Health Information System in Tanzania

Background

Vision:

National integrated health information system (NHIS)

Issues in consideration:

- Fragmented ICT pilots and numerous HIS silos
- Need of an interoperability Layer – Inadequate sharing/exchange of health information across the sector
- Fragmented and uncoordinated business processes
- Inexistence of common investment framework
- Governance and partner coordination
- Need for a Holistic Approach

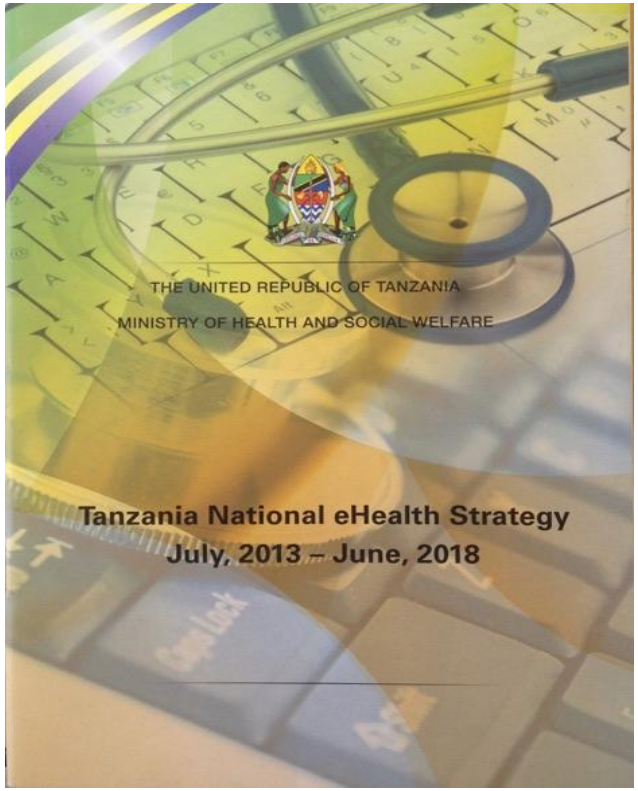
Before the strategy

- Before the launch of the strategy:
  - We had more than 4 major health systems
  - Un organized health systems approach, institutional based rather than sectorial approach
  - Uncoordinated, short living solutions (non feasible), costly, vendor driven, too many pilots (not focused on scaling up to national programs)
  - Standalone systems, thus making data un shareable.

eHealth Strategy Strategic Objectives

eHealth Strategy identified three strategic objectives as eHealth Foundations:

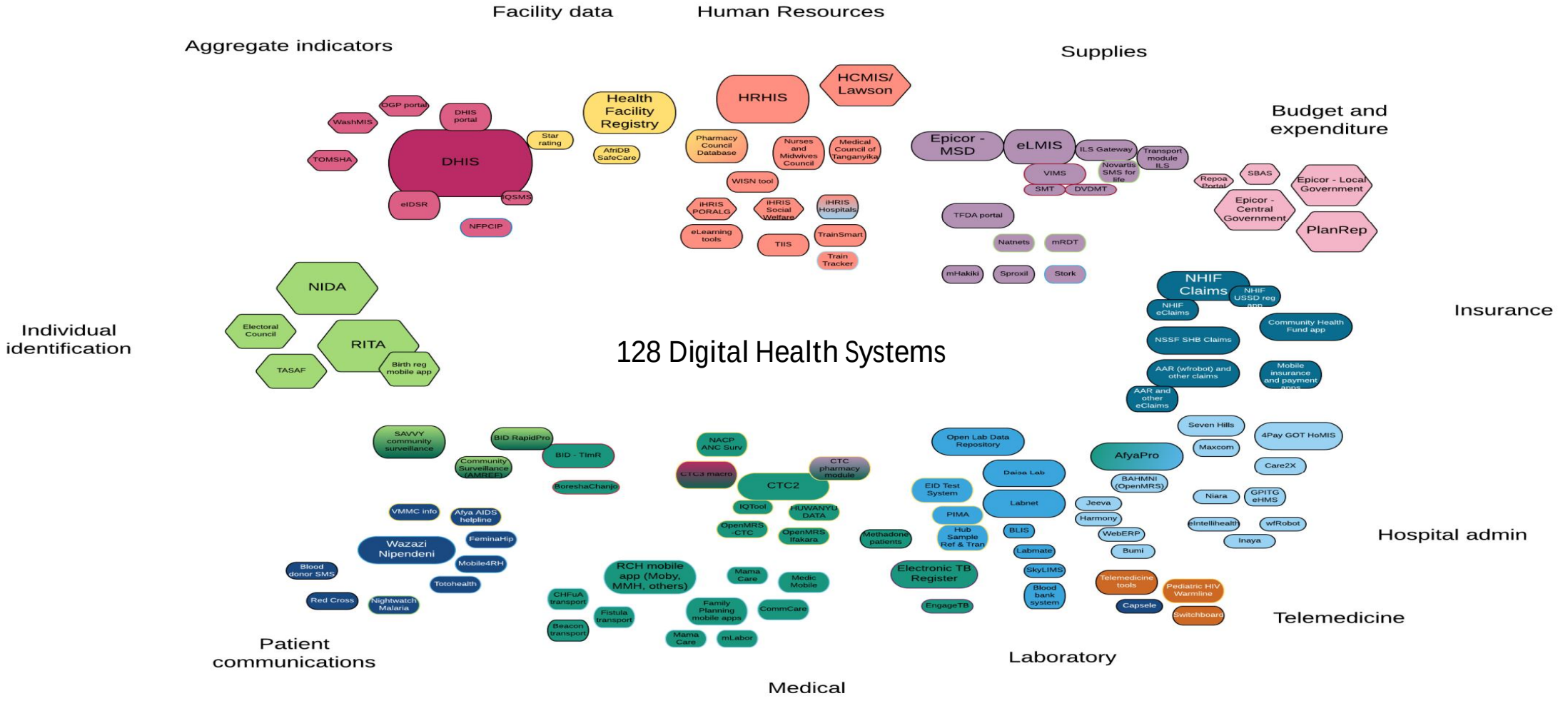
1. Enhance ICT infrastructure and services to improve communication and information sharing across the health systems and at all levels.
2. Establish eHealth standards, rules, and protocols for information exchange and protection.
3. Establish comprehensive health facility, provider, and client registries with complete and current information that meets stakeholders' needs.



