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1 Trends

1.1 Health top concern now for Vietnamese: Nielsen

A survey recently released by market research firm Nielsen found 44 percent of respondents citing health as their key concern, followed by job security (42 percent) and work/life balance (22 percent).
Louise Hawley, managing director of Nielsen Vietnam, said: "Vietnamese consumers care about their health more than ever. Pollution in the air and in the environment is a hot topic increasingly top of mind for people."

Health would likely remain the top concern in the third quarter, she said.

Vietnamese consumers are not just worried about their health but are taking action to protect it. Vietnam was the country with the highest rate of people - 38 percent - saying their spare money goes to pay medical insurance premiums in Q2. It is followed by Switzerland (35 percent), Indonesia (35 percent) and China (33 percent).

Another concern was utility bills, which doubled from 6 percent in Q1 to 13 percent in Q2 when the government raised electricity tariffs by 8.36 percent in March after keeping it unchanged for two years.

Rising worries about utility bills make Vietnamese more reluctant to spend. Spending on new clothes fell by 9 percentage points from Q1, on gadgets by 8 percent and on holidays by 5 percent.

The Vietnam consumer confidence index score fell 6 points from Q1 to 123. The country fell from the third to fourth most optimistic country in the world behind India, the Philippines and Indonesia.

1.2 Vietnam among world’s fastest aging countries

Vietnam is facing challenges as it is one of the 10 fastest-aging countries, according to recent statistics.

It is forecast that it will take no more than two decades for Vietnam to raise the rate of people aged 65 and above to 14 percent from 7 percent.

Since 2007, the country has entered a golden population period that generates abundant workforce for 2010 – 2020 economic growth.

As of the late 2017, there were 11 million senior citizens nationwide, accounting for about 11.95 percent of the total population, roughly 2 million of them aged above 80.

Vietnam is predicted to enter aging population period by 2035 with some 21 million old people who make up 20 percent and 25 percent of the total population by 2038 and 2049, respectively.

Deputy Minister of Labour, Invalids and Social Affairs Nguyen Thi Ha said Vietnam’s average life span rose from 68.6 in 1999 to 73.2 in 2014, which is forecast to rise to 78 by 2030. Moreover, 70 percent of the elderly still work for a living.

Prof. Nguyen Dinh Cu from the National Economics University’s Institute for Population and Social Affairs suggested developing social welfare services and issuing public-private partnership mechanism in the field.
Nguyen Ngoc Quynh from the United Nations Population Fund said aging population offers opportunities to health care services designed for the elderly.

Meanwhile, chief of the Office of the Vietnam National Committee on Aging highlighted the need to create favourable conditions for old people to access credit for business./.

Source: https://en.vietnamplus.vn/vietnam-among-worlds-fastest-aging-countries/161485.vnp

### 1.3 Vietnam’s improving medical system attracts foreign patients

An Australian patient gets medical checks at a hospital in HCMC. Photo by VnExpress.

Many Vietnamese go abroad to seek medical treatment, but there is an increasing flow of patients in the opposite direction too.

Hong Luong, a 55-year-old Norwegian, has decided to have a tooth implant at the Saint Paul Dental Clinic in HCMC.

"I had one several years ago in Vietnam and choose to have another one now because the quality here isn’t any lower than abroad at all,” he told VnExpress International.

Luong said he has always trusted Vietnamese dentists’ expertise, and the most important reason for his choice is the low cost.

It costs tens of thousands of dollars to get an implant abroad, but a little more than a dozen million dong (VND1 million = $43) in Vietnam, he said.

Thuy, a Vietnamese-Australian, has had an eyebrow tattoo done in Vietnam. She said the cost is possibly 70 percent lower in Vietnam than elsewhere, but the quality is even better.

In recent years, thanks to solid quality and low costs, Vietnamese healthcare services have indeed become increasingly sought-after by international clients.
For instance, during the Lunar New Year, when many overseas Vietnamese visit their homeland, there is huge demand in HCMC for cosmetic and dental services.

Nguyen Hong Huy, the chief doctor of a chain of dental clinics in HCMC, told local media that every year around Christmas and the Lunar New Year, his clinics get 900-1,200 overseas Vietnamese and foreign clients.

Minister of Health Nguyen Thi Kim Tien said some major city hospitals with well-appointed rooms and renowned doctors such as Cho Ray Hospital and HCMC University of Medicine and Pharmacy Hospital get many foreigners working in Vietnam.

Earlier this year she told correspondents at a press conference that last year some 300,000 foreigners sought medical checks at Vietnamese hospitals and 57,000 were admitted, a 50 percent increase from five years earlier.

Foreign patients include overseas Vietnamese, Laotians and Cambodians besides people from countries like Singapore, Japan and South Korea who live and work in Vietnam. Many of them come for dentistry, cardiovascular treatment, plastic surgery, and infertility treatment.

Tien said this is a good sign for Vietnam to "lure back" overseas Vietnamese, foreigners who live and work in Vietnam, and Vietnamese patients going abroad for treatment.

Pham Xuan Dung, director of the HCMC Oncology Hospital, said last year 664 foreign nationals came to his hospital for checks and 1,225 were admitted for treatment. Most of them were from Cambodia, China, the U.S., the Philippines, and Australia.

Dr. Ta Thanh Lieu, deputy head of the hospital’s surgery department 1, said many Cambodians come to Vietnam because of its proximity, reasonable costs and good quality of medicine compared to other countries in the neighborhood.

Dr. Mai Ba Tien Dung, head of andrology at Binh Dan Hospital in HCMC, said that his department receives over 20 patients from Laos and Cambodia every week.

