

TRIP 2 22 SEAMLESS AND CONTACTLESS Sharing data to accelerate the recovery

13 - 15 SEPTEMBER 2022

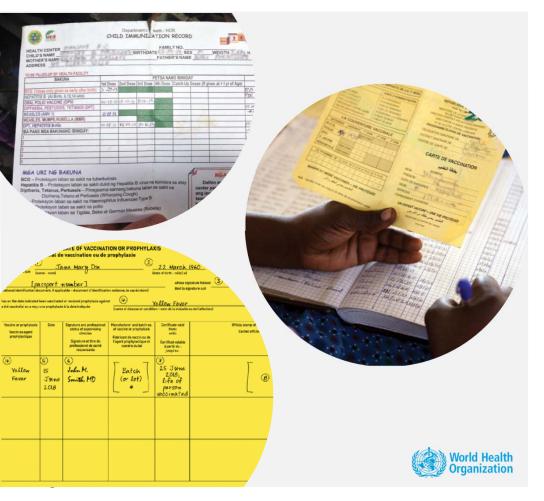
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World Health Organization (WHO)

Before COVID-19, individual immunization records have been implemented in a variety of ways in every country



- The international certificate of vaccination or prophylaxis for international travellers (i.e., yellow booklet) - bought from WHO with WHO logo or nationally branded
- Home-based records for routine childhood immunizations

... or, more often, something in between:

- Use of the "yellow booklet" for recording routine childhood immunizations
- vaccinations received as adults under the "other vaccinations" section
- Campaign specific certificates e.g., Ebola, Cholera, COVID-19
- Overall inconsistency in how this is done globally

Photos from: Practical guide for the design, use and promotion of home-based records in immunization programmes (who.int) Yellow Fever - Chapter 4 - 2020 Yellow Book | Travelers' Health | CDC

With the increased use of digital technologies globally, and the COVID-19 pandemic, there was a clear opportunity to adopt digital vaccination certificates

Direct benefits

- ✓ Can be easily distributed without the complications arising from supply chain issues of delivering paper forms
- ✓ More durable (physically paper can easily be damaged)
- ✓ Greater trust in the information available in a digital format (digital age) because it is more difficult to fraud and counterfeit

Indirect benefits

- ✓ Easily scalable to other use cases e.g., personal health records, diagnostic test certificates
- ✓ Strong foundation to building sustainable health information systems
- Greater access to information by public health authorities for decision making









World Health Organization

Photos from: WHO image library

However, there were key challenges in implementing international travel-related measures

- Lack of scientific evidence on virus characteristics or effectiveness/impact of PHSMs
- High uncertainty due to the emergence of new VOCs/new pathogens
- Varying levels of risk tolerance across countries
- Difficulties operationalizing the "precautionary approach"
- No international definition of "essential travel"
- No global trust architecture for digital COVID-19 certificates
- Highly multisectoral area both nationally and internationally – requiring an immense amount of coordination





Digital vaccination certificates do not exist in a vacuum, but work with and contribute to the larger ecosystem of immunization information systems



















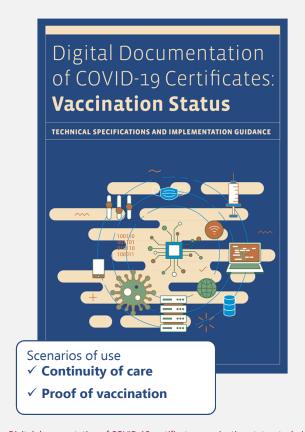
DDCC guidance documents have been published as a starting point with those considerations in mind

Requirements and specifications for technology implementers

- Business processes, workflows & use cases
- Core data elements mapped to standard terminology code sets (including an annexed spreadsheet)
- Functional and non-functional requirements
- Overview of signing a digital certificate with PKI
- HL7 FHIR Implementation Guide (linked website) detailing relevant standards for consistent representation and interoperability

Implementation considerations

- Data protection principles
- Ethical considerations
- · National governance considerations



