

WHO-FIC Asia Pacific Network Meeting
November 5, 2008
Delhi, India

1. Introduction
2. Presentations
 - 2.1. Mortality Working Group (Wansa Paoin, Thailand)
 - 2.2. Morbidity Working Group (Syed Mohamed Aljunid, Malaysia)
 - 2.3. Health Information System Working Group (Chien Earn Lee, Singapore)
 - 2.4. Implementation Database (Robert Jakob, WHO Headquarters)
 - 2.5. Asia Pacific Network Website (Emiko Oikawa, Japan)
 - 2.6. ICF (Kazushi Yamauchi, Japan)
3. Reports from the Chairs
4. Discussion
5. Future Plans
- 5.1. Meetings
- 5.2. Work Plan
- 5.3. Co-Chair
6. Closing Speech
7. Member List

1. Introduction

Dr Shuto introduced himself as a Co-Chair of the meeting and Dr Sukil Kim as another Co-Chair and welcomed participants to the 3rd WHO-FIC Asia Pacific Network Meeting.

The Meeting was funded by the Japan Hospital Association and not much work could be done without cooperation of Dr Yamamoto, President of the Japan Hospital Association, and Dr Yamamoto was asked to give an opening speech.

Dr Yamamoto greeted participants, thanked the WHO staff for assisting organization of the meeting and wished a good progress of the ICD implementation. He announced that the 4th WHO-FIC Asia Pacific Network Meeting will be held in Hamamatsu in Japan on 14th and 15th of September 2009, and introduced various features of the area presenting PowerPoint slides.

2. Presentations

- 2.1. Mortality Working Group (Dr Wansa Paoin, Thailand)

Dr Sukil Kim introduced Dr Wansa Paoin, Chair of Mortality Working Group of WHO-FIC Asia Pacific Network.

Dr Wansa Paoin greeted the participants of the meeting and presented his activities in Thailand. He regards his Mortality Working Group placed at the intersection between the work of the Implementation Committee and the work of the WHO-FIC MRG. The objectives of his activities are to improve quality of mortality data among countries in the Asia Pacific Region, by standardizing application and implementation of the ICD-10. There are five functions: (1) try to identify and solve the problems regarding implementation of the ICD, (2) contribute to mechanism for international sharing of the knowledge on the status of mortality data, (3) try to develop method of

mortality data quality assessment, (4) try to gather the knowledge from the work group and make improvements in the mortality statistics quality, and (5) collaborate with the WHO-FIC Mortality Reference Group.

The working plan was set in 2007 and it was approved by the Ministry of Public Health in July this year, and therefore, the work actually started this year. His initial projects include coordination and improvement of the mortality data in four countries: Maldives, Myanmar, Laos and Cambodia, two in the SEARO region and another two in the WPRO region. His team visited the Maldives and initial assessment data is available now. The team will visit Myanmar in January 2009. Cambodia was replaced by Vietnam after he received an invitation from Vietnam for help.

His action plan is to visit four countries and to improve the mortality data by talking to key persons, conducting workshops and introducing tools.

Dr Wansa Paoin showed some data gathered in the Maldives where the international format of death certificate will be implemented in the next year.

Dr Wansa Paoin emphasized the need of sharing data, such as cause of death, and he set up the website for his Mortality Working Group, which is a Wikipedia site, where information can be browsed and edited. He asked for a link to his website to be put on the website of the WHO-FIC Asia Pacific Network.

Dr Shuto asked him how much budget he got from his government and what kind of collaboration he had with the WHO-FIC MRG.

Dr Wansa Paoin did not get much from the government except for traveling expenses. He had meeting the WHO-FIC MRG in July this year and is planning to go to France for assessment of software related to the mortality data.

Dr Ustun said it was a pleasant surprise for him to hear that the Wiki was setup in Thailand and said that the Wiki is useful not only for mortality but ICD revision and other areas as it is very efficient.

2.2. Morbidity Working Group (Syed Mohamed Aljunid, Malaysia)

Dr Sukil Kim introduced Dr Syed Mohamed Aljunid.

