

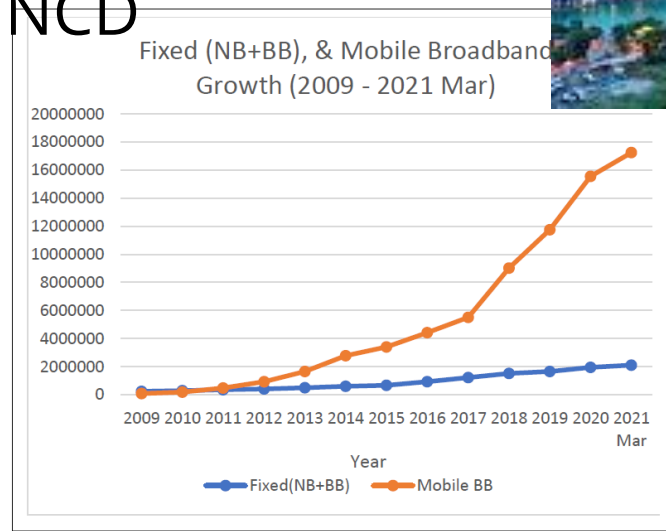
Plenary VI: Telemedicine implementation guide

Deep dive session on WHO consolidated telemedicine implementation guide

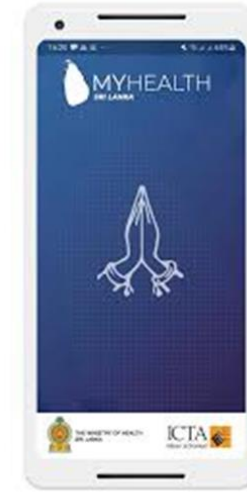
Sri Lanka

Enablers for Telehealth in SL

- Mobile Cellular Subscriptions : **[147 /100]**
- Mobile broadband connections **(50-60%)**
- General Literacy Rate- **92%**
- Access to Electricity - **99%**
- High Mobile phone signal coverage
- Rising Elder population and NCD
- **Health Informaticians**
- **as a medical specialty**



Existing Telehealth related Applications in Sri Lanka (State and Private sector)

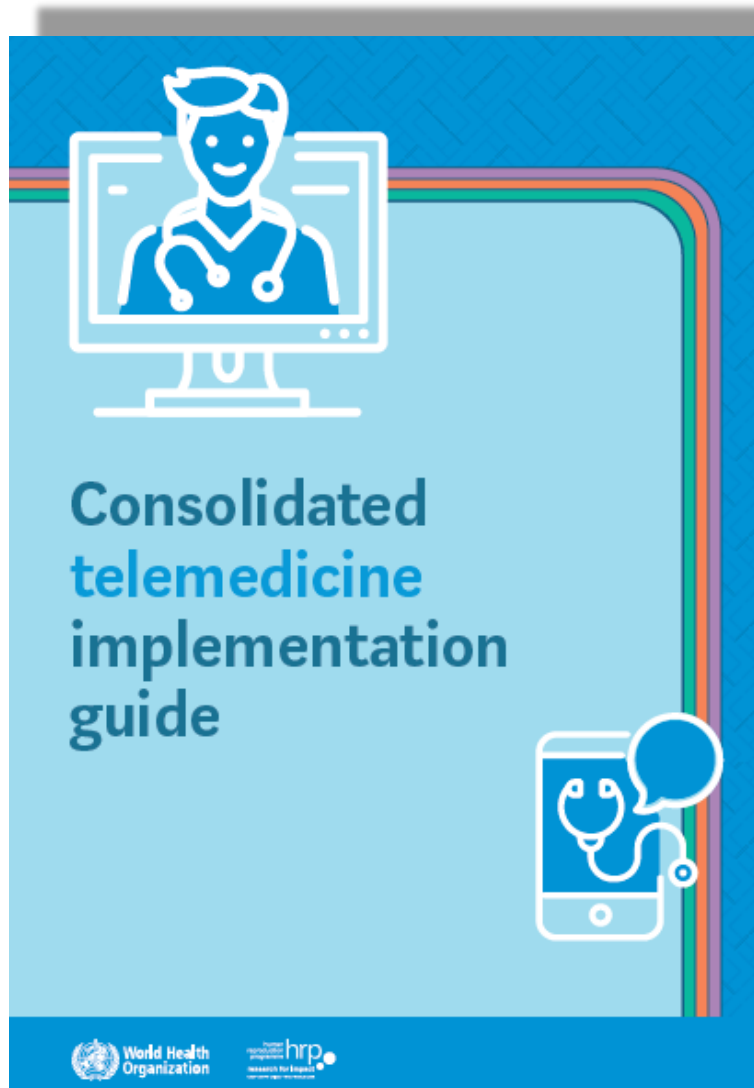


සුවසිරිය (සුවසරිය) (Health Net)