After the strategy

- More organized and coordinated solutions, focusing on the sectorial approach, web based, interoperable solutions.
- More feasible, cost effective, problem driven solutions, focusing more on health care delivery improvement.
- More national systems adopted, categorized into mHealth, telemedicine, M&E, Financial management, administration and Clinical solutions.

Available systems - Across Health sector



Source: DUP Assessment findings, 2016

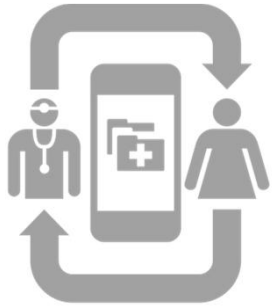
MOHCDGEC and Health Information Exchange (HIE) Commitment

Health Sector Strategic Plan (2015 – 2020)

- The health sector will embrace rapid development of ICT for improving administrative processes, patient/client recording and communication.
- The MOHCDGEC will stimulate development and guide interoperability of systems

The eHealth Strategy (2013 – 2018)

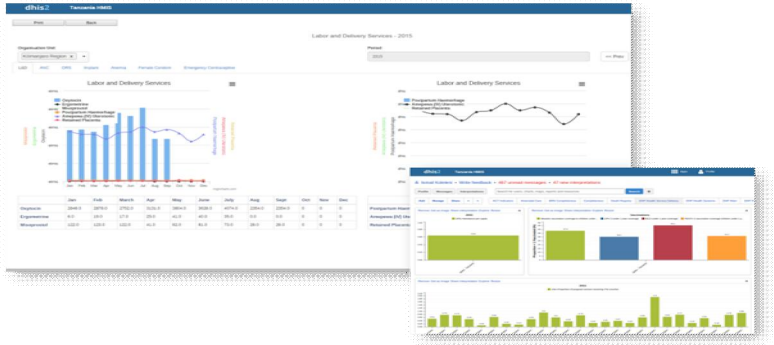
- Establish eHealth standards, rules, and protocols for information exchange and protection
- Establish comprehensive health facility, provider, and client registries with complete and current information that meets stakeholders' needs



Current Situation: Example

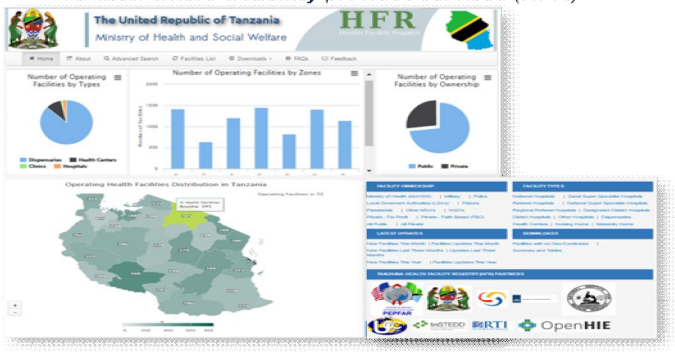
Current Situation: Data We Have

- We know *what* **service** (eg. ANC) is provided (DHIS2)



Current Situation: Data We Have

- We know *where* a **facility** provides services (HFR)

