

CPHC Exemplar Series
Platforms to Enable
CPHC – CMED Health
as an Exemplar



Proceedings Report: CPHC Exemplar Series

Date: March 25, 2025: Time: 11:00 AM - 12:00 PM IST: Platform: Zoom

Hosted by: CPHC Alliance

1. Background & Objectives

The session, "Digital Platforms to Enable CPHC – CMED Health as an Exemplar," was designed to facilitate learning and promote best practices among partners by exploring the role of digital innovation in strengthening Comprehensive Primary Health Care (CPHC).

The session aimed to:

- Emphasize the role of digital innovation in enhancing healthcare delivery.
- Showcase scalable solutions for improved healthcare accessibility and efficiency.
- Discuss co-evolutionary strategies to ensure continuity of care through technology-enabled ecosystems.

2. Session Flow & Highlights

Welcome and Context Setting Speaker: Dr. Ramakrishna Prasad, Convener, CPHC Alliance

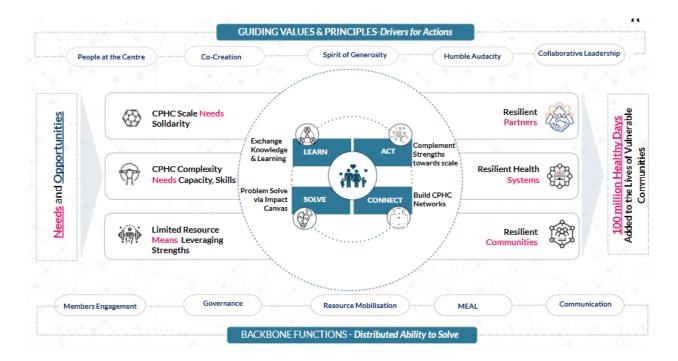
Dr. Prasad opened the session by situating the conversation within the broader objective of reimagining primary health care delivery in the digital era. He emphasized the importance of collaboration, systems thinking, and the need for transformative digital tools that are community-centric and equity-driven.

Presentation: Setting the Stage for Digital CPHC Speaker: Mr. Shankar AG, Director - Programmes

Mr. Shankar highlighted the growing burden of non-communicable diseases (NCDs), noting that over 60% of global deaths are now due to NCDs. He stressed that traditional models of care are inadequate for today's complex health challenges. Introducing the LACS Framework (Learn, Act, Connect, Solve), he offered a structured approach to address primary healthcare challenges through shared learning, policy engagement, and collective problem-solving.

LACS Framework (Learn, Act, Connect, Solve):A structured, collaborative methodology for improving CPHC by linking evidence, action, partnerships, and innovation.





Detailed presentation can be accessed from here: CPHC Deck

Key Messages:

- Ensuring continuity of care across the health system requires collaborative action.
- Bridges gap between patient centre care and population health management
- Focus on collaboration and co creation and continuous adaptation based on patients and providers
- A comprehensive healthcare ecosystem that will complement strengths of public, private, and non-profit sectors to achieve the goal of "Health for All."
- Al integration enhances efficiency, scalability, and patient outcomes by streamlining clinical workflows. Automating patient report uploads into Al-powered systems ensures seamless data integration and summarization, enabling physicians to review past diagnoses faster and focus on delivering better care.
- Prevention and early diagnosis remain critical in reducing disease burden.
- A major challenge in primary healthcare is the lack of follow-up, leading to gaps in continuity of care.

Presentation: CMED Health's Intelligent GP Model Speaker: Prof. Khondaker A. Mamun, Founder, CMED Health

Prof. Mamun presented CMED Health's Intelligent GP (iGP) Model, an Al-enabled digital platform designed to bridge the gap between patient-centered care and



population health management. His presentation provided a deep dive into how CMED integrates IoT devices, Al-powered diagnostics, electronic health records (EHRs), and telemedicine to create a continuum of care.

The iGP Model in a Nutshell: An AI-powered, end-to-end digital platform integrating screening, diagnosis, referrals, and monitoring across rural and urban settings, anchored in community-based delivery.

Highlights from Prof. Mamun's Presentation:

- Personalized health accounts enable longitudinal care for individuals.
- Al-enabled summarization of patient histories streamlines physician decision-making.
- Community health workers (CHWs) are key to monitoring, engagement, and referrals.
- Urban and Rural Customization:
- In urban areas, CMED deploys diagnostic centers with GPs.
- In rural areas, CHWs use mobile tools and dashboards to deliver decentralized services.
- Real-time data informs population-level planning and early warning.
- Public-private collaboration is essential to scale such models.

Proposed Solution: The Intelligent GP Model

- Establishing a personalized health account for every individual to ensure continuous preventive and promotive care
- Health workers play a crucial role in monitoring individuals and referring them to general practitioners as needed.
- Expanding screening programs from basic diseases to include cancer and other critical conditions.
- Integrating technology at every stage to enhance healthcare efficiency and scale.

3. Fireside Chat: Strengthening CPHC through Digital Platforms

In an engaging conversation moderated by Dr. Prasad, the discussion focused on:

- The need for co-creation in digital health platforms to ensure adaptability.
- Overcoming the last-mile challenge by building digital literacy and community trust.
- Addressing continuity of care gaps through technology and people-centered models.
- Ensuring interoperability between digital tools and public health infrastructure.
- Prof. Mamun emphasized that digital platforms must be:



- People-first and context-aware.
- o Backed by policy alignment and strategic partnerships.
- o Open to iteration and learning to adapt to changing health needs.

4. Key Learnings

- Digital innovations are only as powerful as the systems and people they work with.
- Building trust with frontline workers is critical for adoption and continuity.
- Smart data flow from individuals to policy dashboards can bridge service gaps.
- Technology must adapt to context not the other way around.

5. Next Steps Knowledge sharing:

The CPHC Alliance will continue to create spaces for dialogue and exchange on key areas of primary healthcare.

- **Piloting opportunities**: Participants are encouraged to explore partnerships for piloting the iGP model in different contexts.
- **Follow-up convenings:** A deeper dive workshop is being planned to explore governance, service delivery models, and system integration, building on previous discussions.
- **Community of Practice**: Interested organizations will be invited to join a learning collaborative focused on CPHC models.

6. Key Thrust Areas for CPHC:

Over the next year, our focus could be on:

- 1. **Strengthening Service Delivery**: Enhancing the integration of preventive, promotive, curative, rehabilitative and palliative care services at the primary healthcare level.
- 2. **Health Workforce** Capacity Building: Supporting frontline health workers (FLWs) through teamwork, training, technology, and policy advocacy.
- 3. **Climate and Health Linkages**: Addressing the impact of climate change on primary healthcare, especially in vulnerable populations.
- 4. **Data-Driven Policy Advocacy**: Leveraging health system data for informed decision-making and implementation improvements.
- 5. **Digital and AI Integration**: Exploring scalable digital interventions to improve access, efficiency, and health outcomes.



Snippets







For more information or to collaborate, please reach out to:

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Thank you for being part of this crucial conversation on reimagining primary health care through innovation.

Regards, CPHC Alliance Team

