



REPUBLIC OF UGANDA  
MINISTRY OF HEALTH

# Health Information and Digital Health Strategic Plan 2020/21-2024/25

Date: 01/12/2023



# Strategic Framework

**Vision:** A health sector in Uganda driven by evidence and leveraging digital health to improve efficiency in service delivery.



**Mission:** To promote the use of data for decision making, and policy formulation and leveraging digital health technologies to optimize health service delivery.



## Goal

To strengthen the health information system and leveraging digital health to optimize health service delivery to achieve UHC by 2030.



## Guiding Principles

The health information and digital health strategy will be grounded in the core principles stated below.

**Client centred**



**Equity**



**Privacy and integrity**



**Efficiency**



**Transparency and accountability**



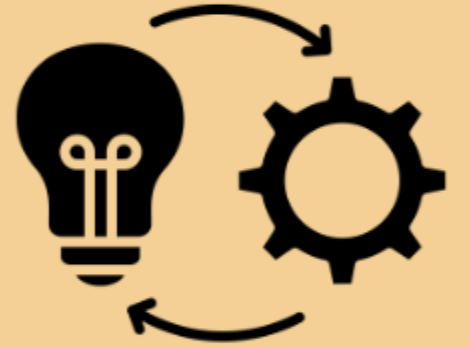
# S01: By 2025, ensure timely availability and access to quality-assured health data.



**S02: By 2022, there is effective statistical, analytical and data visualization support for all functions at the national and sub-national levels.**

**Strategy 2.1 Monitor the Implementation of the Health Sector**

**Strategy 2.2 Strengthen the Analytical Capacity at all Levels.**



## **S03: By 2025, the health sector has institutionalized the use of patient-level digital systems at the point of care.**

**Strategy 3.1** Establish a System for the Provision of Remote Care through the Use of Telemedicine.

**Strategy 3.2** Scale-up the Use of Electronic Medical Record Systems.

**Strategy 3.3** Implement Interoperability of Data Systems



**S04: By 2025, 60% of both public and private health facilities (All Hospitals, HCIVs, High Volume HCIIIs) have the appropriate infrastructure to implement digital health systems.**

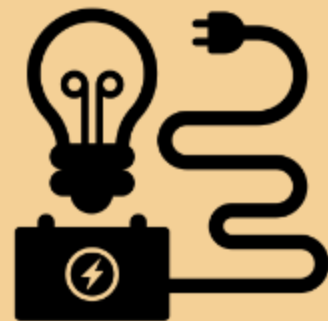
**Strategy 4.1** Develop ICT Infrastructure at Health Facilities for Consumption of Digital Health Tools.



**Strategy 4.2** Scale up Data Connectivity across the Health Sector



**Strategy 4.3** Ensure Availability of Reliable Electrical Power Infrastructure



**S05: By 2025, the health sector in Uganda has a strengthened enabling environment for the implementation of digital health initiatives.**



**Strategy 5.1 HR Capacity at all Levels to Implement the Strategy**

**Strategy 5.2 Improve Governance, Leadership and Stewardship of HIDH Initiatives.**

**Strategy 5.3 Ensure Multi-sectoral Partnership and Collaboration for the Implementation of HIDH Initiatives**

**Strategy 5.4 Mobilize Resources for the HIDH**

**Strategy 5.5 Mainstream cross-cutting issues in the implementation of the Strategy (Guiding Principles)**



**S06: By 2025, the MoH has a functional collaborative mechanism to support health information and digital health implementation research and innovation**