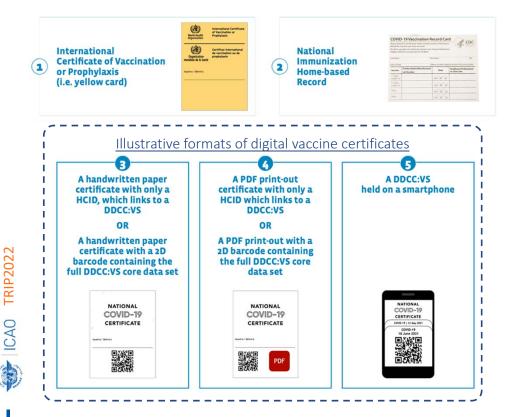


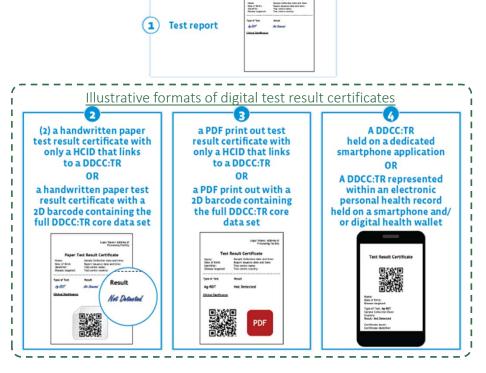


Digital documentation of COVID-19 certificates: vaccination status: technical specifications and implementation guidance, 27 August 2021 (who.int)

Digital documentation of COVID-19 certificates: test result: technical specifications and implementation guidance, 31 March 2022 (who.int)

DDCC specifications supports countries to adopt whichever modality best fits their context



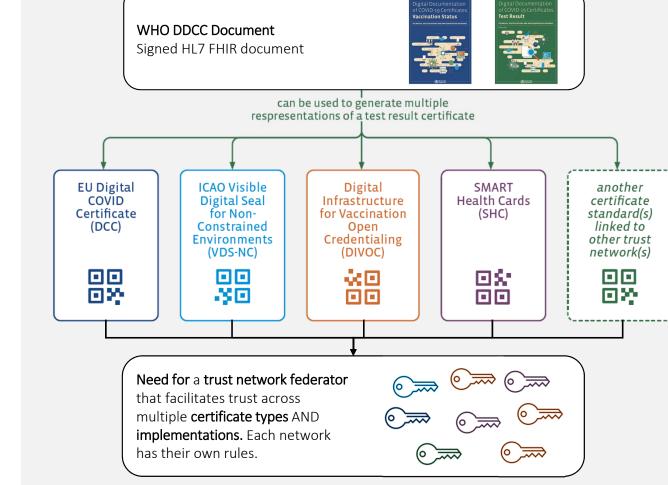


Light Market Address: Proceeding Tourist



DDCC is an "umbrella" specification

- Varying public health policies across countries based on their risk tolerance
 - Mutual recognition vs. Reissuance model
- Many existing digital standards that don't interoperate
- Establishing a new standard or central solution would not be viable at this point in the pandemic
- Investment in digital technologies is expensive – will need to architect for use cases beyond COVID-19
- Updating the IHR and digitizing the International Certificate of Vaccination or Prophylaxis ("yellow card") will take time
- There is a need for directory to federate across trust networks





Future directions of the DDCC - federated model of Interoperable Digital **Health Trust Networks**