Activities of Dr Syed Mohamed Aljunid and his Morbidity Working Group include coded morbidity data for policy and decision making and are connected to the work of the WHO-FIC Morbidity Reference Group. His group also works on open source software for coding in hospitals, providing training center and workshop. His group was involved in implementation of the Case-Mix system in Indonesia, Mongolia and Malaysia, supported by his government and National University of Malaysia. He also works on distant learning program for coding and case-mix for developing countries.

A pilot project is conducted in fifteen major hospitals for implementation of the case-mix system. His team was asked to help the implementation of the case-mix system in Mongolia and they launched a pilot project in five major hospitals there. In Indonesia, Dr Soewarta Kosen and his group conducted a survey with morbidity and disability questions to 280,000 households.

Dr Syed Mohamed Aljunid said that to support his work he plans to set up a website and suggests regular meetings be held for the WHO-FIC Asia Pacific Network.

Mr Garry Waller asked if the ICD-10 was used for development of the case-mix system and training.

Dr Aljunid answered that he initially used INA-DRG (?) but currently he helps countries develop their own programs using open source software. For training of

coders he uses ICD although there are some differences between mortality and morbidity codes. For procedures he still uses ICD-9CM because ICD-10 has some problems with procedures.

Mr Garry Waller expressed his wish to have contact with Dr Aljunid to exchange information since the subject was of a great interest in Australia.

Dr Aljunid welcomed the idea and said he would expect to have contact.

Dr Ustun emphasized the importance of ICHI, saying that without ICHI the work of the Morbidity group is not complete. Due to the financial crisis, the WHO needs to determine by April next year whether or not the ICHI work should go ahead. He encouraged participants to start acting now to get resources.

Dr Sukil Kim added that countries could invite various organizations in each country to asking them to get involved in the work of the FDC as a way to solve the problem.

2.3. Health Information System Working Group (Chien Earn Lee, Singapore)

Dr Sukil Kim said Dr Chien Earn Lee was not able to attend the meeting but Dr. Yamauchi received an email from Dr Lee, and asked him to read the email.

Dr Chien Earn Lee wrote that he did not have much to report but he expressed his ideas for the workgroup of health information system (HIS)

2.4. Implementation Database (Robert Jakob, WHO Headquarters)

Dr Robert Jakob presented the Implementation Database using screenshots of the web pages. He explained in detail how to access the page and how to operate each page on the website.

Dr. Syed Mohammed Mursalin asked when the database was developed and how many countries gave their answers.

Dr Robert Jakob said that the database was created based on the information collected from various sources over a period time in the past. As far as questionnaire is concerned, some 20 to 30 countries answered all questions, some 110 to 120 countries answered the mortality questions, some 80 countries answered morbidity questions and some 20 to 30 countries answered other detailed questions. The access is limited with use of the password.

2.5. Asia Pacific Network Web Site (Emiko Oikawa, Japan)

Ms. Emiko Oikawa introduced the website of the WHO-FIC Asia Pacific Network. The current web address is still tentative and the final address will be given later when the domain address is fixed. She also gave an email address for inquiry.

2.6. Consideration of ICF (Kazushi Yamauchi, Japan)

Dr Kazushi Yamauchi said it was not a presentation but it is more like a proposal of discussion. Currently, the ICF is not a part of the Network but he suggested the ICF

Network should be established and if so, he asked, how each country should handle the ICF Network.

Mr Garry Waller suggested that mortality, morbidity and health information systems probably have priority for development and the ICF should be handled later.

Mr. Nenad Kostanjsek said the secretariat would welcome this proposal. The WHO-FIC Asia Pacific Network started with mortality and morbidity, while in Latin America or in France they started with the ICF and they are moving to the ICD. Depending on the availability of experts in the ICF and depending on the stages of each region, implementation of the ICF should be reviewed as it is done so with the ICD.

Dr Sukil Kim concluded the presentation session and turned the chair over to Dr Shuto.