Web Site & Call Centre

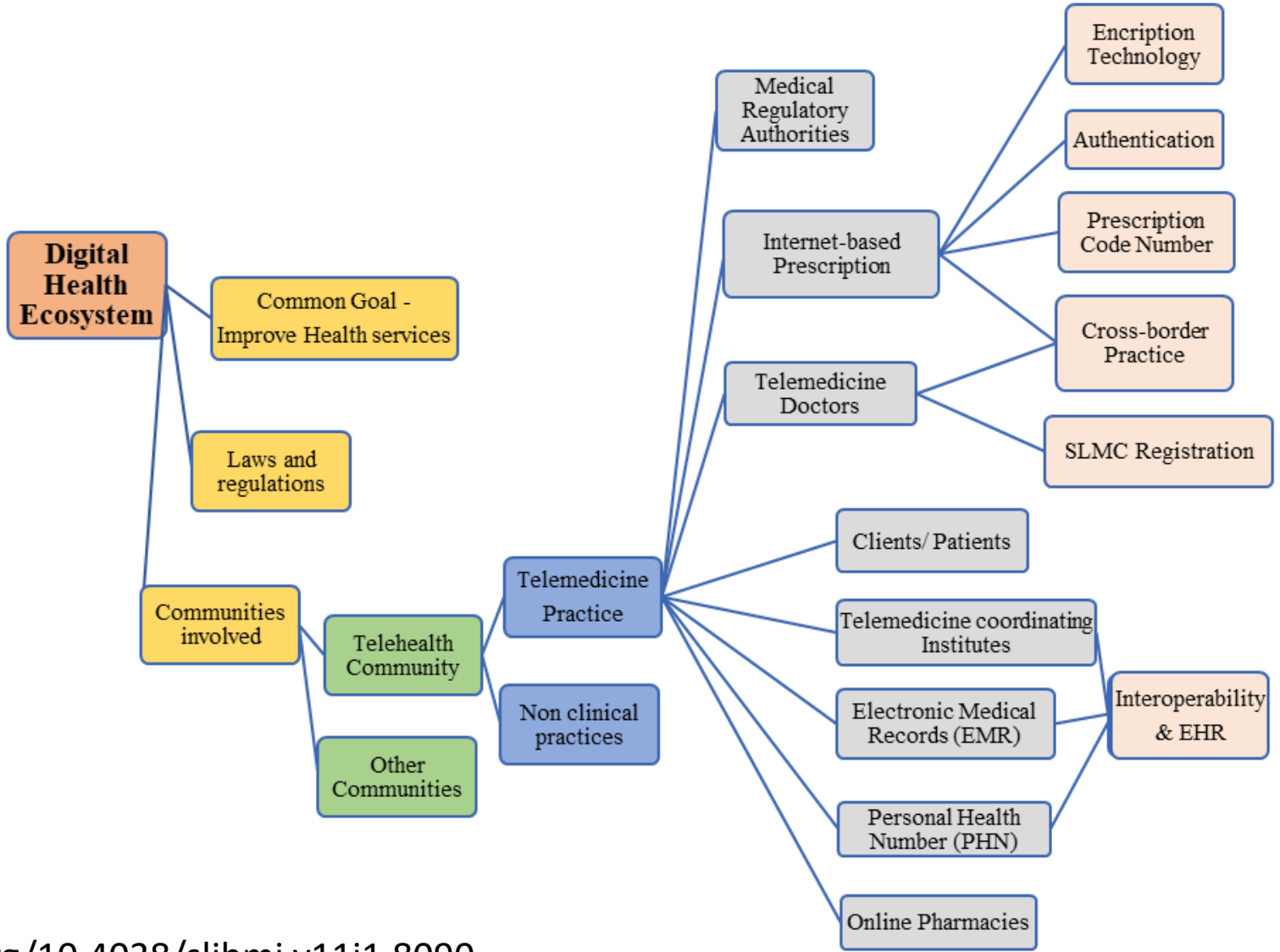
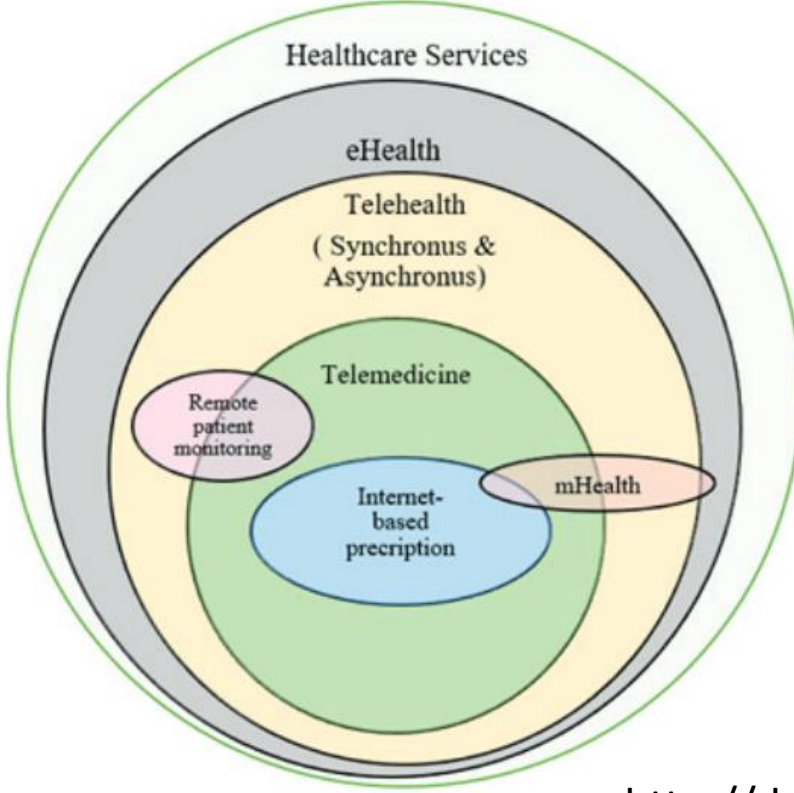
To resolve your health issue...