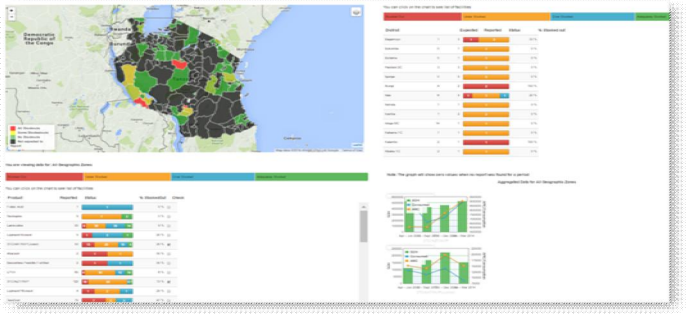


Current Situation: Data We Have

- We know the **provider** *who* provides services (HRHIS)

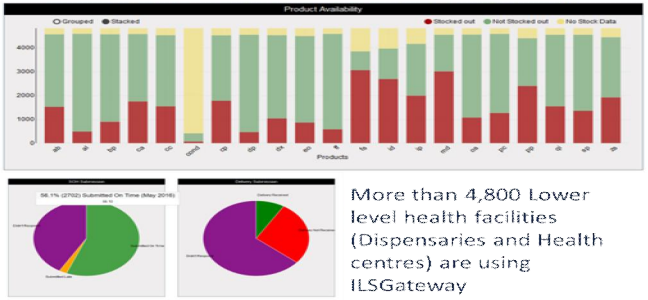
Current Situation: Data We Have

- We know *which* **commodities** are available at HF (eLMIS)



Current Situation: Data We Have

- We know *tracer* **commodities** availability (ILSGateway)

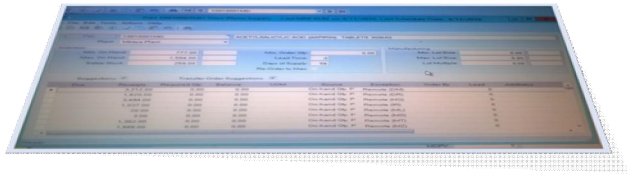


More than 4,800 Lower level health facilities (Dispensaries and Health centres) are using ILSGateway

Current Situation: Data We Have

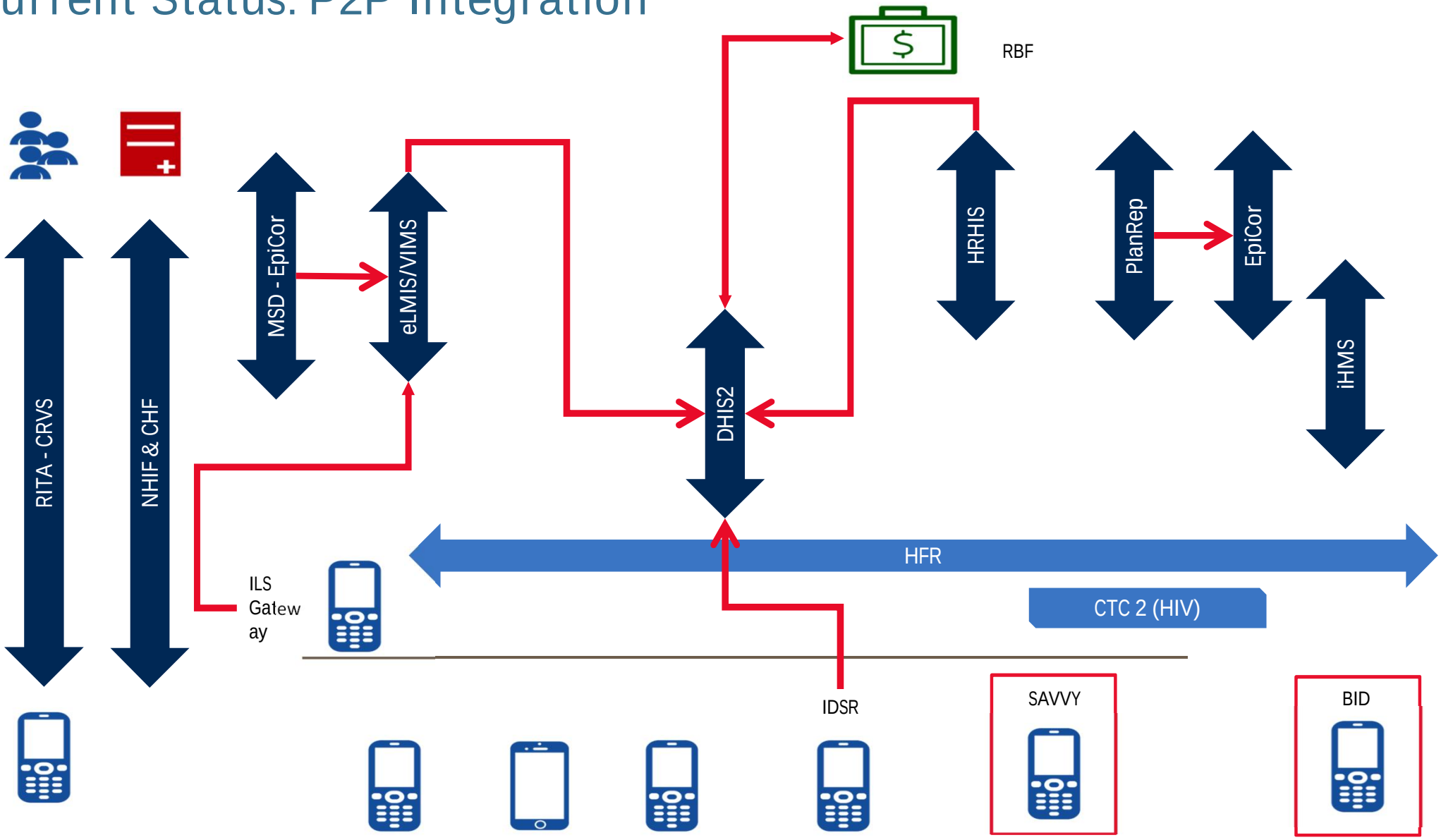
- We know *how much* **money** is available (District ERP, & MSD)

