Discussion around strengthening capacity for OpenHDS

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Needs Assessment

• Data management/quality – 29 of 34 centres said “extremely important” / “important”

• Areas
  • Electronic data capture
  • Data quality assurance
  • Harmonization of data across centres
  • Moving from Foxpro/HRS2 to SQL-based systems
  • Using InterVA and statistical software
  • Linking HDSS with HIS
  • Managing EMR
OpenHDS

• Solves most of these issues
• Based on newer technologies, and requires a different skillset
  • Java, XML, MySQL
• Handles electronic data capture excellently
• Free and completely open source – potentially more functionalities
• Ensures data quality
• Already in use in 5 HDSS sites
Comments

• “Training on OpenHDS was not enough. OpenHDS will solve our problems. INDEPTH should give this more attention” - Kersa HDSS

• “OpenHDS training in Dubai was good. But 3-day training not enough” – Gilgel Gibe HDSS

• “Thankful to INDEPTH for support. We have migrated and will use it for our next round next week” – Nanoro HDSS

• Need for training
  • Long enough
  • Extensive (including underlying technologies)
  • Hands-on
  • Support for deployment
Ideas

• Can training be more effective and scaled, without significant cost on INDEPTH and centres? How do we manage the growth and use of the system?

• OpenHDS online community of users and developers

• Online training courses
  • Introductory course
  • Blended learning for more advanced courses
  • OpenHDS developer course

• Online governance around the development
  • Contribution from sites. Users and developers from sites can send in contributions
  • One standardized OpenHDS system
  • Online voting/prioritization for features

• Discussion - How can we make this work?
www.digitalhealth.institute

- OpenHDS
- Introduction to eHealth & Health Informatics
- mHealth
- OpenMRS and OpenEMR
- Basic SQL
- DHIS2
- R programming
- eHealth Strategy