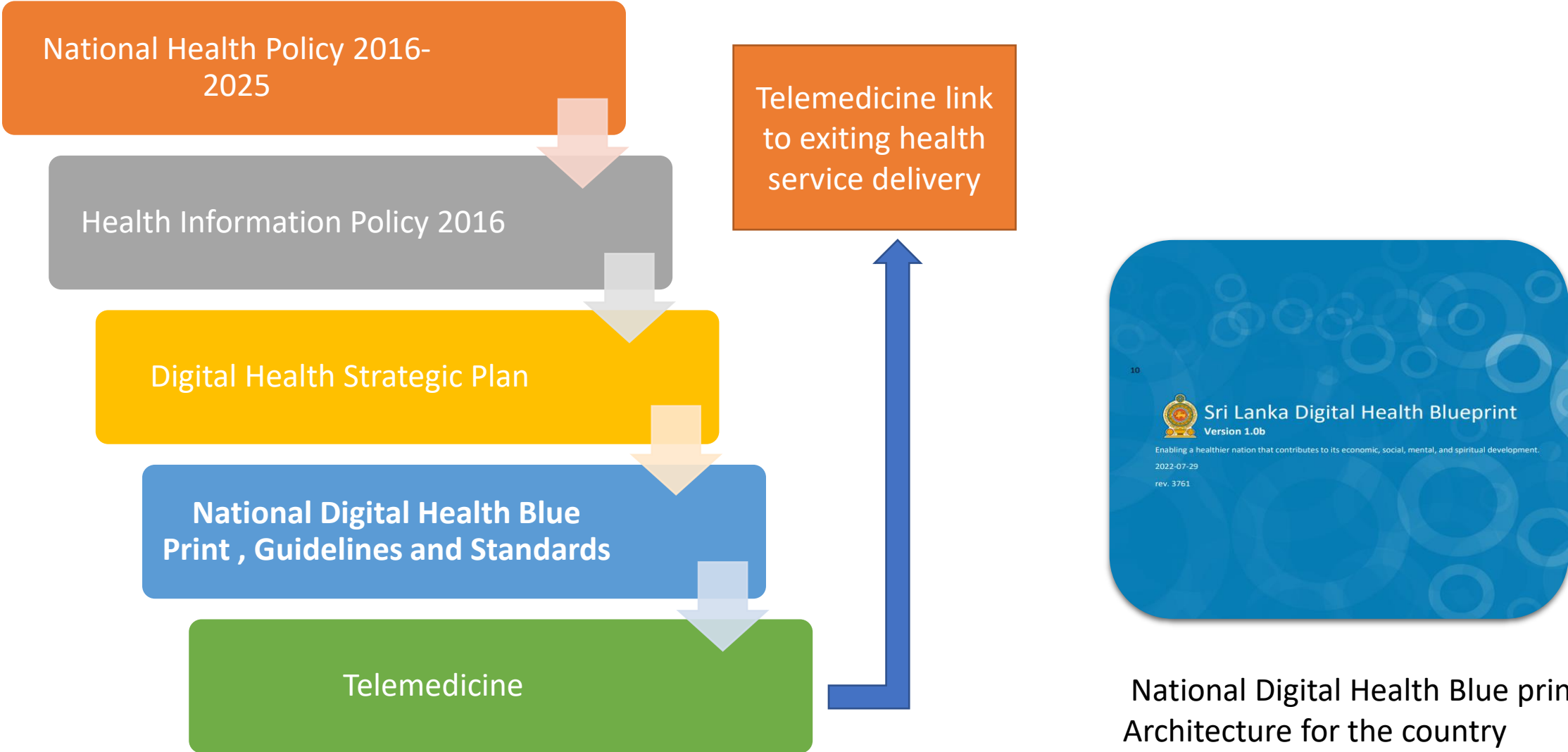
PHASE 01: SITUATIONAL ASSESSMENT	
STEP 01	FORM THE TEAM AND ESTABLISH GOALS <input type="checkbox"/> Identify stakeholders that should be involved in the design, management and implementation of the telemedicine programme
STEP 02	DEFINE HEALTH PROGRAMME CONTEXT AND TARGETS <input type="checkbox"/> Determine the programmatic and geographic scope of the telemedicine service.
STEP 03	CONDUCT A LANDSCAPE ANALYSIS <input type="checkbox"/> Conduct a landscape analysis of software applications and channels <input type="checkbox"/> Map hardware needs and availability
STEP 04	ASSESS THE ENABLING ENVIRONMENT <input type="checkbox"/> Assess digital maturity to determine infrastructural and organizational needs <input type="checkbox"/> Review availability and competency of health workers <input type="checkbox"/> Assess regulatory and policy considerations <input type="checkbox"/> Consider implications for cross-jurisdictional flow of information <input type="checkbox"/> Explore financing mechanisms
PHASE 02: PLAN THE IMPLEMENTATION	
STEP 05	DETERMINE HOW THE TELEMEDICINE SYSTEM WILL OPERATE <input type="checkbox"/> Define the functional and nonfunctional requirements <input type="checkbox"/> Update workflows reflecting the requirements <input type="checkbox"/> Conduct extensive user testing <input type="checkbox"/> Plan for change management
STEP 06	ENFORCE MECHANISMS FOR PATIENT AND HEALTH WORKER SAFETY AND PROTECTION <input type="checkbox"/> Put systems in place for data privacy, access and protection of patient information <input type="checkbox"/> Enforce ways to verify licensing/accreditation of health workers <input type="checkbox"/> Determine and disclose if audio/video recording will be done