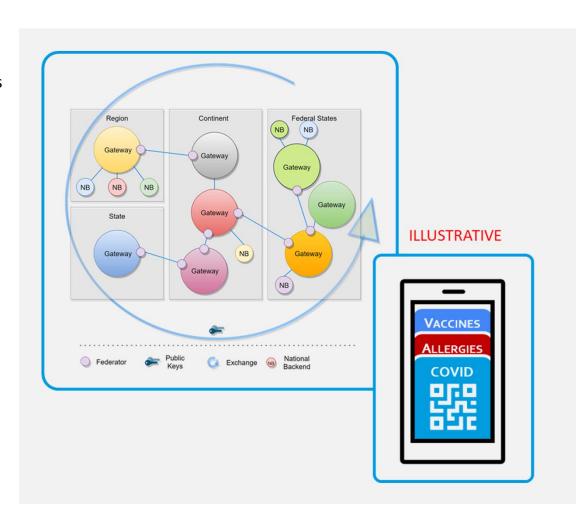
WHO is coordinating and consulting with member states, G20, OECD, GDHP to discuss a federated model of Interoperable Digital Health Trust Networks consisting of:

1. Directory of trusted services:

- PKI for any digitally signed health document
- Metadata services e.g. terminology, product list
- Business rules library e.g. is a given course of vaccinations considered valid?
- Credential & health document issuance
- 2. Federator to manage access between trust networks

Leveraging the HL7 FHIR (Fast Healthcare Interoperability Resources) IPS (International Patient Summary). Specific to COVID-19 first but working towards a portable digital health wallet.



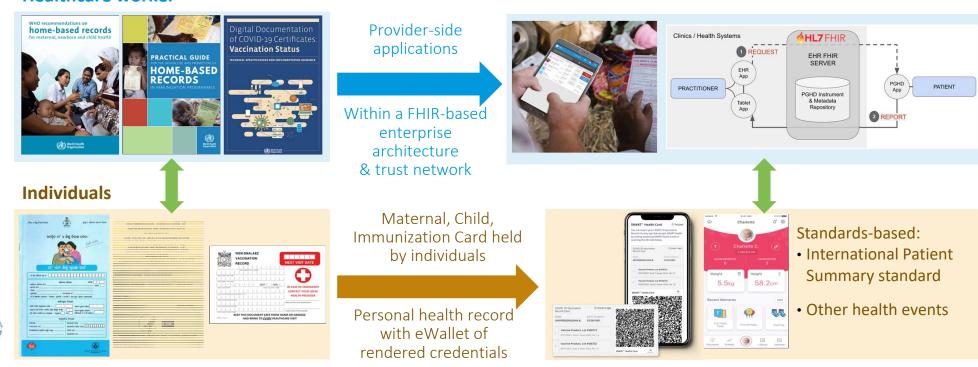


Digital personal health record - Leveraging the SMART Guidelines methodology to digitize and scale provider-side and client-side solutions

Healthcare worker

World Health Organization

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Trust networks beyond COVID-19

It is fundamentally about the right for an individual patient to have access and control over their own health information in the form of a personal health record, which can then be used for a variety of use cases where credentials are needed such as:

- ✓ The yellow card (IHR)
- ✓ International travel
- ✓ Reimbursements (UHC)
- ✓ Prescriptions







Text





Paths forward for international travel-related health measures

- ✓ Regular systematic reviews of evidence on both effectiveness and impact of PHSMs should continue to be conducted and used to inform future health emergency responses
- ✓ While technical guidance must be risk-based and context-specific, key principles should be respected throughout
 the decision-making process (i.e., evidence-informed decision-making, transparency, coordination, respect for
 human rights)
- "Essential travel" needs to be clearly defined to ensure that key operations are not disrupted during any health emergency (i.e., transport of essential personnel and goods, repatriations).
- ✓ Coordination should be enhanced at national and international levels to leverage from the experience and perspectives of different sectors; yet avoiding overlapping mandates.
- ✓ Consider the use of trust networks beyond COVID-19



