



HUMANITARIAN INNOVATION FUND

Early Stage Innovation Final Report

- Please try not to exceed 5 pages (Arial, 12pts) excluding attachments –

Organisation Name	healthsites.io

Project Title	Global Healthsites Mapping Project
Partner(s)	International Society for Infectious Disease
Problem Addressed / Theme	Disaster Preparedness, Resilience and Risk Reduction
Location	France
Start Date	01/01/17
End Date	31/12/17

Total Funding	Total HIF and other contributions to this project
Total Spent	£44 643

Innovation Stage	Early Stage Innovation
Type of Innovation	Core – invention
Project Impact Summary	Our goal is the development of a data life cycle that supports the MoH in maintain the accuracy of their master facility list.
	The primary impact of the project has been the release of the Senegalese Master facility list under an open data license and identification of potential validation partners.
	Our next step focuses on establishing Data Collaboratives that support the Ministry of Health (MoH). We plan to do this by addressing a use case that the MoH agrees to collaborate through.

ACTIVITIES CARRIED OUT

1. Describe all the activities carried out. Please attach a workplan or log frame, if these were used.

The primary users of healthsites.io data are national health agencies and the civil society organizations that directly provide health services.

Our objective is to support the Ministry of Health (MoH) to maintain the National Health facility list. Our first step therefore was to introduce our work to the MoH and invite the sharing of their baseline National health facility list under an open data license (ODbL)

The next step was to engage civil society organisations who also have health facility data and develop validation methods that could support the MoH in managing the list.

The following activities were carried out in support of this strategy.

- 10/12/16 Healthsites presentation to Health Informatics Society of Sri Lanka (HISSL)
- 15/02/17 Engagement with The Disaster Management Centre of Sri Lanka (DMC) and Open Data for Resilience Initiative (OpenDRI)
- 23/02/17 Healthsites presentation to WHO Health Data Forum in Geneva
- 24/05/17 Healthsites presentation to the WHO Expanded Programme on Immunization (EPI) and Department of Immunization, Vaccines and Biologicals (IVB)
- 08/06/17 Discussions with Blue Square regarding DHIS2 integration
- 07/07/17 Healthsites presentation to Senegalese Ministry of Health
- 14/07/17 Healthsites presentation to Le Centre des Opérations d'Urgence Sanitaire (COUS Senegal)
- 21/07/17 Healthsites presentation to the IFRC and other stakeholders in the Senegalese health cluster.
- 102/08/17 Presentation to the London School of Hygiene and Tropical Medicine and the MSF Manson Unit
- 30/11/17 Healthsites presentation to Group on Earth Observations and UNITAR

2. If you have made changes or amendments to the planned activities and objectives that have not been detailed in an Agreement Amendment Form, please list them here.

Increase in duration of the project from 6 to 12 months

ACHIEVEMENTS

3. Has the project demonstrated the success of the innovation or idea?

By 'success' we mean that the innovation has achieved the planned positive impact/outcome, or that the idea has proven effective.

□ Completely successful

□ Significantly successful

x Partially successful

 \Box Completely unsuccessful

Please explain further:

We have initiated relationships within the Senegalese and Sri Lankan Ministry of Health who have shared data with the project. However we have not established a method for validating this data.

Outcome:

We have received health facility lists under an open ODbL license from Sri Lankan MoH ,Senegalese MoH, Ghanaian MoH.

Conversations with UNITAR, MSF, ICRC, IFRC and the Group on Earth Observations (GEO) has been initiated focused on validation methods and are ongoing.

4. Please describe how the project achieved the planned objectives, and describe all of the results achieved through the activities indicated in Question 1.

Presentations and face to face meetings were arranged with officials within the Health Ministry and supporting organisations in the Health cluster. These meetings were followed up with Freedom of Information requests.

During natural disasters that occured in 2017 such as the floods in Sri Lanka, the earthquake in Iran and Iraq and Hurricane Erma Healthsites shared Health facility data through social media links to the raw open data in support of the disaster response.