STEP 07	ESTABLISH STANDARD OPERATING PROCEDURES <input type="checkbox"/> Clarify clinical protocols and identify potential liability considerations <input type="checkbox"/> Determine the training package and channels for support <input type="checkbox"/> Establish a process for confirming identification <input type="checkbox"/> Establish clear consent documentation <input type="checkbox"/> Explore whether changes to health worker remuneration are needed <input type="checkbox"/> Establish a plan for management of connected medical devices
STEP 08	INVEST IN CLIENT/PATIENT ENGAGEMENT AND GENDER, EQUITY AND RIGHTS <input type="checkbox"/> Determine mechanisms for outreach <input type="checkbox"/> Assess implications on equity, gender and rights <input type="checkbox"/> Ensure accessibility for persons with disabilities
STEP 09	DEVELOP A BUDGET <input type="checkbox"/> Define the budget for overall cost of ownership <input type="checkbox"/> Plan how to integrate telemedicine into routine health service delivery and purchasing arrangements
PHASE 03: MONITORING AND EVALUATION (M&E), AND CONTINUOUS IMPROVEMENTS	
STEP 10	DETERMINE M&E GOALS <input type="checkbox"/> Define indicators for assessing performance and impact
STEP 11	PLAN FOR CONTINUOUS IMPROVEMENTS AND ADAPTIVE MANAGEMENT <input type="checkbox"/> Embed mechanisms for routine monitoring and continuous improvement <input type="checkbox"/> Mitigate potential risks