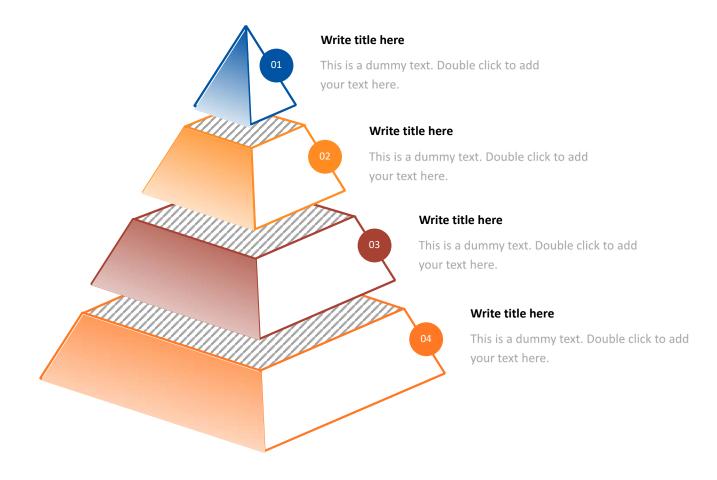


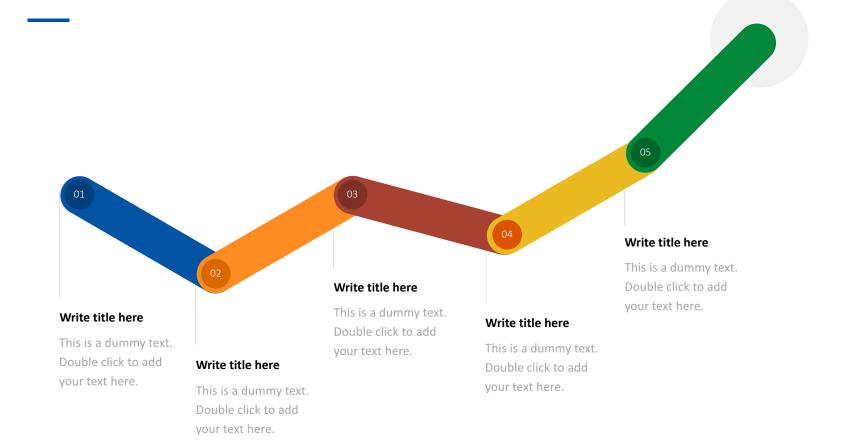


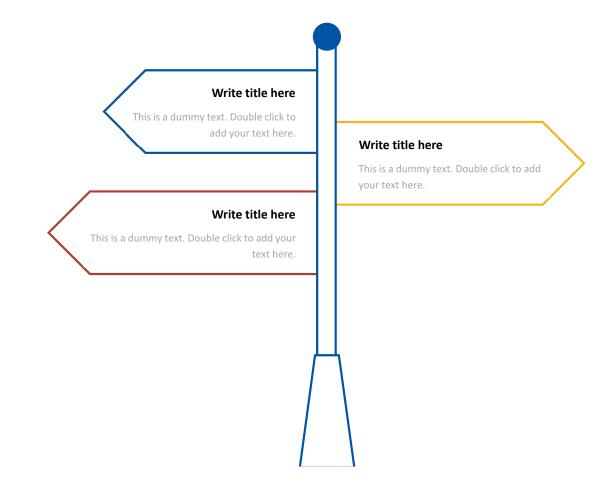












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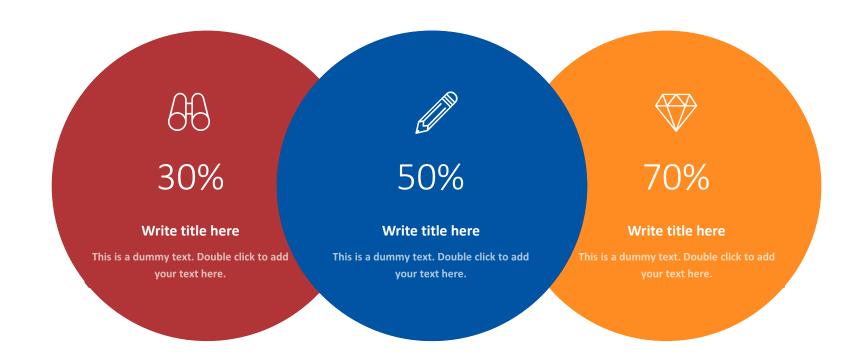
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