About Event

OpenHIE Community Meetings provide an opportunity for government officials, implementers, and tech developers to come together to connect and learn from each others shared experiences. This years meeting is being held in Ethiopia and has a theme around improving data use for decision making. The agenda will feature several tracks, including those specifically geared towards those new to OpenHIE, government leaders, and implementers. Additional tracks for developers will also be included to connect the community meeting with the Hackonnect-a-thon scheduled for the last day of the event. In addition to these pre-arranged sessions, the agenda will have several open “unconference” sessions where community members will propose presentations on topics relevant to their OpenHIE implementations.

OpenHIE events offer self-directed peer learning opportunities for everyone. Here are some of the exciting highlights!

- This is the first year for offering OpenHIE Academy courses providing a space for those unfamiliar with the OpenHIE Community, its conventions, and the benefits of data exchange. The goal of the Academy is for participants to leave with a strong working understanding of these topics.
- Country leadership has ample opportunity to present their experiences planning and implementing HIE architecture.
- Community leaders will share what OpenHIE has planned for the community and what the community can do for you.
- Implementers will have space to network with technical members of the community and work on technical solutions as well as proposing topics for participants to take a deeper dive into collaboratively.

Follow us on Twitter! Tweet using the #OHIE19 hashtag.

Objectives

- Opportunity for implementers to collaborate and improve their knowledge of OpenHIE
- Share user stories
- Propose new priorities
- Learn from each other about approaches to designing interoperable solutions
- Learn about governance frameworks that have been applied for health system information exchange

2019 Addis Ababa, Ethiopia

November 4-8, 2019 (OpenHIE Academy will run concurrent with event, details to follow)

Hyatt Regency Addis Ababa

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Who Should Attend & Why

- Ministry of Health and ICT Leaders who want to learn more about the governance structures around information exchange, architectures and data standards
- Experienced OpenHIE community members and ICT implementers who want to share their experiences and learn from others
- Developers of related health and healthcare application software who want to learn more about standards and system interoperability
- Anyone new to the OpenHIE community who wants to connect with others interested in health information exchange
- Anyone interested in learning about the community, health information architecture, deployment and maintenance of OpenHIE solutions

Conference Schedule

The theme for this year’s 2019 Community Meeting is data for decision making. The global public health community is driving interoperability in a rapidly changing context, including calls for sustainable universal health coverage (UHC), shifting burdens of disease from communicable to non-communicable diseases, and accelerating HIV/AIDS epidemic control. The objectives are to drive easier and safe data use in software products and interoperability workflows. All sessions at the Community Meeting are meant to be interactive, informative sessions to share best practices and lessons learnt.

Session Types

- **Conference**: These sessions are chosen by the organizers to highlight OpenHIE goals and achievements. Tracks include; Data Exchange, Implementation Experiences, Leadership & Governance

- **Unconference**: Community-defined topics that are chosen at the conference venue. This is crowd-sourcing to meet evolving the needs of attendees

- **Academy**: These sessions have defined learning objectives and end with a short quiz on the concepts. Attending several academy sessions results in a Certificate of Accomplishment.

- **Product Demos**: Solutions that align with the OpenHIE Architecture will be on display for attendees to explore.

- **Coding Club**: Participants can reserve a space to code with like minded colleagues

"Unconference" Session Details

The OpenHIE Community meeting agenda will have some preset sessions, much like you see at other conferences. But the agenda also has some "Unconference" sessions in which participants determine the agenda. At the OpenHIE Community Meeting, we want to be sure Community Members get what they need from the conference, so the flexible agenda will enable time and space for important discussions to occur. This innovative approach of "Unconferencing" has been applied at conferences in the technology sector (i.e. Google, OpenMRS) and has been very well received as an approach to customize a conference to meet the peer-to-peer learning goals of participants.

One the first day of the OpenHIE meeting, we will have an interactive session where participants can propose sessions they would like to see added to the agenda. Couple of principles behind unconference...

- **Whoever comes is the right person.** You should go to whatever topic is of interest to you and if you start out in one room and move to another that is fine.
- **Whatever happens is the only thing that could have.** Its the moment that surprise us that we grow so embrace the unexpected.
- **Whenever it starts is the right time.** Make sure people have made it into the room as creativity doesn’t have a clock so whenever it really "starts" will be the right time.
- **When it’s over, it’s over.** Just because a session is scheduled for 30-60 min doesn’t mean that we need to take the entire time, especially if we are done talking about what we came to talk about.
- **When it’s not over, it’s not over.** If a conversation isn’t finished thats fine. There will be other opportunities to connect at the meeting and after the fact during community calls.