EPICOR @ msd & District Councils



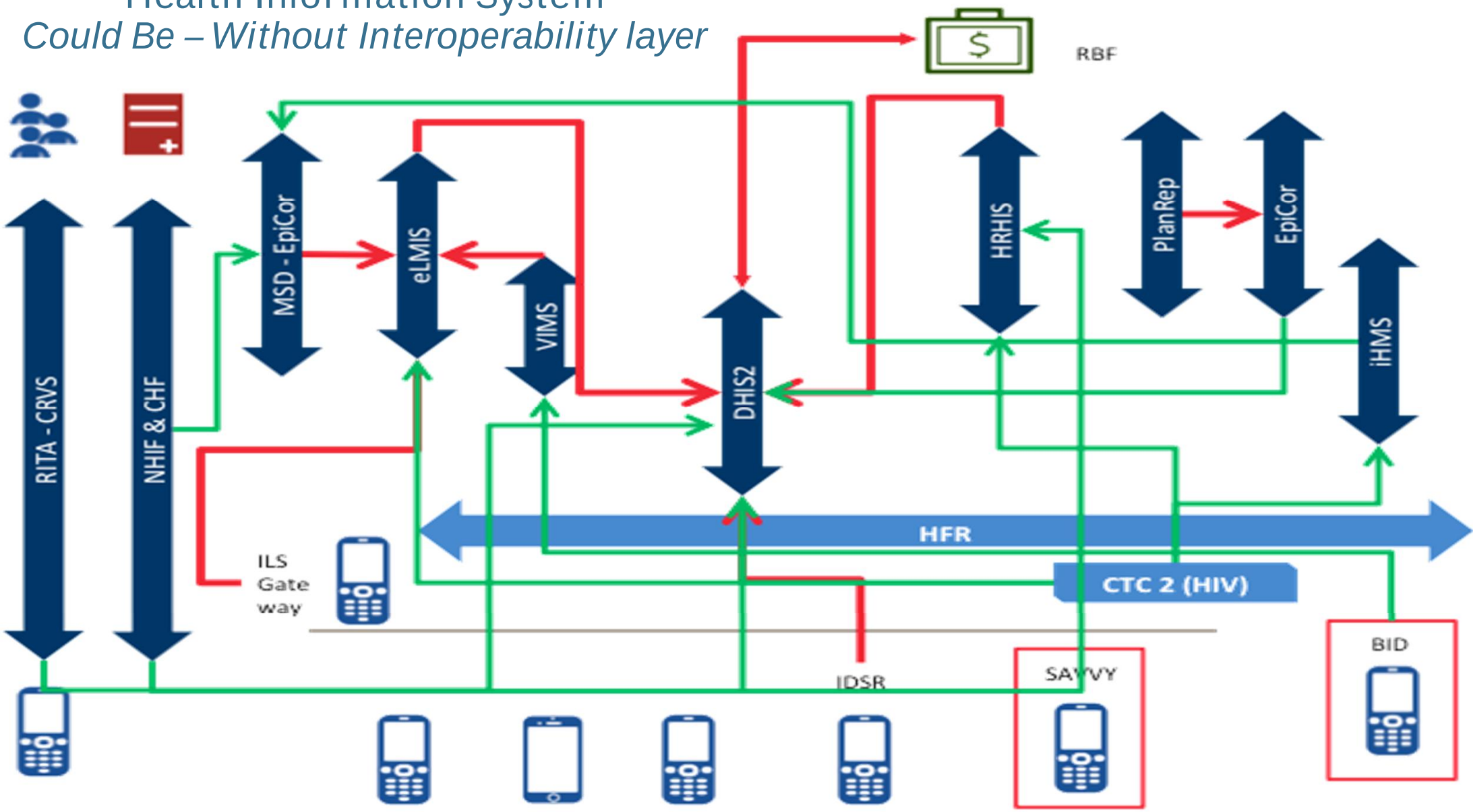
- We don't know *to whom* (beneficiary) services are provided (EMR) except HIV care (CTC2) and some Hospitals through iHFeMS
- We cannot easily compare *what, where, who, which, or how much*