**Strategy 6.1 - Conduct Operational Research and promote overall Research**

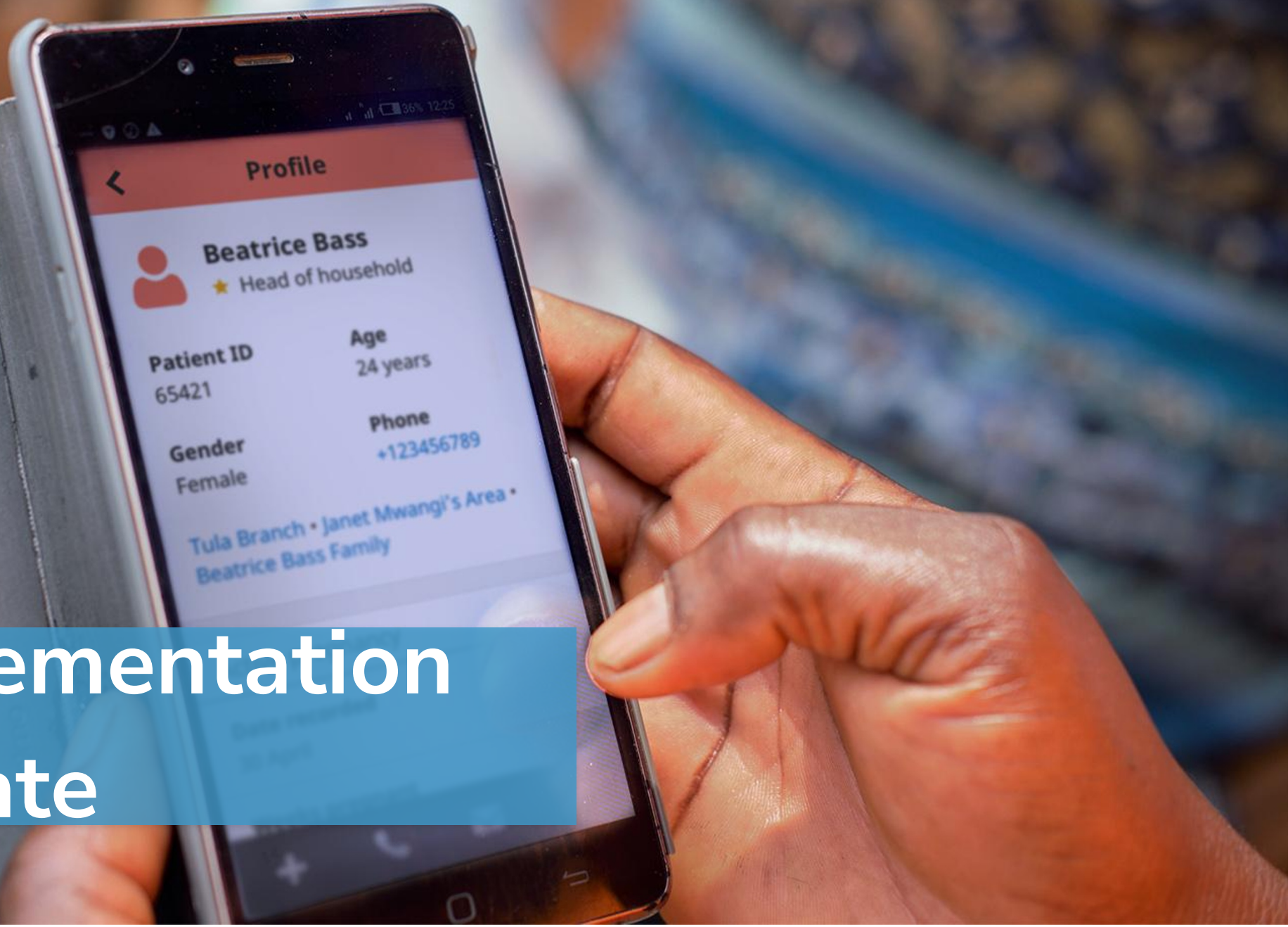
- Identify research questions relevant to the Strategy
- Establish mechanisms to translate findings into implementation



**Strategy 6.2 Promote Innovation in the Health Sector**



# Implementation Update





# eCHIS Implementation Update

# Background

## Country Objective

Implement a digital job-aid for community health workers with reporting as a perceive process.

## Specifically:

- Ensure appropriate governance framework for the implementation of eCHIS
- Aggregate functionality currently in different programs and function specific digital tools into a single government owned digital community health information system.
- Ensure interoperability of the eCHIS with other Ministry of Health systems to facilitate referral, commodity accountability, reporting and surveillance including linkage to the eHMIS.