Sri Lankan Telehealth Echo system



<http://doi.org/10.4038/sljbmi.v11i1.8090>

Policy considerations in Strengthening telemedicine implementations





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 සෞඛ්‍ය, පෝෂණ හා දේශීය වෛද්‍ය අමාත්‍යාංශය

சுகாதார தகவல் மீதான தேசிய கொள்கை
 சுகாதார போசணை மற்றும் சுதேச வைத்திய அமைச்சு

The National Policy on Health Information
 Ministry of Health, Nutrition and Indigenous Medicine

2017

Policy Area 5: eHealth¹² and Innovations

Policy Directive 5.1: eHealth and innovations governance structure shall be strengthened.

Strategies	Key Action Areas/Implementation Guidelines	Time Frame ¹	Responsibility
5.1.1 eHealth and Innovations Governance	5.1.1.1 Coordinate and facilitate eHealth and innovations related to health information.	Continuous activity	National eHealth Steering Committee (NeHSC) under NHISC

¹²eHealth is defined by World Health Organization as the transfer of health resources and health care by electronic means.

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Ministry of Health, Nutrition and Indigenous Medicine

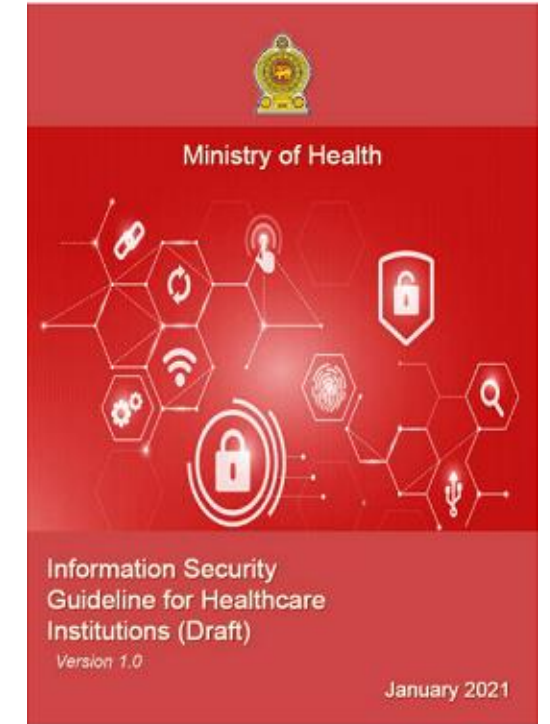
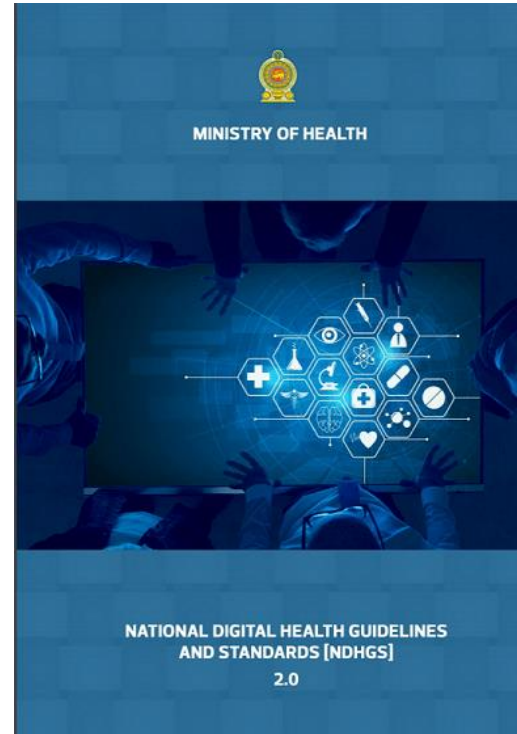
The National Policy on Health Information