Current Status: P2P Integration



Health Information System

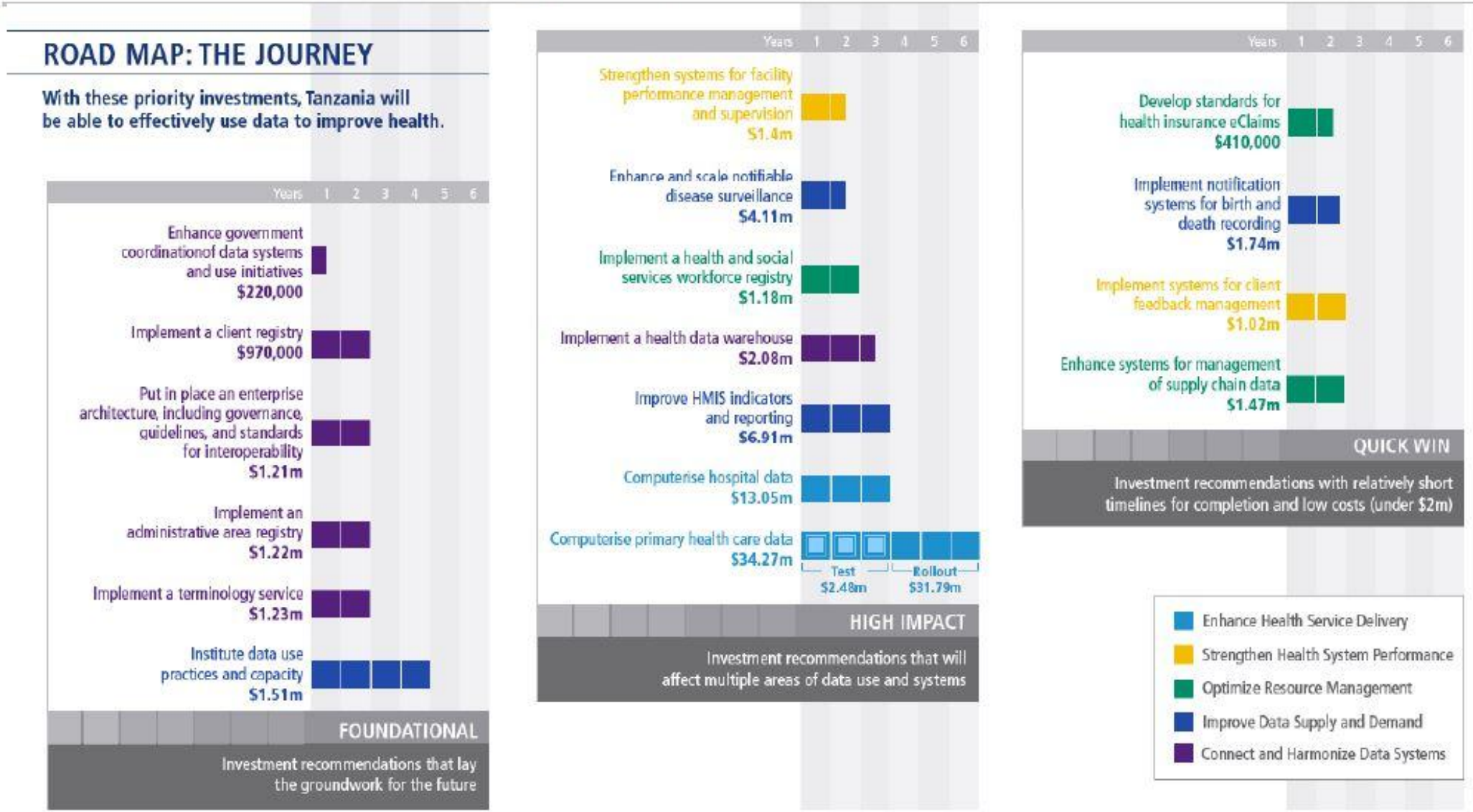
Could Be – Without Interoperability layer