APPROACH

5. Describe how the approach, project design or methodology you used was OR was not appropriate to carry out the planned activities or to achieve the planned objectives.

Our planned objective was to work with Ministries of Health and institutional actors to establish a method of publishing accurate and openly licensed health facility data.

Our approach was to meet with these stakeholders, make Freedom of Information requests and invite data sharing and validation.

Following our presentation to the Sri Lankan Ministry of Health we understood that the list would be shared based on the commitments given during the conversation. On hindsight we needed the Ministry to take a further step of identifying a use case that we could support in an operational context.

MAJOR OBSTACLES

6. Please list the three most significant obstacles faced during the project and describe how they affected the planned activities and results.

Obstacle	Impact of Obstacle
1. Limited Institutional buy in to the process	The Ministry was not proactive in sharing data and supporting the validation process through introductions to potential validation partners.
2. No incentive to share health facility data	The existing methods of maintaining the data could not be improved.
3. No operational context to the data	The work was seen as a nice to have and therefore not a priority

7. Please indicate what steps were taken to address these obstacles and whether the solutions were effective.

Solution	Effective?			
1. Face to face meetings with officials within the Ministries of Health in Senegal and Sri Lanka where Healthsites was presented.	Yes, this has been successful but within the context of the HIF grant the process was to slow.			
2. Healthsites was presented to officials within PATH who have an existing relationship with the Senegalese Ministry of Health have been	Yes, PATH were instrumental in sharing the Senegalese health facility list with Healthsites.			
3. Healthsites presentations were made to the WHO in 2017 and their collaboration was invited.	No, Although the presentation was well received WHO have not yet made direct contact with the project.			

OPTIONAL: PARTNERSHIPS AND COLLABORATION

If you received HIF funding with partners or collaborators, please answer questions 8 and 9.

8. How and why did the partnership change during the course of the project?

Healthsites has established a closer relationship with the International Society for Infectious Diseases as part of the Mapping the Risk of International Disease Spread (MRIIDS) consortium.

The reason for this is primarily because we share an interest in a common use case. Accurate Health facility data is a critical component of immunisation campaigns.

9. Are there plans to continue your partnership, either while continuing this innovation or on other projects?

X Yes, with this innovation

- $\hfill\square$ Yes, with another project
- □ Maybe
- 🗆 No

Please describe further:

The relationship has strengthened to the point where we will be participating in a hackathon being held at the International Congress on Infectious Diseases in Buenos Aires in the March of 2018.

10. Please describe any steps taken to disseminate the outcomes of the project.

Please include all completed and forthcoming, as well as all planned and unplanned products (for example, research and policy reports, journal articles, video blogs, evaluations).

We have written a blog post, including audio webex, that covers the WHO presentation on the Humanitarian Innovation Fund blog.

A blog post describing the Senegalese health facility list will be written.

We are planning a series of workshops with the Group on Earth Observations, which is based in Geneva, where organisations will be invited to share data and participate in developing validations methods and further defining their open data policies.

A paper describing the project has been pre-selected for inclusion in the Springer Publication: UNESCO Chair Technologies for Development.

NEXT STEPS

11. Will the project, idea or innovation be replicated, carried forward or scaled up?

x Yes

🗆 No

□ Maybe

Please describe further:

Healthsites has been invited by Digital Square to submit a proposal for investment in existing digital health software tools to support progress against the Global Goods Maturity Model.

Healthsites has been included in a Data Collaborative to support SDGs on Health in the Democratic Republic of Congo. Together with the Belgian Development Agency we plan to take this work forward.

12. If the project or innovation could be carried forward, replicated or scaled up, please list the three most important issues or actions that will need to be considered (where 1 = most important and 3 = least important)

Suggestion/issue	1	2	3
1 Work with an organization that has a pre-existing and constructive relationship with the MoH and see the benefit of open data.	1		
2 Establish a Data Collaborative in support of an agreed use case that incentivizes the adoption of open data methods.	□ 3		
3	□ 2		
Identify metrics and feedback loops with partner organisations in an operational context.			