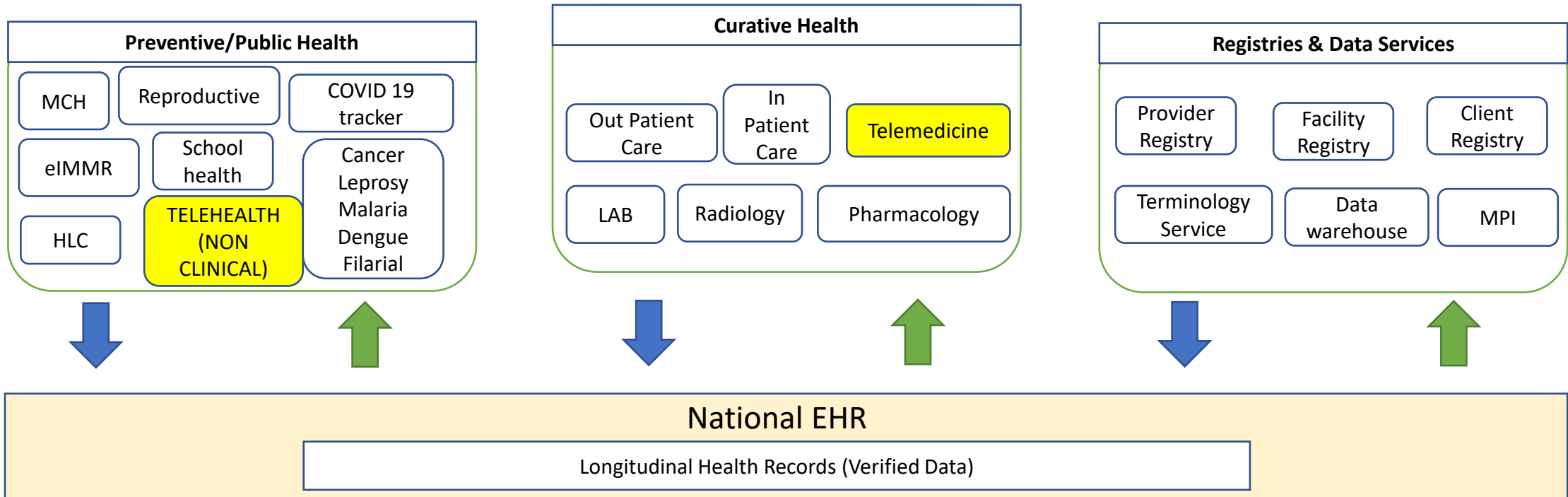
The eHealth and innovations governance structure and mechanism shall be strengthened.

5.1.1.2 Formalize and implement the National eHealth Guidelines and Standards (NeGS).	Continuous activity	D/HI
5.1.1.3 Periodically review and update the NeGS according to the needs and technological advancements.	Continuous activity	D/HI
5.1.1.4 Formulate guidelines for acquisition, maintenance and decommissioning of software and eHealth systems.	24 months	D/HI, DDG(P)

Policy Directive 5.2: Information and Communication Technology solutions and innovations shall be appropriately adopted to improve the quality, efficiency, patient safety, and cost effectiveness health information systems.

Blue print
 Intraoberble plan etc





Success stories in Telemedicine

By 31.12.2021, SLMA 247 call center- Answered over 70,000 patients and 30,000 SMSs ; only around 1400 patients needed urgent care and hospitalization

Thousands of registered home quarantined cases were managed by Home based care system (Audio Based)

Myhealth App enabled audio and video consultations for anyone from home leading to electronic prescriptions.

Suwasariya (1999) enabled to relieve anxiety of citizens by health updates and health educational communications.