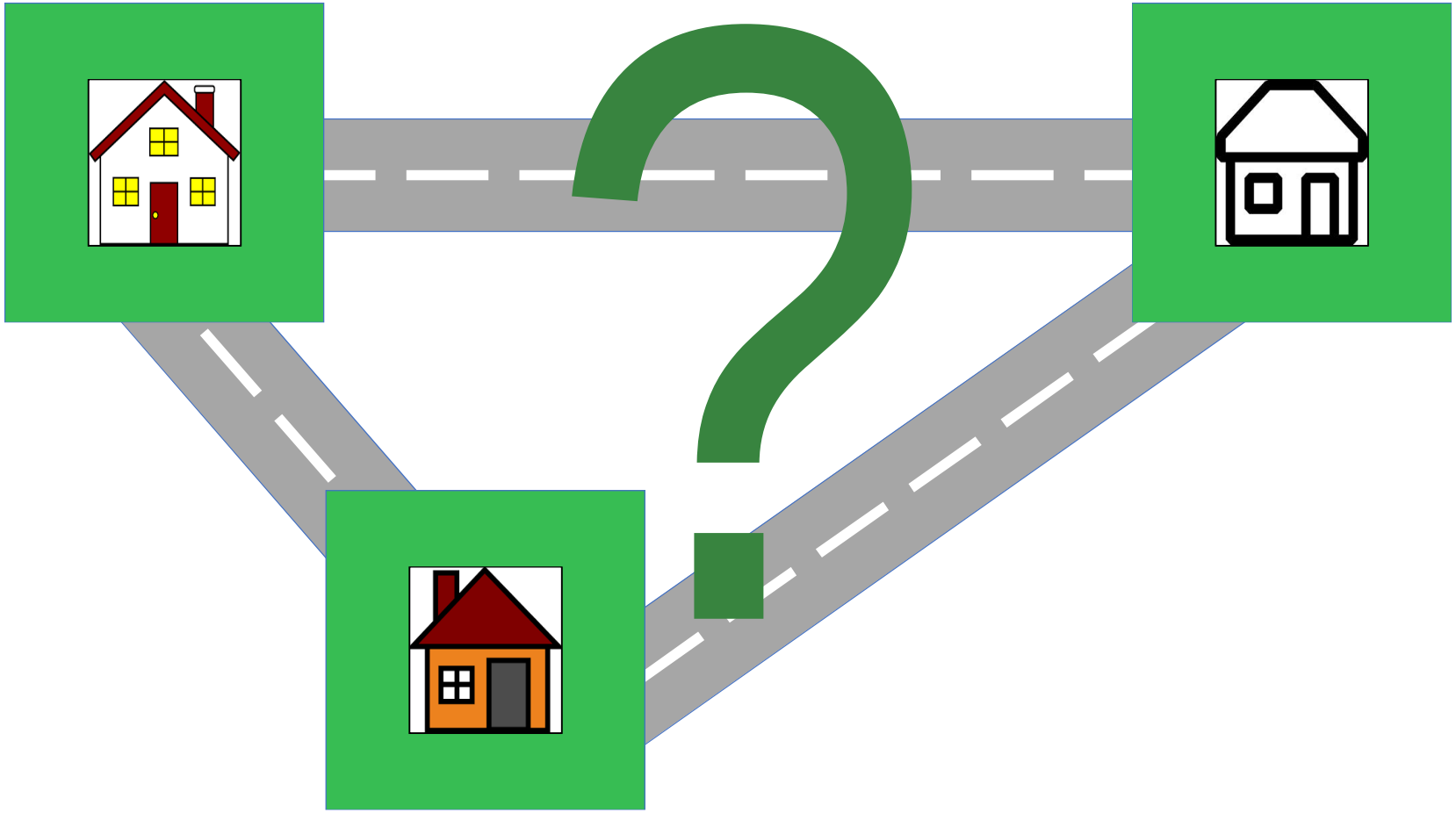


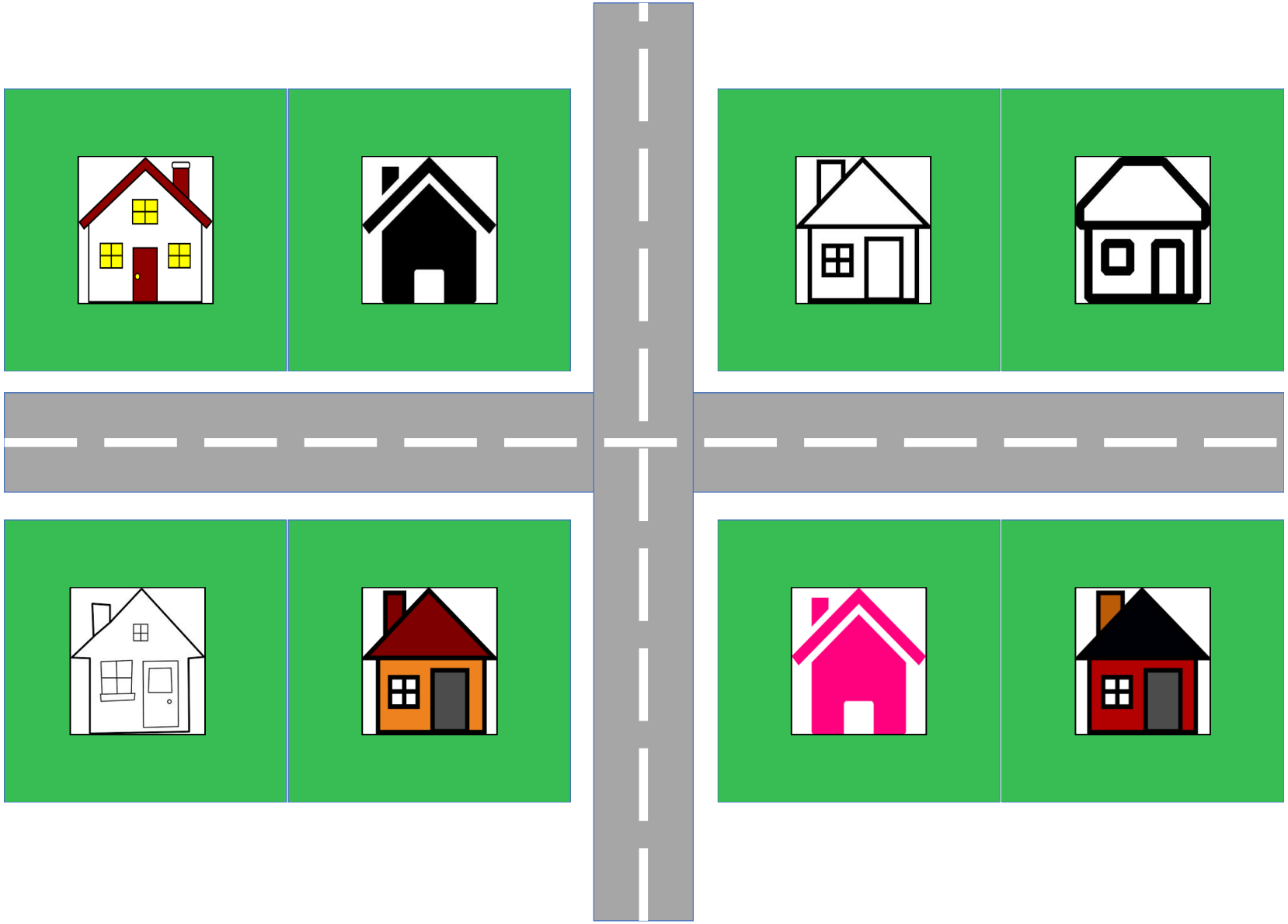
THE QUESTION?