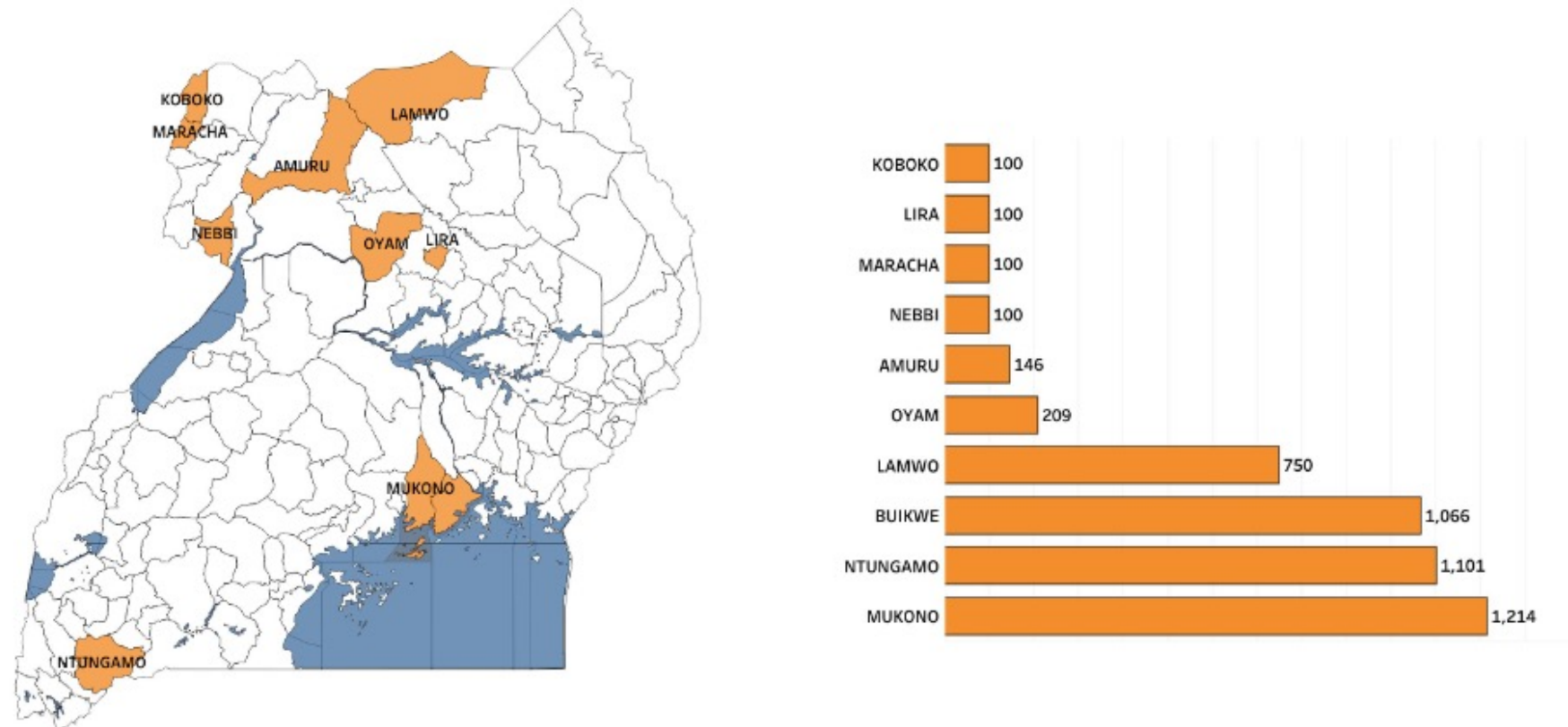


# Country's Solution of Choice for Developing/Strengthening CHIS

- Uganda selected two (2) candidate technologies that will power the electronic Community Health Information System Platform.
- These are based on:
  1. Community Health Tool Kit
  2. Open Smart Register Platform (Open SRP)
- Both systems will be linked to core eHealth registries, the eHMIS and the eIDSR system through the health information exchange being established.
- The data collected through these two applications will be integrated through a single backend core.
- The tools will eventually be linked to the Parish Information System being deployed by Government of Uganda as its core reference of households.