Some Community Members are already proposing sessions using the wiki page table below, seeding ideas that are important ahead of the Community Meeting. During the interactive session, we’ll compile a list of all the sessions proposed and participants will vote on their top choices. Those with the most votes will be added to the “Unconference” sessions in the agenda of the meeting before the end of the first day. Please check https://ohie.org/ohie19 for updates to the agenda.

As mentioned above we are taking suggestions for proposed sessions ahead of the Community meeting so please share topics you want to hear about below to help with this process.

![The conference agenda is currently under construction, stay tuned here for more information.](https://ohie.org/ohie19)

Propose Conference Topics

<p>| Conference Session Proposals |</p>
<table>
<thead>
<tr>
<th>Topic</th>
<th>Brief Description of Proposed Session</th>
<th>Person Proposing Topic</th>
<th>Proposed Facilitator/ Speaker</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client registry, and advanced techniques for record linkage, and incorporating biometric identifiers</td>
<td>The client registry is an essential component of an HIE supporting functions for record linkage and care coordination. Key aspects for discussion include support for multiple identification methods, handling of privacy/security/confidentiality, developing a reference implementation. Tools for human adjudicated identity reconciliation.</td>
<td>James Kariuki</td>
<td>Shaun Grannis, Eric-Jan Manders</td>
<td>18</td>
</tr>
<tr>
<td>Patient Matching</td>
<td>Xing patients, need for sharing patient details vs. confidentiality</td>
<td></td>
<td>Ethiopia MoH</td>
<td>16</td>
</tr>
<tr>
<td>Aligning HIS to Epidemic Control</td>
<td>As countries approach HIV Epidemic Control and move towards the 95.95.95 objectives, their data needs vary depending on specific programmatic objectives. More and more, we see increasing needs for patient-level data to monitor patients through the treatment cascade. Single sourced data from Electronic Medical Records have also proven to be incomplete to tell the bigger picture. Data from service delivery systems, such as laboratory and logistics, are becoming essential to increase retention and tell a more complete story of a country’s HIV response. Data exchange and interoperability is now a required capability in our HIS eco-system. The data needs are changing both in variety and velocity. We are moving towards close-to real-time availability of patient-level as well as aggregate data to increase effectiveness as well as determine early course corrections and interventions. The indicators needed are also becoming more and more local and temporary to focus on specific programmatic activities. The analytics and visuals expected also require more predictive and prescriptive approaches using machine learning and advances in visualization. In general, we are now in a new era where data is integrated from multiple systems; indicators are local and temporary, and our analytics needs are moving predictive beyond the diagnostic paradigm.</td>
<td>Nega Gebreyesus</td>
<td>Nega Gebreyesus</td>
<td>15</td>
</tr>
<tr>
<td>National health data dictionary design and maturity roadmap</td>
<td></td>
<td>Jonathan Payne</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>Instant OpenHIE</td>
<td>What is it? How will it help me? What’s the MVP and the timeline?</td>
<td></td>
<td>Richard Stanley, Carl Latiner, Carl Fourie, Daniel Futsman</td>
<td>15</td>
</tr>
<tr>
<td>Playing with FHIR</td>
<td>Relationship between FHIR and OpenHIE. How does it work into workflows, standards and profiles. Implementers share where and why they have used it.</td>
<td>Carl Fourie, Christina White</td>
<td>Carl Fourie (panel: Shaun Grannis, Jeannine White and implementers with FHIR experience)</td>
<td>13</td>
</tr>
<tr>
<td>Record Locator Service</td>
<td>OpenHIE’s current architecture presumes a single identity. That assumption may be true for many HIE’s, but there are instances where you may see multiple organizations wanting to maintain their own client registry (CR) or master patient index (MPI). Sometimes different CR have different subsets of the population in them. As the world gets more advanced we’ll have to address the issue. In US we often have to link different CRs across different HIE’s. Host a discussion around this idea and get peoples reaction. Is this a real need for countries? Is this something countries are thinking about?</td>
<td>Jamie Thomas</td>
<td>Shaun Grannis</td>
<td>13</td>
</tr>
<tr>
<td>Facility Matching using GOFR as a Core Component of Interoperability: Liberia and PEPFAR/MOH Alignment Use Cases</td>
<td></td>
<td>Emily Nicholson, Jason Knueppel</td>
<td>12</td>
<td></td>
</tr>
</tbody>
</table>
OpenHIE v.2 (FHIR): Conformance testing

Our new v.2 of the OpenHIE architecture is focused on leveraging the emerging HL7 FHIR standard (OpenHIE v.FHIR).