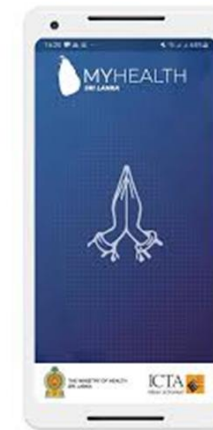
Reduce Hospital admissions

Reduced Patient anxiety

Reduce stress on clinicians

Deaminated correct Health Information

Collaborated with the private sector



oDoc



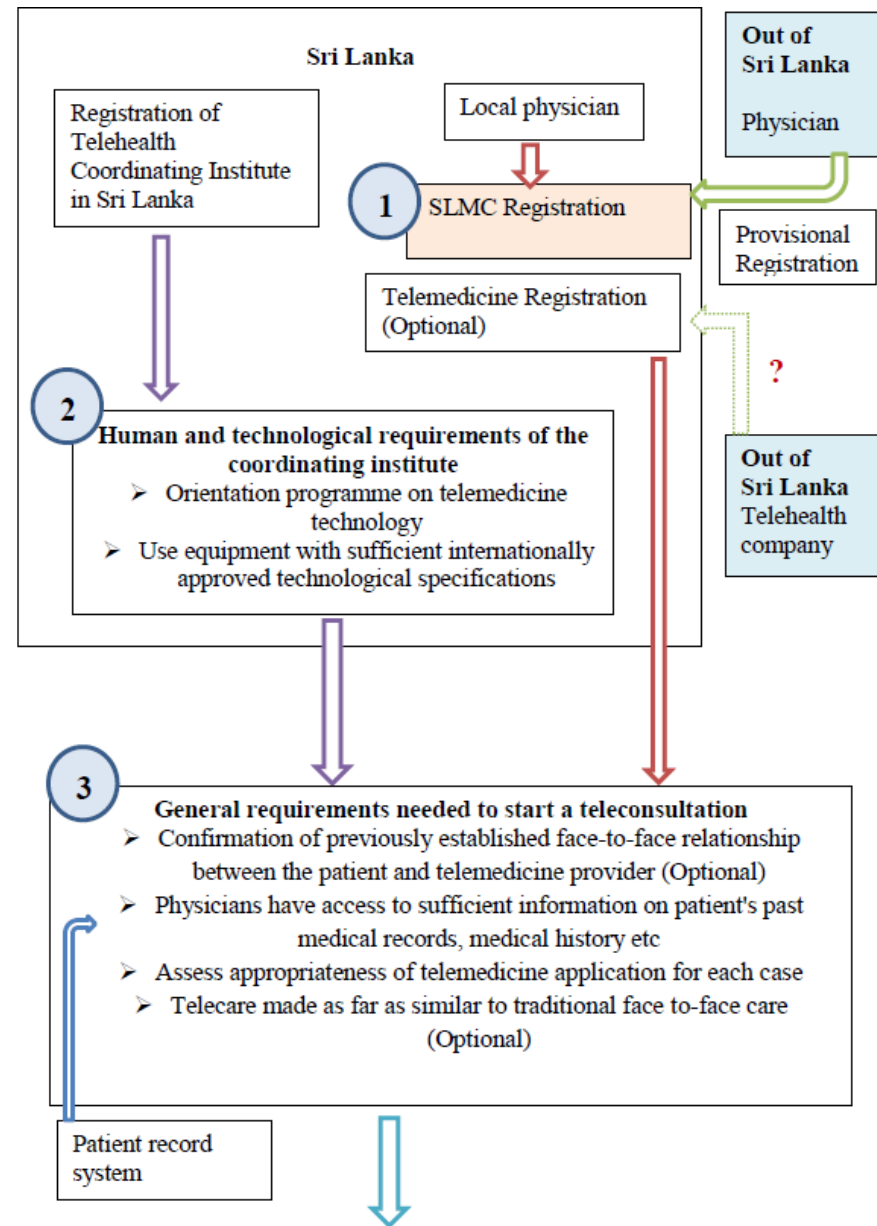
Challenges for Telehealth Sri Lanka

- 2006 electronic transaction act used in practice of Telemedicine in Sri Lanka
- NMRA act , medical ordinance and (CDD) act don't address Telemedicine
- No SLMC supervision on cross border online medical practice.
- Unavailability of Telemedicine guideline.
- Poor knowledge on telehealth modalities & Technophobia of Doctors
- Financial barriers for development.
- Poor infrastructure accessibility for peripheral community.
- Moderate ICT literacy (50%) of Sri Lankans and less use of broadband services
- Public- Private partnerships not running long term
- Poor electronic media usage in elderly people and disabilities
- The benefits may only be realized by some users creating digital divide

