Coordinating Digital Transformation

Introduction, Methodology, and Replication Guide
Introduction

Digital health has become increasingly prominent at a global level. With guidelines from the World Health Organization (WHO), Classification of Digital Health Interventions, and the upcoming WHO strategy on global digital health, more countries, investors, and implementing partners are engaging on this topic. At the same time, greater emphasis is being placed on the importance of coordination in order to ensure effective, efficient, and impactful investments in digital health approaches and technologies.

New resources have been created to help guide coordination between stakeholders, including the Principles for Digital Development and the Principles of Donor Alignment for Digital Health. These documents put forth foundational tenets of coordination, including engaging with diverse experts; planning collaboration from the outset; documenting results, processes, and best practices; quantifying costs; and strengthening the technical capacity of donors, governments, and implementing partners. Similarly, these principles emphasize the need for government-led strategies—aligning investments and implementations with the national priorities defined by governments.

However, many stakeholders—donors, governments, and implementing partners alike—are searching for practical steps to enable coordination. These stakeholders have embraced the value of coordination, but many stumble on a legacy of segmentation, risk mitigation, and competition. Coordination requires greater levels of flexibility and trust, which in turn requires new processes and approaches in order to be successful. Such successful coordination is occurring around the world—and can provide the practical insights stakeholders are looking for.

Purpose of the Case Studies

The Coordinating Digital Transformation Case Study Series was created to provide practical strategies and best practices around coordination. These case studies are designed to highlight the enabling elements, approaches, and practices that led to successful coordination within the digital health sector. The case studies focus on success stories in order to provide best practices and inspiration for future coordination.

Developed to better understand how donors and governments can work together, each case study explores the conditions and mechanisms that enabled successful digital health coordination in a specific country. The case studies are informed by interviews with government officials, donor representatives, and technical experts at nongovernmental organizations.

The initial case studies focus on coordination in Ethiopia, Nepal, and Tanzania.

- **Ethiopia’s Information Revolution Roadmap**, published in April 2016, outlines focus interventions that will help achieve two pillars of the Information Revolution: (1) cultural transformation for health data use and (2) digitization and scale-up of priority health information systems. The Information Revolution Roadmap includes an action plan for achieving these pillars through activities that will strengthen data collection, data quality, and health workforce data analysis and use skills.

- **Nepal’s National e-Health Strategy** was launched in 2017, and outlines the use of electronic health solutions to strengthen Nepal’s health systems by improving the use of information and evidence in planning, managing, and supporting public health and clinical interventions. The Strategy also codifies important steps in the coordination of digital health stakeholders through the creation of a National e-Health Steering Committee and a plan to develop a prioritized e-Health Action Plan.
Tanzania’s Digital Health Investment Road Map which was established in 2016, has been lauded as a first-of-its-kind achievement in digital health because of its broad, system-wide approach and government-led development. This Investment Road Map outlines US$74 million in investments aimed at delivering systems-level improvements in five main areas: enhancing service delivery; strengthening health systems performance; optimizing resource allocation; improving data supply and demand; and connecting and harmonizing data systems.

Beyond these three initial case studies, there are many other excellent examples of coordination around the world. The case study development process and template were packaged for future use in order to encourage the documentation of best practices. The replication guide provides insights into how these case studies were made, and how this same methodology can be applied by others.

**Methodology**

The following methodology was used for the creation of the initial suite of case studies. In some instances, additional guidance is provided to allow for replication and adaptation by other stakeholders.

- **Selection of topics:** For each case study, a specific country was selected as the primary focus. These countries were selected based on donor interest, successful and/or ongoing collaboration, and existing relationships with stakeholders. Within each country, a specific, tangible output was identified in order to refine the scope of the case study. For the initial suite of case studies, the focus was on the production of a specific policy, guideline, or roadmap designed to guide the evolution of the country’s digital health sector.

  
  Topics of future case studies are not limited to a country-focused or policy-focused approach. Future case studies should strongly consider landscaping other forms of collaboration at the global, regional, and subnational levels. Other forms of coordination, such as funding mechanisms, working groups, system architecture, standards development, or other mechanisms that support overarching coordination in digital health should be considered for documentation.