- How will we conformance-test OpenHIE workflows that are expressed using the FHIR standard?
- What will be the impacts of FHIR’s architectural behaviour? It behaves differently from the underlying specifications we relied upon for OpenHIE v1? What are some of the ways our architectural patterns might need to evolve?
- Which strategies should we favour as we work to translate “normative” workflow descriptions into automated-testing platforms?
- How can such platforms be leveraged by country partners to conformance-test indigenous digital health solutions in support of national interoperability initiatives?

<table>
<thead>
<tr>
<th>Speakers</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Derek Ritz</td>
<td>11</td>
</tr>
<tr>
<td>Ryan Crichton</td>
<td>10</td>
</tr>
<tr>
<td>Daniel Futsan</td>
<td>9</td>
</tr>
<tr>
<td>Richard Stanley</td>
<td>8</td>
</tr>
<tr>
<td>Carl Fourie</td>
<td>7</td>
</tr>
</tbody>
</table>

OpenHIE for transmitting lab data

Christina White

OpenHIE and Lab interoperability

This session will involve a discussion of ways to enhance mHero with the FHIR standard, improve its interoperability with health information systems, and increase ease of deployment at national scale.

Emily Nicholson

From Zero to mHero: Enhancing mHero for Greater Interoperability and National Scale

Emily Nicholson

Setting terminology, exchange, and security standards for electronic disease surveillance for the African region

Africa Centres for Disease Control and Prevention (Africa CDC) was established in 2017 with authorities to harmonize disease control and prevention policies and surveillance systems and set standards for surveillance in Africa. Africa CDC embarked on an environmental scan to understand the extent of electronic information systems and technology in use for surveillance and the underlying information policies and standards that enable interoperability and continental data sharing and protection in Africa. Africa CDC also examined globally-available and relevant frameworks for electronic health data exchange and standards organizations and communities of practice that can be leveraged to set terminology, exchange, and security standards for electronic disease surveillance for the African region.

Africa CDC will present its findings to gather input and discuss next steps including establishment of Africa CDC Task Force for this purpose with the public health and information community at the OpenHIE Conference.

James Kariuki

Geospatial interoperability

How to exchange geospatial information between different tools, and how to deal with structures and locations that don’t fit into a facility registry or administrative hierarchy. Lessons learned from Digital Solutions for Malaria Elimination

Pierre Dane

Evaluation of HIE implementations

HIE implementation needs an evaluation framework and evaluation activities for existing implementations. Future donor funding will depend on demonstrating value from the implementation of a health information exchange. This session will focus on several questions including:

- How do we know or will we know that HIE is working and meeting the intended goals?
- How do we continuously improve HIE processes and capabilities?
- Are we getting the value of HIE implemented?
- What is the cost of implementing HIE?

James Kariuki

New OpenHIE Subcommunity around Laboratory Information System

Community input for defining the priorities of an effective, representative and sustainable Laboratory Information System community of practice.

Rita Sembajwe

OpenHIE “connection points” to other domains (e.g. SCM, health insurance)

Over the last year, the OpenHIE community of communities has grown to include complementary domains that operationalize key health system building blocks like supply chain, and health insurance. This session would look at:

- How (and where) do we establish the boundary of the HIE, how do we wire-fence the transaction sets that are part of health information exchange vs. those transactions that belong to a complementary domain?
- What content and coding standards do the HIE transactions need to abide in order to be able to “feed” complementary transactions? (e.g. what needs to be in place so that a child immunization transaction in the HIE can be turned into a vaccine consumption transaction in the SCM system?)
- Who exerts governance over these “cross-over” transactions... and what models might we explore regarding “shared governance”?

*NOTE... this high-level topic is related to other deep-dive topics already proposed

<table>
<thead>
<tr>
<th>Speakers</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Derek Ritz</td>
<td>7</td>
</tr>
<tr>
<td>Craig Apel</td>
<td>6</td>
</tr>
<tr>
<td>Jos Zamar</td>
<td>5</td>
</tr>
<tr>
<td>Uwe Washar</td>
<td>4</td>
</tr>
</tbody>
</table>

Case-based Surveillance

Case surveillance requires creation of patient-level longitudinal case records for a series of sentinel events by integrating data from multiple sources to measure and monitor incidence, progression and outcome of a disease. Meeting this goal enables MOHs and funding agencies to institute sustainable and cost-effective system to monitor trends of diseases, characterize affected populations, identify persons in need of care and treatment, and determine viral suppression and mortality over time and place and in subpopulations in order to assess public health impact, identify prevention strategies, and guide allocation of resources.