How do we harmonize HIS?

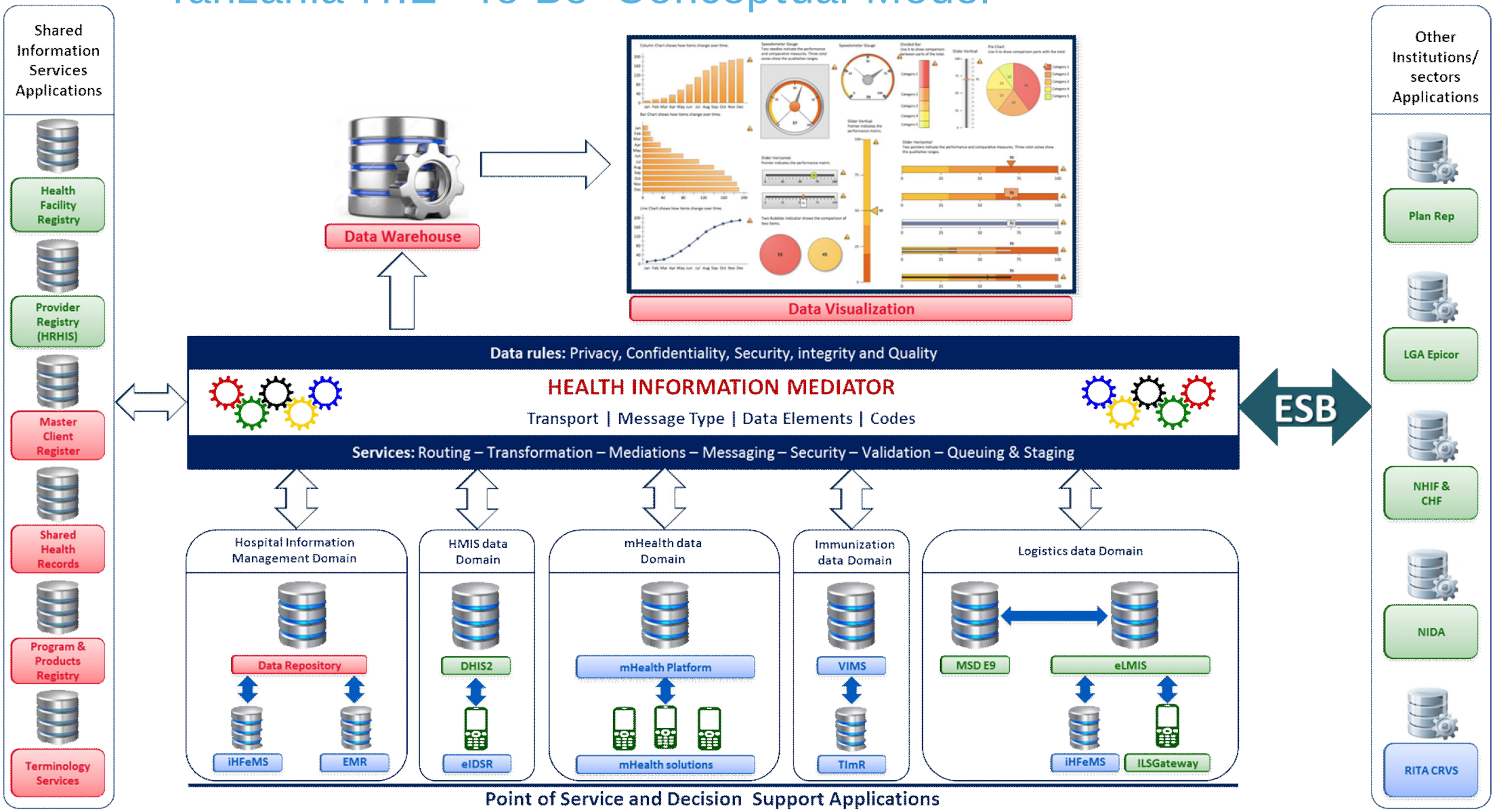
FIGURE 3. INVESTMENT RECOMMENDATION ROAD MAP