- **Team composition:** Suggested team composition includes a team lead, writer(s), and researcher(s). Researchers should have the ability to conduct in-person interviews when possible. The writer(s) and researcher(s) can be the same individuals, though this is not required. The team may also include any consultants hired, and local or regional partner(s).

- **Desk research:** Desk research was used to supplement the interview process, both before interviews began and once interviews were concluded. Desk research was conducted by the writer(s), but may also be conducted by the researcher(s) as appropriate. Initial research focused on the chosen coordination mechanism. For the initial suite of case studies, the roadmap, guideline, or policy documents were identified and reviewed. Interview subjects were also asked to provide any additional documentation that could be helpful to the creation of the case study, which was used to supplement and verify the information gathered through the interview process.

- **Respondent selection:** Interview subjects should be identified from each of the stakeholders involved in the coordination process, including government, donors, and implementing partners. There is no set number of respondents. For the initial suite, between 6 and 12 respondents were interviewed for each case study. The following considerations should be used when selecting interview respondents:

  + **Expertise.** Respondents should be technically qualified. They should be familiar with the coordination mechanism or process.

  + **Representativeness.** Respondents should include a range of perspectives within an institution. For example, it may be helpful to speak with individuals with technical expertise and operational expertise from the same organization in order to fully understand how coordination occurred. Respondents should also represent all involved stakeholders, including different segments of the government; all involved donors; and any implementing partners.
+ **Availability.** Respondents should be available to respond quickly in order to limit the period of data collection.

Future case studies should ensure that respondents include representatives from multiple donor agencies in order to address the topic of donor-to-donor coordination. Representatives from donor agencies should include individuals working at multiple levels (i.e. national, regional, global) in order to identify layers of coordination activities within donor organizations.

+ **Iterative selection.** Researchers should ask the first set of respondents to recommend other individuals for additional interviews. This will help broaden the pool of respondents.

+ **Resource constraints.** The number of respondents and the period of data collection will be limited by the resources available to the case study team.

**Collection methods:** Data collection was conducted through in-person interviews, which used the interview questionnaire and guidelines. These interviews lasted approximately 1.5 hours. In some instances, multiple individuals were interviewed together, particularly when they represented the same stakeholder or perspective. Follow-up interviews were conducted with key stakeholders in order to address any gaps in data that were identified during the analysis and drafting stage.

**Analysis:** The writer(s) reviewed the interview responses to identify common themes, enabling factors, and gaps in the data. Each case study was considered independently, first to note unique characteristics of the specific coordination. The writing team then held discussions about common themes between case studies to inspire additional analysis and follow-up. The identified themes and gaps were used to guide follow-up interviews and further desk research.

There are other ways the data collection may occur, including by workshop or by written response. In the workshop approach, the case study team can introduce the topic and lead discussions based on the interview questionnaire. Written responses may be collected by sending the interview subjects the questionnaire. The case study team should evaluate the pros and cons of each of these approaches in order to determine the most appropriate methodology for the case study.

The focus of this analysis was the identification of best practices and enabling factors and was intended to lead to practical recommendations for a variety of stakeholders. It was not intended to be a deep, rigorous analysis of the coordination mechanism or to serve as a point of comparison between coordination mechanisms. With that core objective in mind, future case studies should consider the following approaches:

+ **Develop a systematic approach to analyzing the results.** Review the information and data, organize findings into several themes, and present key findings (e.g., areas of misalignment) and conclusions in an accessible format to allow for potential cross-country discussion.

+ **Use qualitative software (such as Atlas.ti or NVivo) to analyze the results.** This can be helpful but is not necessary; in most cases, it will not be possible or feasible (largely due to time or resource constraints).

Extensive quantitative analysis was not used for these case studies, but some descriptive statistics or simple tabulations/cross-tabulations can be helpful for identifying patterns in respondents’ answers to certain questions and for communicating results to stakeholders.
Timeline

We anticipate this process will take between one and three months to complete—from the identification of the case study topic to the finalization of the case study document. The process could take more or less time, depending on the approach and any modifications.

Modifying the tools

The tools provided can and should be modified in order to best align to the focus of each case study. Future case studies should consider:

- **Content:** The questionnaire was developed to gather information for country-level, policy-focused coordination. Other types of coordination mechanisms may require modification to the questions or structure of the interviews in order to collect the appropriate information.