There is significant potential in leveraging health services delivery data for population health analytics, including case surveillance. As computerized health information systems are introduced across the health sector, population health data can be derived from health services data without separate, and thus resource-intensive, data collection tasks. Establishing a health information exchange based on an interoperability architecture further enables leveraging linked records.

The 2018 OpenHIE meeting session on case surveillance explored the implementation of HIV case surveillance as a use case to establish the minimum functionality needed in an HIE, and examples of several countries in planning stages of implementing HIV case surveillance from clinical information systems. For 2019, we will share progress and lessons learned from a demonstration implementation and updates from country activities who have HIV case surveillance in operation, and are in different stages of adopting HIE technologies.

James Kariuki

Foundation for an interoperability roadmap

In an effort to establish a set of priorities for a FR community roadmap, a brainstorming session will be held to gather input on:

- Support for FR development and implementation
- FR reference tools/applications
- Leveraging country specific solutions
- Emerging issues

*unconference session*

Rita Sembajwe

<table>
<thead>
<tr>
<th>Speakers</th>
<th>Number</th>
</tr>
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<tbody>
<tr>
<td>Martin Osomba Ritsamba</td>
<td>6</td>
</tr>
<tr>
<td>Emily Nicholson Richard Stanley</td>
<td>5</td>
</tr>
<tr>
<td>Eric-Jan Manders</td>
<td>4</td>
</tr>
<tr>
<td>James Kariuki</td>
<td>3</td>
</tr>
<tr>
<td>Ahmed Zaghloul</td>
<td>2</td>
</tr>
<tr>
<td>Teresa R. Zager, Steve H Yoon, Tadessa Wolh, Jay K. Varma</td>
<td>1</td>
</tr>
</tbody>
</table>
| Digital health “business case” development (CEA and CUA models that calculate DALYs-per-DOLLAR) | Derek Ritz  
(ecGroup) | 4 |
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>It can be challenging to make a <strong>business case</strong> for investments in digital health. In a low-resource environment, when should a Ministry of Health spend money on national digital health infrastructure instead of drilling more water wells or hiring more nurses? To answer these sometimes awkward (and inconvenient) questions, we need to be able to develop cost-effectiveness and cost-utility analyses (CEA and CUA, respectively). This session will introduce a spreadsheet-based tool that was workshopped at the 2017 AeHIN General Meeting in Nay Pyi Taw, Myanmar. It will describe econometric approaches that can be employed to show where and when digital health is the “right investment” for a health minister.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Using Patient Data for Indicator Reporting | Richard Stanley  
Jenny Thompson  
Carl Leitner | 4 |
| Secondary uses of patient-level data are critical for dynamically implementing programmatic and policy changes. Using a proposed global health data exchange standard, priority indicators can be created accurately, safely, reproducibly, and flexibly from transactional data. This session engages with the methodology, approaches to privacy and safety, and implementation best practices to create aggregate indicators for indicator reporting using patient-level data using proposed data exchange standards. | | |
| Hacking FHIR: Activities and Tasks: How to use FHIR resources in creative ways | Craig Appl  
Pierre Dane | 4 |
| How OpenSRP has implemented a generic tasking framework using FHIR resources in creative ways | | |
| Universal Health Coverage | Ethiopia JSI | 3 |
| What is the role of information architecture, standards and exchanges | | |
| Ethiopia Electronic Health Architecture and Interoperability | Mekelle University  
Ethiopia MoH / Data Use Partnership | 3 |
| Share Ethiopia’s eHealth architecture with participants | | |
| Implementing a national Terminology Service: The case of Ethiopia | Mekelle University  
Ethiopia MoH / Data Use Partnership | 3 |
| Implementing a national Terminology Service: The case of Ethiopia | | |
| Information Exchange for Improving Health Outcomes | Simon Peter Mkwangili | 3 |
| What challenges did countries have? How did they overcome those challenges? What are the countries future plans? | | |
| Supply Chain Overview | Craig Appl  
Josh Zamor | 2 |
| Get a peak into the Supply Chain subcommunity gain a better understanding of how they got set up as sub community, what’s been happening, point to resources and the future. | | |
| Planning for Performance and Scaling HIE | Ethiopia JSI | 2 |
| HIE Governance, finance, data sharing, regulatory and legal | | |
| Data Sharing Policy and Standardization | Jennifer E Shivers | 2 |
| OpenHIE Specification | | |
| What it is and how to navigate it | Muhamed Mahi SY | 2 |
| Biometrical Identification of beneficiaries | | |
| Computable Guidelines | Nat Ratanaprayul  
Garrett Mehl  
Carl Leitner | 2 |
| Discussion of feasibility of adoption WHO Computable Guidelines built on CDL and HL7 FHIR resources for improved accuracy of guideline adoption. | | |
| Strategies to Implementation | Ethiopia MoH | 1 |
| Monitoring and Measuring: UHC, quality of service, equity | | |
| Measurement Evaluation and Learning | | |
| • Existing frameworks and experience in measuring information exchange performance  
• Learning models  
• “Un-conference session” | | |
**Building Enterprise Architecture Models for effective Information exchange**

