive healthcare model besides initiating other major reforms in the country, as the person who drafted the policies of the BJP led Government.

Fazilah Binti Shaik Allaudin, Deputy Director, Telehealth Division, MoH, Malaysia

Dr Fazilah is presently the Deputy Director of Telehealth Division, Ministry of Health Malaysia since September 2011. She has been in the service with MOH for over 15 years. A significant portion of her career has been involved in the planning and implementation of enterprise wide Hospital Information System (THIS) in MOH hospitals. She has been extensively involved in business process reengineering activities and Health Informatics Standards. In September 2009, she was appointed the Deputy Director of Selayang Hospital, a pioneer 960-bed hospital in Malaysia utilising THIS. In this role, she managed all clinical, management and operational aspects of the hospital. In October 2010, she was appointed as Chair of ICT Technical Working Group of the national health system transformation agenda. In this capacity, she is responsible for the development of the ICT blueprint for health system reform in Malaysia. She represents the MOH at the NKEA project of the National Economic Transformation Programme since

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January 2011. Her knowledge and experience as a medical doctor, health care administrator and her deep association with healthcare ICT, enables her to provide valuable insights into aligning technology provisions with the practice of medicine. Dr Fazilah holds an MD (Doctor of Medicine) from UKM and a MBA from the University of Toledo, Ohio, USA.

Teodoro Herbosa, Undersecretary, Department of Health (DoH), Philippines

Dr. Teodoro Herbosa is a Trauma Surgeon who specializes in Disaster Medicine, Emergency Medical Care, and Emergency Toxicology. He graduated from the University of the Philippines College of Medicine in 1983. He underwent an International Postgraduate Course in Surgery at Tel Aviv University in Israel in 1991, and trained in Trauma Surgery at the Cook County Hospital of Illinois in 1994. He also received training in Emergency and Crisis Management at the University of Geneva in Switzerland in 1996. He is a fellow of the American College of Surgeons, the Philippine College of Surgeons, and the Philippine Society of General Surgeons. He has been a board member of the World Association for Disaster and Emergency and the Malaysian Conjoint Board of Emergency Medicine in 2008. He is currently a consultant at the Philippine General Hospital and a professor at the University of the Philippines College of Medicine. He has also engaged in research, collaborating with various prestigious institutions such as the Philippine General Hospital, the Philippine College of Surgeons, and the World Health Organization.

Shivnay Naidu, President, Pacific Health Information Network

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