- **Process:** As noted in the “Methodology” section, some case studies may benefit from data collection from a workshop or written responses, rather than in-person interviews. In addition, case study teams may choose to pursue more rigorous analysis of responses.

- **Language and culture:** Case study teams are encouraged to review and reword questions to suit culture and norms of respondents and to best represent the intended objective of each question.

Modifications of these tools should be documented and shared with the final case study in order to support the development of future case studies.

Case study structure

The coordination case studies are intended to be approximately five pages. The following outline provides the general information contained in each section of the case study.

<table>
<thead>
<tr>
<th>Section</th>
<th>Pages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1 paragraph</td>
</tr>
<tr>
<td>Provides a high-level overview of why the case study was developed and a brief overview of the methodology.</td>
<td></td>
</tr>
<tr>
<td>Background or context</td>
<td>½ to 1 page</td>
</tr>
<tr>
<td>Provides the context for coordination within the area of focus.</td>
<td></td>
</tr>
<tr>
<td>Detailed description of coordination mechanism</td>
<td>1 to 2 pages</td>
</tr>
<tr>
<td>Provides specific information about the focus of the case study and the coordination mechanisms.</td>
<td></td>
</tr>
<tr>
<td>Coordination process</td>
<td>1 to 2 pages</td>
</tr>
<tr>
<td>Provides the chronological process of coordination of all stakeholders.</td>
<td></td>
</tr>
<tr>
<td>Recommendations and takeaways</td>
<td>1 page</td>
</tr>
<tr>
<td>Provides concrete steps each stakeholder type can take to enable successful coordination.</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>5 pages</td>
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</tbody>
</table>
Notes on Terminology

The Coordinating Digital Transformation Case Study series utilizes the following definitions for commonly used terms.

» Digital health: Digital health is used throughout the case study series. In some instances, terms such as e-Health or information revolution are used to align with the language choice of a focus country. However, all these terms relate to "the use of digital technologies for health" as defined by the World Health Organization: "a broad umbrella term encompassing eHealth (which includes mHealth), as well as emerging areas, such as the use of advanced computing sciences in ‘big data’, genomics and artificial intelligence." (WHO guideline: recommendations on digital interventions for health system strengthening. 2019)

» Donor: The term donor is used in the case study series to refer to organizations that provide financial and other resources to countries and implementing partners. While donor may be interpreted to include organizations that provide grant funding, in this case study series the term is used more broadly to include organizations that provide resources through grants, contracts, loans, etc. Donor was chosen over other words such as investor or funder in order to align with the most common usage in the sector and other normative documents such as the Principles of Donor Alignment for Digital Health.

Interview Guidance

This guidance provides interview fundamentals and best practices for conducting interviews using the Interview Form. Following this guide will help ensure consistency across all case studies.

Before the interview

» Print and bring copies of the Interview Consent Form, the Interview Form, and the list of enabling factors to the interview. Respondents will be asked to consider a list of enabling factors, so they should be provided with a printed copy during the interview.

» Decide how you will take notes and be prepared with a back-up method should your computer or tape recorder fail.

» Consider identifying a notetaker who can accompany you to the interview to take notes on a laptop. Still bring a paper copy of the Interview Form with you so that you can note items you find especially interesting and want to ensure are captured.

» Review existing Coordinating Digital Transformation Case Studies. These case studies can provide examples of the information desired for each section and can guide probing questions during the interview.
At the start of the interview

» **Before asking any interview questions, review the Consent Form with the respondent** and have them sign the form. The form allows respondents to provide consent to be quoted as well as having their name listed as a respondent. They should feel free to choose what they are comfortable with.

» **Ensure you capture the respondent's full name and verify the spelling.** Have them verify their official title or the title they would like to be included in the list of respondents.

» **If you have chosen to record the interview**, ensure the respondent is comfortable with being recorded and have them provide verbal consent before asking questions.

» **If you choose to take handwritten notes**, ensure the interviewee’s name is on every page of the Interview Form.

» **Note the date and place** (city and country) of the interview.

