**TC ABSTRACT**

**I. Basic Project Data**

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| ▪ Country/Region: | COLOMBIA/CAN - Andean Group |
| ▪ TC Name: | Support the Ministry of Health and Social Protection in the digital transformation of the health system |
| ▪ TC Number: | CO-T1672 |
| ▪ Team Leader/Members: | ORTIZ HOYOS, JOSE LUIS (SCL/SPH) Team Leader; TEJERINA, LUIS R. (SCL/SPH) Alternate Team Leader; MARIANGELA CHAVEZ (SCL/SPH); ROJAS ACUNA, MONICA (CAN/CCO); CARDENAS GARCIA, CLAUDIA MYLENNA (VPC/FMP); HILLMAN, EUGENIO F. (VPC/FMP); NELSON, JENNIFER A (SCL/SPH); NATALIA ALMEIDA (LEG/SGO); KANG, DONGHYUN (SCL/SPH); HYUNJU LEE (SCL/SPH); DELFS ILIEVA, ISABEL (SCL/SPH) |
| ▪ Taxonomy: | Client Support |
| ▪ Number and name of operation supported by the TC: | N/A |
| ▪ Date of TC Abstract: | 07 Jul 2022 |
| ▪ Beneficiary: | Ministerio de Salud y Protección Social |
| ▪ Executing Agency: | INTER-AMERICAN DEVELOPMENT BANK |
| ▪ IDB funding requested: | US$700,000.00 |
| ▪ Local counterpart funding: | US$0.00 |
| ▪ Disbursement period: | 24 months |
| ▪ Types of consultants: | Not applicable |
| ▪ Prepared by Unit: | SCL/SPH - Social Protection & Health |
| ▪ Unit of Disbursement Responsibility: | CAN/CCO - Country Office Colombia |
| ▪ TC included in Country Strategy (y/n): ▪ TC included in CPD (y/n): | No No |
| ▪ Alignment to the Update to the Institutional Strategy 2010-2020: | Productivity and innovation |
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**II. Objective and Justification**

2.1 This technical cooperation aims to support the Ministry of Health and Social Protection (MSPS) in the digital transformation of the health system, strengthening the knowledge regarding the implementation of digital health tools, mainly through (i) developing and implementing an interoperability pilot of digital transformation of the health system (SGSSS), and (ii) the training of personnel in the efficient use of digital health.

2.2 Information systems in health and social protection are one of the most important pillars seeking robust and sustainable health systems. Some of the reasons behind this importance are because the quality and quantity of information allow governments to make better decisions, plan effective programs, and implement public policies with high impact. The WHO/PAHO found that some of the weaknesses of information systems in Latin America are: the low coverage of the data, lack of knowledge of how to use data, poor interoperable systems, and low feedback between institutions (WHO, 2020).   
The digitalization of the health sector can bring many benefits in terms of the quality of medical services and the efficiency of primary health care. By a way of illustration, a well-implemented electronic health record has demonstrated quality improvements and cost reductions by increasing the adherence of patients to clinical guidelines, reduction of duplication of examinations, errors, and time spent transcribing information, and providing essential information for patient care (Nelson et al, 2019). Especially during the COVID-19 period, face-to-face healthcare demonstrated the limits in providing quality services. Therefore, the digital transformation of the health sector is important for the Colombian government for future pandemic preparedness. To support these development initiatives, the IDB has been actively supporting the MSPS in its process of digital transformation through technical cooperation (CO-T1619), which has contributed to the development of the digital transformation route of the SGSSS on a solution’s design scheme to improve the opportunity, quality, and access to the information through the systems integration around a Financial Portal. Some of the data that would be integrated are the Individual Registry of Health Services Provision (RIPS), electronic billing of medical technologies and services, and a systematized electronic medical record. Additionally, the Bank approved the first loan based on results in Colombia (CO-L1248), which seeks to improve SGSSS sustainability to consolidate gains made in coverage, equity, financial protection, and improvements to public health. This technical cooperation will invest in the development of guidelines and technical documents to improve interoperability similar to the ones developed in Uruguay for the same purposes, it will also invest in the implementation of conectathons in the country to test and implement the exchange of information through practical exercises and will invest in the development of capacity in digital health in the Government.

**III. Description of Activities and Outputs**

3.1 **Component I: Foundations for the Interoperability of Clinical Record in Colombia.** It will focus on (i) the development of the foundational bases for the interoperable electronic health record such as the implementation guides based on international interoperability standards, the deployment of terminology services, and the training of technical teams of the Ministry

3.2 **Component II: Development of the IHC Proof of Concept Platform.** It will focus on three goals: (i) logistic support for the Connectathon Strategy; and (ii) development of tests for the interoperability pilot of the Electronic Medical Record

3.3 **Component III: Information and communications technology Measurement.** It will develop and update the ICT Health Measurement in Colombia for 2022 through the (i) implementation of a survey to measure the technological infrastructure for health

3.4 **Component IV: Training and education for the implementation of health digital systems.** It will focus on the knowledge sharing and the implementation of digital health systems in Colombia through online and in-person sessions

**IV. Budget**

**Indicative Budget (US$)**

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| **Activity/Component** | **IDB/ Total Fund Funding** |
| Foundations for the Interoperability of Clinical Record in Colombia | 50,000.00 |
| Development of the IHC Proof of Concept Platform | 200,000.00 |
| Information and communications technology Measurement | 150,000.00 |
| Training and education for the implementation of health digital systems | 300,000.00 |
| **Total** | **700,000.00** |

**V. Executing Agency and Execution Structure**

5.1 The Technical Cooperation will be executed by the Bank due to its national character and because the logistics for execution will depend on direct contact between the Bank and the Government of Korea.

5.2 The MSPS has requested that the Bank, through the Bank's representation in Colombia, be in charge of executing this technical cooperation, both for the technical support that the Health and Social Protection division team can offer the Ministry, and for the regulatory, financial and administrative facility that the Bank has. This request is based on the operational difficulties presented by the MSPS to incorporate and execute the resources in an agile and timely manner, affecting the scope of the proposed goals and objectives such as the achievement of the required products during the execution period.

**VI. Project Risks and Issues**

6.1 Regarding Component I, the risk identified is the difficulty of carrying out effective inter-institutional coordination between the MSPS, the Ministry of Information, Communication and Technologies, and the Presidency of the Republic. For this, it will seek coordination mechanisms to achieve the agreements required during the execution of the project. Another risk, that fall upon the two components is the change of Government, which might affect the development and continuation of the project.

**VII. Environmental and Social Classification**

7.1 The ESG classification for this operation is "undefined".