Here more on the Health Enterprise Architecture. How is the best way to develop EA.

Kaye Milton
Oswald Luoga

1

**OpenHIM, Health facility registry, and terminology services**

Jonathan Mpango

1

**Integration of Health IT infrastructure with other elements of eGovernme**

Steven Uggowitzer

1

**Interaction between UHC Information system and Hospital Information System**

Mohamed Mahi SY

1

**OpenHIM Training**

Have little training and would like to receive more. Potential Hackathon topic?

Mensur Dino
Daniel Futsman
Martin Brocker

1

**What practical arrangements in countries to implement national strategies for e-health?**

G. Aude-
Elvis
ODELOUI
Eunice PEDRO

1

**What approaches to solutions for setting standards and interoperability standards for information systems?**

G. Aude-
Elvis
ODELOUI
Eunice PEDRO

1

**How easy is data reporting, visualization and use for fast decision making?**

G. Aude-
Elvis
ODELOUI
Eunice PEDRO

1

**What technologies could facilitate connectivity and rapid data exchange within health systems?**

G. Aude-
Elvis
ODELOUI
Eunice PEDRO

1

**Using OpenHIE in a consolidate national data warehouse**

Casey iams-
Hauser

1

**Bahmni-OpenIMIS integration and OpenHIE**

Laxman Manandhar
Deopak Neupane

1

**Building on top of a Shared Health Record: open source tools for visualising patient level data**

Kondwani Kuthyula

1

**openIMIS: History, Initiative, Features, Roadmap**

Uwe Washer

1
Note Taking

While we plan to have assigned note takers for Community Meeting sessions we do strongly encourage those having ad hoc meetings to take virtual / collaborative notes and post them to this wiki page. Below are instruction on how to create an OpenHIE community ether pad and a table to keep your notes so you can easily find them later.

1. Go to [https://notes.ohie.org](https://notes.ohie.org)
2. Type in "YYYY-MM-DD Topic Title"
3. Hit "OK" and ether pad will create the page for you
4. Add the Topic and URL in the table below

<table>
<thead>
<tr>
<th>Topic</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
</table>

Academy

As a product of last years meeting OpenHIE is holding its first ever OpenHIE Academy. OpenHIE Academy courses include "up and running" and "advanced" courses. "Up and Running" courses have no prerequisites and are for all audiences, these courses will take place on Monday, 4 November. They provide participants with the essential history, concepts, and competencies to understand the role of OpenHIE as a health information exchange and how to utilize the architecture to enhance data for decision making at all levels of the health system. "Advanced" courses will be offered during general meeting days and on the last day of the conference, also know as Hackonnect-a-thon.

There will be no extra charge for OpenHIE Academy participation but space is limited so please make sure to indicate at registration if you plan to attend.
Hackonnect-a-thon

On Friday, 8 November OpenHIE will host a merger of two exciting types of meetings, what OpenHIE calls a Hackonnect-a-thon. This is a technical space for software teams and architects to engage and get their “hands-in” or “on” OpenHIE itself and see it materialised. Combining the principles of a connectathon and a hackathon we are excited to provide a space for teams to connect their existing tools to OpenHIE workflows and use-cases as well as give the community an opportunity to propose low hanging fruit use cases for the groups to work on. Recognising that many attendees may be new to OpenHIE there is no better way than actively engaging in designing, developing, configuring, implementing and connecting to an OpenHIE architecture to learn the fundamentals and build the relationships that you will need going forward.

