eHealth Strategy in Republic of Moldova

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Republic of Moldova

Geography: The country’s territory is 33,800 sq.km.

Population: 3.56 million people

Political system: Parliamentary Republic

Capital: Chisinau

20 years of independance
Health Care System in the Republic of Moldova

**Resources:**
- Public Health Service
- Primary Care
- Hospital Care
- National Emergency Service
- Health Care Education
  i. SUMP N. Testemitanu
  ii. 5 nursing colleges and 2 nursing continuous education institutions

**Financing:**
- 112$/ per capita
- Compulsory Health Insurance
- State Budget
- Local Public Administration
- Private Investment

**Selected indicators: (y.2010)**

Public HE/GDP – 4.8%
Institutions - 250
Health Care personnel
  - Doctors – 29.8 per 10 000
  - Nurses – 64.5 per 10 000
Outcome indicators (MDG)
  - Child Mortality – 11.8 per 1000
  - TB incidence – 102.2 per 100 000

**e-Readiness**

117 Institutions are using broadband connection (land/mobile)

Doctors using
  i. Internet-connected PC at the work place – 24%
  ii. PC at the work place – 28 %

EPR – 8 institutions (accounting – 118)
European cooperation in the area of eHealth

Prague Declaration
- Participation in eHealth Ministerial Conference – February 2009
  “eHealth for Individuals, Society and Economy”

- Participation in First South-East eHealth European Networking Conference
  – September 2009, Bosnia and Herzegovina

EFMI

ISfTeH
Harmonized Strategic Framework in Health

- National Health Policy 2007-2021
- Health Care sector Strategy 2008-2017


E-Health Context

- In 2005 Government adopted National Strategy on building Information Society e-Moldova
- National Strategy on building Information Society e-Moldova contains a chapter dedicated exclusively for e-Health

Action Plan 2005-2010

http://www.e-moldova.md
Main directions for – “e-Moldova Strategy”

- e-Governance
- e-Democracy
- Infrastructure
- e-Education
- e-Economy
- e-Culture
- e-Science
- e-Health
Main documents for eHealth development

Roadmap documents for ICT development in health sector:

- Concept of *Integrated Medical Information System*, adopted by Government Decision Nr.1128 on **14 October 2004**

Integrated Medical Information System Structure

IMIS had to contain 15 Main Modules for:

- Primary Health Care
- Secondary Health Care
- Hospital for all levels (national, district, regional,)
- Infection diseases (TB, HIV, etc)
- National Blood Center
- Financing – National Health Insurance Company
- Electronic Health Record
- Emergency Service
- ...
Implemented information systems

- SIME TB/ HIV, information system financed by Global Fund and other donors;
- Automated Information System for National Blood Transfusion Center;
- Integrated Hospital Management System at the Institute of Neurology and Neurosurgery;
- Primary Care Medical Information System at the Medical University Primary Care Clinic;
- Other systems

Problems: A low level of information system implementation in hospitals and primary health care.
Starting 2008, 85 European and international standards in Medical Informatics area were accepted in Moldova as pre-standards. Preliminary plan stipulates implementation and adoption of these within following 5 years

- Health Informatics vocabulary
- EHR standards
- Public key infrastructure in Health Care
- Exchange of medical documents and medical data
- Etc.
Main problems in eHealth domain

- Lack of dedicated e-Health Policy;
- Lack of knowledge;
- Underdevelopment infrastructure in medical facilities;
- Operational costs and lack of financing;
- Mentality barriers;
Republic of Moldova has no eHealth Strategy as a separate document
Beginning from 2009 Republic of Moldova has new Parliament and Government with pro-European orientation.

According with politics of Alliance of European Integration – eTransformation is a priority for Government. This is mentioned in widely accepted document – “Rethink Moldova”. Our Government undertakes to:

- Design a unified Public Sector ICT organization and governance structure to mainstream the use of ICT within Government agencies;
- Design and implement Government to business (G2B) and to Government to citizen (G2C) service portals by integrating workflows and dual use of systems;
- Expand online and mobile service delivery to citizens and businesses, including the 20 basic e-services in EU classification;
eGovernance – Policy instruments

- Assessment of citizen- and business-facing public services;
- Design and institutionalize a unified Public Sector ICT organization and governance structure;
- Design and implement Government service portal by integrating the workflows and minimizing duplication of systems;
- Simplify the reporting for business by implementing e-reporting;
- Expand online and mobile service delivery to citizens and businesses
It is time for new eHealth Strategy and action Plan.

Preconditions for eHealth services implementation

- creation of correct "compatibility" between the e-Health and the existing problems of the health system;
- use of technologies that have proven effective or those that are most easy to use;
- implementation of the quick wins programs/services for e-Health;
- the design and implementation of programs/services for e-Health in accordance with the current policy in this area.

Establishment of eHealth task force
Ministry of Health from Republic of Moldova received a grant for e-Health Strategy development.

- We are at the beginning for new strategy.
- We are here to listen, learn from best practices and move further with big steps.
# Cooperation opportunities in eHealth

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<thead>
<tr>
<th>Tools</th>
<th>Areas</th>
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<tbody>
<tr>
<td></td>
<td>Strategy and health care management</td>
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<tr>
<td>Working groups and conferences</td>
<td>+</td>
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<tr>
<td>Web-platforms</td>
<td>+</td>
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<td>mHealth</td>
<td>+</td>
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<tr>
<td>Videoconferencing</td>
<td>+</td>
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<td>Imaging</td>
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- Strong political support at Government level in eHealth

- Small country – flexible conditions – proved experience in goal achievement

Opened, and, highly interested in developing cooperation for e-Health

Looking for partners – Government/Institutional/Corporate/non-Government
Outcomes expected from international cooperation

- Wider access for citizens to health services and information
- Compatible strategic and policy framework
- Enhanced exchange of managerial, clinical, educational and scientific information and best practices between participating countries
- Improved public health and health promotion programmes
- Reduced costs due to cooperative approach
Thank you for your attention!