3. Reports from the Chairs

Dr Shuto thanked participants for the work conducted in the last twelve months. He explained his experience in the recent years and discussed his idea about the way forward. He suggested we should interact with people of different fields to get different way of thinking. He also emphasized the importance of fostering the next generation and getting them involved in the activities of the Network.

4. Discussion

Dr Shuto introduced new members.

Mr. Anil Thapa from Nepal said the morbidity coding has been implemented based on the ICD-10 but the mortality coding has not. He asked the Network for support of establishment of the mortality coding system in Nepal.

Dr. Syed Mohammed Mursalin from Pakistan said that there were difficulties with the health information system due also to the size of the population in the country. It needs to be improved and requires cooperation and coordination from other countries. The meeting was, therefore, very useful as he was given the opportunity to talk with people to exchange information.

Mr Garry Waller attended the meeting on behalf of Australia and he said he would work more closely with the Network in future.

Dr Wansa Paoin said he was too busy to work as Co-Chair of the Mortality Working Group, working weekends as well.

Dr Ustun said that there is a limit to volunteerism and that we should try to raise resources.

5. Future Plans

5.1. Meetings

Dr Shuto confirmed the plan to have the 4th WHO-FIC Asia Pacific Network Meeting in Hamamatsu in Japan in September in 2009. To have the WHO-FIC Annual meeting some funding issues need to be solved and cooperation is required by anyone who can assist.

Dr. Soewarta Kosen showed interest in hosting the WHO-FIC Asia Pacific Network Meeting in 2010 in his country.

5.2. Work Plan

As Dr Ustun has pointed out, the work plan will be discussed later.

5.3. Co-Chair

Dr Shuto completed his two-year term of Co-Chair. Dr Kim has been Co-Chair for one year and he has another year before his term comes to the end.

Dr Kim said Dr Shuto should serve another term as long as the Network is funded by the JHA.

It was agreed that Dr Shuto would serve another two years as the Co-Chair.

Dr Shuto will confirm it after he gets approval from his senior official.

The JHA was appointed as the secretariat during the WHO-FIC Asia Pacific Network Meeting in Tunis and Dr Shuto asked the JHA whether or not the JHA agrees to continue to work as the secretariat of WHO-FIC Asia Pacific Network for another two years.

The JHA agreed.

Dr Wansa Paoin suggested that the minutes of meeting be created for this meeting. It is useful when applying proposals for approval to the government.

Dr Robert Jakob said that the minutes of meeting will be available in one or two months.

6. Closing Speech

Dr Shuto asked Dr Yamamoto to give a closing speech.

Dr Yamamoto said he was happy to see that the number of people participating in the meeting had increased since the Kyoto Meeting. He added that he would make preparations in Hamamatsu and welcome the members there.

Dr Shuto thanked Dr Ashok Kumar for coordinating the meeting.

Dr Ashok Kumar in turn thanked all participants for visiting India for the meeting and wished everyone a pleasant journey back home.

Dr Shuto asked Dr Yamaguchi to perform the customary ritual of closing the WHO-FIC Asia Pacific Network.

Dr Yamaguchi performed the three-hand-clap closing ritual and all participants joined it.

7. Participant List

Australia	Mr. Garry Waller
India	Dr. Ashok Kumar
Indonesia	Dr. Soewarta Kosen
Japan	Dr. Kenji Shuto
	Dr. Kazushi Yamauchi
	Ms. Emiko Oikawa
	Dr. Shuzo Yamamoto
	Dr. Toshio Oi
	Mr. Kazuhide Yamaguchi
Korea	Dr. Sukil Kim
Laos	Dr. Swady Kingeo
Malaysia	Dr. Syed Mohamed Aljunid
Nepal	Mr. Anil Thapa
Pakistan	Dr. Syed Mohammed Mursalin
Thailand	Dr. Wansa Paoin
	Ms. Maliwan Yuanyongsuwan
WHO	Dr. Tevfik Bedirhan Ustun
	Dr. Robert Jakob
	Mr. Nenad Kostanjsek
SEARO	Dr. Nirmal Kandel
	Dr. Sunil Senanayake