» **Make note of any important considerations for the interview** in the “Other notes” section on the first page of the Interview Form (i.e., interviewing two people at once, interviewing over Skype with a poor connection, etc.).

» **Provide the interviewer with a summary of the case study's intent.** Be clear about how this interview will be used within the case study. Also provide some context about the interview itself, including duration and structure.

» **Inform the respondent that the research team may follow up with them** after the interview for any clarification or additional information. Record in the form their preferred method for follow-up questions.

During the interview

» **The questions are designed to uncover success factors for donor coordination.** If respondents begin listing challenges, ask how these challenges have been/will be overcome. Refocus the conversation on what has gone well.

» **Encourage respondents to explain their answers**, particularly when prioritizing the enabling factors.

» **Ask one question at a time** and allow them adequate time to answer before asking any follow-up questions or moving on to the next question.

» **If respondents have questions about any terms used**, make a note and ask them to define the term(s) in their own words or suggest what their interpretation is.

After the interview

» **Review your notes and fill in any missing details.** Add any final observations or comments.

» **If a notetaker took notes during the interview**, try to review the notes within 24 hours for completeness and so that you can fill in any additional details based on your memory and any written notes.

» **Coordinate with the research team** to provide interview notes and arrange any follow-up that may be needed.
References


# Interview Form

**Interviewer name:**

**Interview date:**

## Interviewee Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name</strong></td>
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<tr>
<td><strong>Title</strong></td>
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<tr>
<td><strong>Organization</strong></td>
<td></td>
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<tr>
<td><strong>Consent Form signed?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Preferred method for follow-up questions</strong></td>
<td>Email</td>
</tr>
<tr>
<td><strong>Preferred email address or phone number:</strong></td>
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</tr>
<tr>
<td><strong>Other notes</strong></td>
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</table>
Background

Today we are conducting an interview about donor and government coordination in the digital health sector in [insert country]. Donor-government coordination is defined broadly for the purposes of this research and encompasses collaboration on strategy and policies, pooling resources, and other deliberate efforts geared toward achieving a common goal. We have provided a Consent Form for you, which includes some additional information about these case studies and what we hope to learn from your participation. Do you have any questions before we begin?

Digital Health Coordination Details

Please describe [insert name of coordination mechanism].

- What health challenges does it aim to solve?
- What coordination challenges does it aim to solve?
- What has been the overall impact of this coordination to date?
- What is the anticipated long-term impact of this coordination?
### Role in Digital Health Coordination

“Describe your current role in <Insert name of coordination mechanism>. What ongoing responsibilities do you have to ensure its success?”

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### Coordination Process

**Overall:**

What were the steps/process that led to the establishment of the <Insert name of coordination mechanism>? Please provide a short description and list the steps in chronological order. These might include meetings, events, signed agreements, policies, etc.

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**Organizational:**

What steps did you/your organization take in the development of <Insert name of coordination mechanism>? These steps might be related to the process outlined in the previous question, but may also include steps your organization took internally.

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**Normative bodies:**

How was the World Health Organization or other global normative bodies involved in this process?
Enabling Factors

Please review the following list of factors. From this list, please select the five factors that had the greatest influence on the success of the *<insert name of coordination mechanism>*. These can be marked with a star. Then, please indicate any factors that were least relevant (factors that had neither a positive or negative influence) on the success of *<insert name of coordination mechanism>*. These can be marked with a check mark.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Factor</th>
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<tbody>
<tr>
<td></td>
<td>Strong political will at the national level</td>
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<td></td>
<td>Individual champions at the national level</td>
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<td></td>
<td>Current state of digital health infrastructure</td>
</tr>
<tr>
<td></td>
<td>Policy development related to digital health</td>
</tr>
<tr>
<td></td>
<td>Government-initiated priorities</td>
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<td></td>
<td>Technical capabilities for implementing digital health programs/systems</td>
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<td></td>
<td>Donor-initiated funding priorities/Alignment of donor priorities within the country</td>
</tr>
<tr>
<td></td>
<td>Donor coordination in other sectors in the country</td>
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<td></td>
<td>Donor coordination at the global level</td>
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<td></td>
<td>Donor policies related to coordination or transparency</td>
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<td></td>
<td>Historical donor engagement in the country</td>
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<td></td>
<td>Global-level health priorities or goals</td>
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<td></td>
<td>Influence of global or regional networks/communities of practice</td>
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<td></td>
<td>Influence of global normative bodies</td>
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<td></td>
<td>Existence of a health crisis or other emergency situation</td>
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<td>Advances in digital health technology</td>
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</table>
Enabling Factors (Continued)

For the factors with high influence on success, please explain how they influenced the coordination process and why their influence was significant.