There will be no extra charge for OpenHIE Hackonnect-a-thon participation but space is limited so please make sure to indicate at registration if you plan to attend.

Side Meetings

Some working groups have identified this event as a good opportunity to meet face-to-face and so below we have provided a space for groups to identify themselves so others may be aware and/or participate. Please provide a couple sentences describing around your event below. *Note this does not guarantee your group meeting space during the event.

<table>
<thead>
<tr>
<th>Meeting Type</th>
<th>Description</th>
<th>Date/Time</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Architecture Face-to-Face</td>
<td>Aligning OHIE Architecture Leads and establish a way forward:</td>
<td>Sunday, November 3 from 12-5pm EAT (will want to look at flight arrival times)</td>
<td>Jennifer E Shivers</td>
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<tr>
<td></td>
<td>• Refine shared understanding and common goals for the OpenHIE Architecture &amp; Standards community</td>
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<tr>
<td></td>
<td>• Determine how to best support country needs in moving forward</td>
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<td></td>
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<tr>
<td>OpenIMIS Developers Meeting</td>
<td></td>
<td>TBD</td>
<td>Uwe Wahser</td>
</tr>
</tbody>
</table>

Applying for Scholarship

The OpenHIE Community Meeting will bring together Ministry of Health and Ministry of ICT leaders, experienced OpenHIE community members, developers of related health application software, and anyone new to the OpenHIE community who wants to learn more during a 3 day Community Meeting, Academy course and/or Hackonnect-athon. The event will take place at the Addis Ababa Hyatt Regency in Ethiopia 4-8 November 2019, find more details around sessions and the agenda at [https://ohie.org/ohie19](https://ohie.org/ohie19).

There will be a limited number of scholarships available, providing travel support for participants of this event. Those chosen for a scholarship should be active, motivated members of the OpenHIE community. Scholarship recipients should be ready to come to the Community Meeting, bringing ideas, experiences and lessons learned to share with other participants.

*Please complete this form to apply for a Scholarship* to the OpenHIE Community Meeting by 30 August 2019. No late applications will be accepted. Recipients of scholarships will be notified by 16 September 2019.

Travel

**Visa**

There is an online visa application and approval process for entry to Ethiopia - [https://www.evisa.gov.et/#/conference-visa](https://www.evisa.gov.et/#/conference-visa). If you need an invitation letter please make sure to indicate this at registration. You will then receive the letter via email 24-48 hours after you complete and pay for your registration. Please note that refunds due to being denied a visa will only be honored if OpenHIE is notified of the denial no later than two weeks prior to the event start date. If you have any questions or concerns please contact Benti Ejeta - bent_ejeta@et.jsi.com.

**Vaccinations**

**Transport**

The #OHIE19 planning team will help transport to and from the airport to your hotel. To coordinate transport for people from and to Addis Ababa Bole International Airport (ADD) we will be asking for travel itineraries over the next couple of months via email. If you have already booked your travel please share your itinerary with Benti Ejeta - bent_ejeta@et.jsi.com.

**Accommodations**

To get the room rates indicated below at the Addis Ababa Hyatt Regency please book rooms at this special event link - [CLICK HERE](https://wwwn.cdc.gov/travel/destinations/traveler/none/ethiopia).

<table>
<thead>
<tr>
<th>Room</th>
<th>Single Rate (USD)</th>
<th>Double Rate (USD)</th>
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<tbody>
<tr>
<td>1 King Bed</td>
<td>170.00</td>
<td>190.00</td>
</tr>
<tr>
<td>1 King Bed Deluxe City View</td>
<td>220.00</td>
<td>240.00</td>
</tr>
<tr>
<td>1 King Bed Deluxe Courtyard View</td>
<td>230.00</td>
<td>250.00</td>
</tr>
<tr>
<td>2 Twin Beds</td>
<td>170.00</td>
<td>190.00</td>
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</tbody>
</table>

Other accommodations in the area Marriott Executive Apartments (1 min walk from Hyatt Regency). If you have any questions or concerns please contact Melat Argaw - melat_argaw@et.jsi.com.

**Event Sponsorship**

How can you help support OpenHIE events?

- Cash (logo placement, keynote)
- Pay for line item (logo placement)
- Pay for participation for individuals (at organizations discretion) or scholarships

If you are interested in assisting with the 2019 OpenHIE Community Meeting or future events please email support@ohie.org.