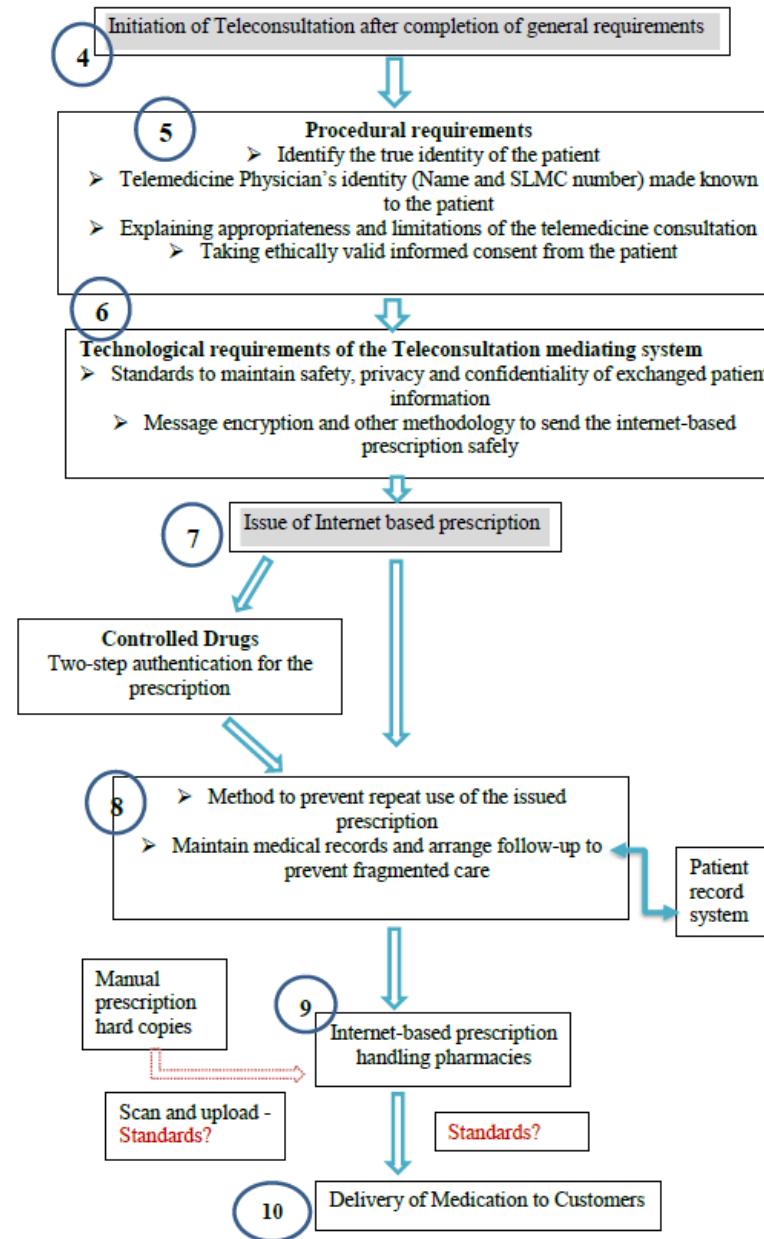
Areas to be further developed

1. Development of official Telemedicine practice guidelines with multiple colleges.
2. Undergraduate (Medicine and Paramedical) training on Telehealth
3. Training health professionals (PG and CPD) on Telehealth
4. Interoperability between tele services to enhance continuation of patient care
5. Development of Telemedical modules for existing Hospital Information systems
6. Updating exiting laws and regulations
7. Enhance Telemedicine to address elderly and disabled
8. Work process for Telemedicine and online prescribing

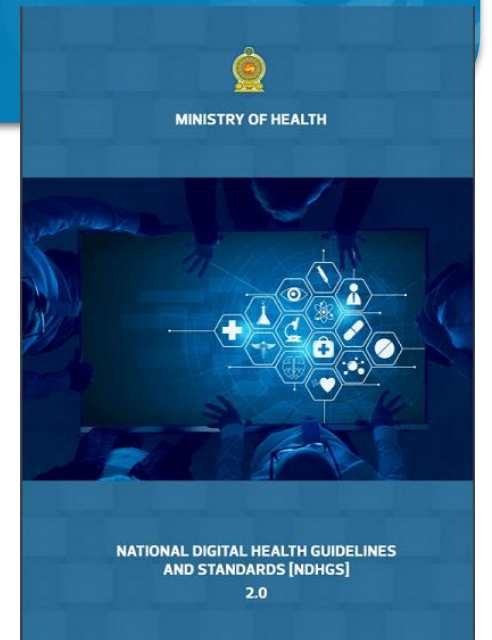
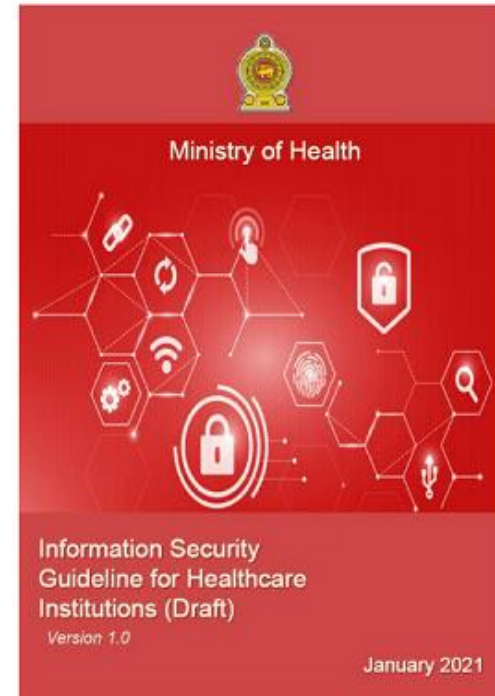
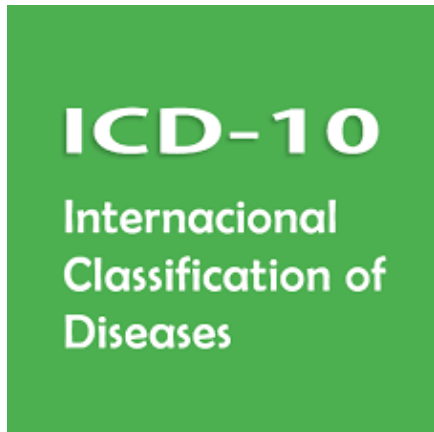
Next action points to scale up telemedicine services



Next action points to scale up or maintain telemedicine services



Setting the standards that enable application to communicate between applications



Thank you