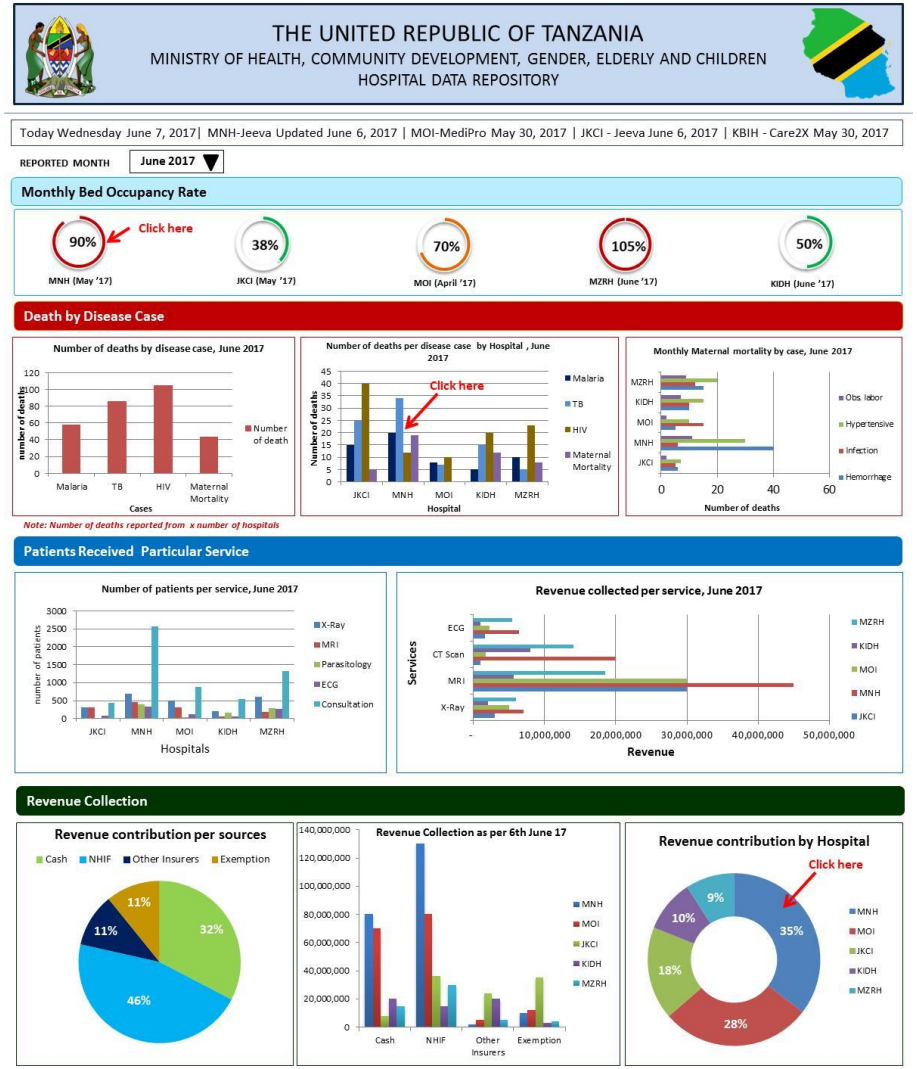


Tanzania HIE 'To Be' Conceptual Model



Future uses of system

- Data sharing across systems
- e-Registry: Integrated and longitudinal care
- e-Referral from community to facility and lower to higher facility
- Improved decision-making at time of care
- Client feedback based on care received



THANK YOU!