Please explain why any factors were indicated as having low influence on the success of <insert name of coordination mechanism>.

Are there any factors not listed above that were critical or highly influential?
## Overcoming Challenges

**Problem-solving**

*How were problems resolved within the coordination process?*

<table>
<thead>
<tr>
<th>Unsuccessful activities</th>
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<tbody>
<tr>
<td><em>What activities or elements of this coordination mechanism did not work as intended and/or had unintended negative consequences?</em></td>
</tr>
</tbody>
</table>
## Lessons for Others

*Based on what you know now, is there anything you wish had been done differently when establishing* `<Insert name of coordination mechanism>`? 

*What are the three (3) most important steps a donor should take when approaching a similar digital health coordination mechanism?*

*What are the three (3) most important steps a ministry/government body should take when approaching a similar digital health coordination mechanism?*
Success Story

*Please describe one specific success story related to the* <Insert name of coordination mechanism>.
**Additional Questions**

*Who else should we include in our interviews?*

*What materials are available that can help us develop this case study?*

*Any concluding thoughts or questions?*
Interview Consent Form

Research Team: ORGANIZATION NAME

<table>
<thead>
<tr>
<th>Name</th>
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About the Coordinating Digital Transformation Case Study Series

This is a study about successful donor coordination and collaboration in accelerating digital health strategies, visions, and plans. We are asking you to participate because you are a representative of a donor, implementing partner, or government agency involved in the digital health sector in XXX country.

In this study, we are identifying enabling elements, approaches, and practices of donor coordination to accelerate digital health strategies, visions, and plans. Topics include:

+ Background information on the digital health landscape of the country.
+ The process of coordination between donors and government bodies.
+ Enabling factors of successful coordination.
+ Lessons for other donor and country stakeholders.

During the interview, you will be asked a series of questions about your experiences and knowledge on these topics.

We plan to interview 10 to 15 individuals for this study. You will have an opportunity to review the draft before it is published.

About the Interview

+ We may choose to tape-record the discussion so we can listen to it later and write down what was said. These recordings will be used to supplement interview notes and will not be shared beyond the research team.
+ We will take notes during the interview. Notes from the interview will be stored securely and will not be shared with individuals beyond the research team.
+ You do not have to be in the study. You can say “yes” or “no” or “stop the interview” at any time.
+ If there is a question you do not want to answer, you do not have to. You may also leave at any time.
+ We will share the study results with others. We will summarize our findings in a 5-page case study document, which will be shared widely.
+ We intend the interview to last approximately 1 to 2 hours.
+ There are no costs to you to be in the study and no compensation will be provided for your participation.
**Personal Information**

During this study, we will minimize the amount of personal information collected. This will include your name and your contact details (email, phone number), and your official title. Your name and title may be included in a list of interview subjects, and you may be quoted by name in the case study narrative. We will not share your contact information.

**Contact Information**

If you have questions about this study, please email [full name and email address].

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**Confirmation of Written Consent**

**Participant**

I give permission to have my name used in the case study with direct quotes. ☐ YES ☐ NO

I give permission to have my name listed in the list of interview subjects. ☐ YES ☐ NO

________________________________________

Printed name

____________________

Date

Signature of participant

**Member of research team**

Signing my name below means I have explained this research study to you and answered your questions to the best of my ability. I will give you a copy of this form to keep.

________________________________________

Signature of person obtaining consent

____________________

Date
**Digital Square** is a partnership of the world’s leading digital health experts from 40+ organizations working together with countries to strengthen digital health systems.

Digital Square offers a new way to invest in digital health—providing a space where countries and members of the global community can gather to think big and do good, together. By convening government officials, technological innovators, donor and implementation partners, and others across borders and boundaries in the Digital Square, we can grow possibility into reality by focusing on our common goal: connecting the world for better health.