## Status of Implementation

units	Counts
Counts VHTs on eCHIS	4886
Total Counts of VHTs	12510
Total Counts of Villages	6255



# Key Challenges

## Power Supply & Access

Limited access to power supply to charge VHT phones. Some areas face Intermittent power supply resulting in sub-optimal use of the system: **Provided Solar Charging Kits to VHTs in Lamwo & Ntungamo**

## PERSONNEL

Poor comprehension of the eCHIS workflows by some VHTs due to low literacy levels. : **Refresher trainings conducted**

## POOR NETWORK COVERAGE

Limited network coverage affecting the automatic submission of data through the eCHIS from VHT's smartphones.: **Offline mode capability for the eCHIS**

01

02

03

04

05

06

## Supply of Commodities

Stockout of health commodities affecting both the health facilities and VHTs hence lowering the quality of health service delivery. :**Working with the programme team to use data being generated from the eCHIS for proper quantification & tracking**

## ICT Equipment

Breakdown and loss of devices (smartphones and tablets) with no replacement plans.: **Working with the LG to cater for this through VHT SACCO arrangements**

## VHT Supervision

Poor supervision of VHTs due to large numbers assigned to Health Facility/Health Assistants: **Targeted supervision, Peer support (VHT Coordinators)**

# EMR Rollout





# Digitization - Strategic Alignment

**Strategic Objective 3: Institutionalized the use of patient-level digital systems at the point of care By 2025**

**Strategy 3.2 Scale-up the Use of Electronic Medical Record Systems.**

***Priority Interventions***

- Roll out the EMRS to 60% of both public and private health facilities (All Hospitals, HCIVs, High Volume HCIIIs)
- Scale up the community health information system to 30% of community health workers (VHTs in 25 districts)
- Scale up of scan technology in places where purely digital systems are challenging to implement.

**Strategy 3.3 Implement Interoperability of Data Systems**

***Priority Interventions***

- Establish enterprise architecture (standards) for the health sector in Uganda
- Develop a health information exchange for Uganda

# Digitization - Strategic Alignment

**Strategic Objective 4: By 2025, 60% of both public and private health facilities (All Hospitals, HCIVs, High Volume HCIIIs) have the appropriate infrastructure to implement digital health systems.**

**Strategy 4.1 Develop ICT Infrastructure at Health Facilities for the Consumption of Digital Health Tools.**

## ***Priority Interventions***

- Plan and design a standardized Local Area Network (LAN) for public health facilities by level
- Provide and configure computing devices (laptops, tablets, phones, scanners) to enable digital systems
- Strengthen hosting infrastructure for digital systems in line with national laws
- Training for the management of ICT infrastructure.
- Maintain ICT infrastructure.
- Operationalize the HIS support teams and capacity-building framework.

**Strategy 4.2 Scale up Data Connectivity across the Health Sector**

- Connect health facilities/institutions to the National Backbone Infrastructure for integrated data connectivity.
- Establish alternative data connectivity for health facilities that are not reached by the National Backbone Infrastructure.
- Zero rating of access to digital health systems

# Deployment Roadmap for EMR

## **Phase 1**

This phase was implemented up to July 2023  
(10 National/Regional Referral Hospitals and MoH Data Center)

## **Phase 2**

Started in July 2023 (70 Hospitals and Regional Data Centers)

## **Phase 3**

Starts in November 2024 (183 Health Center IV)

**Phase 4:** Starts in July 2025 (Over 2,064 Health Center III)

# Key Challenges

## Power Supply & Access

Limited access to power supply in health facilities

01

## PERSONNEL

- Poor attitude and mindset change
- Limited Skills

03

## POOR NETWORK COVERAGE

Limited linkage of health facilities to NBI

05

Limited Integration between the EMR and other Key Systems

02

## ICT Equipment

- Limited Computing Devices
- No maintenance plan & budget

04

Many of the Frameworks remain under development

06

## Frameworks Under Development/Pending Approval

1. Digital Health Enterprise Architecture, Standards and Knowledge Guidelines
2. Health Information Exchange & Interoperability Guidelines
3. Health Data Protection, Privacy and Confidentiality Guidelines
4. Health Data Access, Sharing and Use Guidelines
5. Guidelines for Implementation of Electronic Community Health Information System
6. Guidelines and Standards for Integrated Health Facility Management Information System
7. Guidelines for the Introduction of Digital Health Solutions and Innovations in Uganda
8. Uganda Telemedicine Guidelines

**THE END**