Some work in HCMC and seek treatment at Binh Dan partly because it offers certain services unavailable in their countries and partly because of Vietnamese doctors’ reputation, he said.

The average price in Asia for a check-up is $100-200 while at Binh Dan it only costs $5-10, he said.

For many Vietnamese-Americans, who decide to have plastic surgery here while visiting their home country, besides the lower costs, it also means much less time to get a doctor’s appointment compared to the U.S.

A spokesperson for a plastic surgery hospital in District 1, who asked to be anonymous, told a local media outlet that in the last three years the number of overseas Vietnamese coming to the hospital has doubled or even tripled.

And regular customers seek services up to three times a year, the representative said.

Besides the price and quality, another important factor is that plastic surgery in Vietnam offers more suitable looks for ethnic Southeast and East Asians, the representative said.

However, the picture is not all rosy. After getting emergency treatment, many foreign patients leave Vietnam to continue their treatment elsewhere. Dr Nguyen Huu Uoc, head of the cardiovascular and
thoracic department at Hanoi’s Viet Duc Hospital, said one major reason for this is that Vietnamese hospitals are yet to accept foreign health insurance.

Infrastructure is often inadequate and too overloaded to provide comprehensive services demanded by foreign patients, he added.

In case of surgery on a patient from a country without consular representation in Vietnam, doctors need a relative or some other representative to sign an approval, something that is often not possible.

Luong does admit that many people are still afraid to go to Vietnamese medical centers because of bad things they might have heard.

"[They] could be about the culture of having to bribe doctors and nurses to get things done or having to wait in long lines."

Some overseas Vietnamese said what makes them hesitate about using healthcare services in Vietnam are "the poor hygiene at local hospitals and the unwelcome attitude of the Vietnamese medical staff."

**Some first-class expertise**

In some areas, Vietnamese healthcare can even provide first-class quality. For instance, Dr. Ho Manh Tuong, secretary general of the HCMC Society for Reproductive Medicine, said in in vitro fertilization, Vietnamese doctors are among the best, matching Americans and surpassing Europeans.

Recently Hanoi’s K Hospital attracted attention after carrying out a complicated surgery to remove a cancerous tumor measuring 4 x 5 cm from a Japanese construction engineer who has been working in Vietnam for eight years.

Uoc, the most successful doctor in Vietnam in performing heart transplants and other complicated cardiovascular surgeries, has carried out challenging surgeries for some high-profile foreign patients.

One patient last year was Hsu Tse Sheng, a 73-year-old a billionaire from Taiwan, who suffered from a very serious thoracic aortic rupture during a visit to Vietnam.

The patient, who also has other complications, was only given a 10 percent chance of survival when he was hospitalized. After an extremely complicated four-hour surgery, Uoc and his team were able to save Hsu. In a gesture of gratitude, the billionaire donated $100,000 to Viet Duc Hospital.

As part of a master plan to upgrade health services, Tien said her ministry is building two more modern facilities at Hanoi’s Bach Mai Hospital and Viet Duc Hospital in the neighboring province of Ha Nam.

It is also continuing to invest in super-specialty centers in Hanoi, Hue and HCMC to ensure Vietnam acquires the latest technology to match regional standards in areas such as in vitro fertilization and organ transplant.

1.4 More Vietnamese young adults have Parkinson

Though Parkinson's Disease is a degenerative brain disorder that makes it difficult to stand, walk, and even speak clearly amongst elderly adult, it now occurs in people younger than 40 years of age in Vietnam. According to medical experts, 10 percent of Vietnamese people under 40 suffer the disease.

Statistically, around 85,000 Vietnamese people have Parkinson disease. The Ho Chi Minh City Medicine University Hospital's statistics has shown that nearly 27,000 Parkinson patients are under treatment from October, 2018.

Every month, about 500-600 Parkinson patients visit the infirmary.

Persistent body tremor is the most common symptom of Parkinson’s disease in the elderly. Sluggish movement, stiffness and challenges with balance are also indicators, as are hand cramps, shuffling, frozen facial expressions, muffled speech patterns, and depression.

Without proper treatment, Parkinson patient will be at risk of disability.

A case of study in the Ho Chi Minh City Medicine University Hospital. A 41 year old woman in District 12 regularly visit the hospital’s club for Parkinson patient taking part in the club’s activities.

She shared that she has suffered the disease at the age of 30 experiencing numbness and shaking, which usually begins in the hand or arm and is more likely to occur when the limb is relaxed and resting and slowness of movement.

She was diagnosed to have Parkinson. After five-year treatment, she underwent a brain operation. Now, she can walk but still take drug everyday.

Similarly, a 39 year old woman in the southern province of Dong Nai suffered tremor in her right hand, slowness of movement and loss of sense of smell two years ago. Local primary care physician made a diagnosis of Parkinson's disease and treated her with levodopa.
However, after one year, she suffered motor complications associated with long term levodopa treatment in Parkinson’s disease.

Later, physicians of the Ho Chi Minh City Medicine University Hospital gave her different drug after carefully examining her. Her condition is stable now.

Medical experts said Parkinson disease is a neurological disorder that occurs when certain neurons in the brain die or become impaired resulting in stiffness of the arms or legs and slowness of movement. Some cases of Parkinson’s disease are hereditary.

According to medical study, 2.5 hours of exercise each week can help slow Parkinson disease development as well as help control movement, sleep disorder and fatigue.

Parkinson's disease can't be cured, but medications can help control your symptoms, often dramatically.

Source: [https://sggpnews.org.vn/health/more-vietnamese-young-adults-have-parkinson-83898.html](https://sggpnews.org.vn/health/more-vietnamese-young-adults-have-parkinson-83898.html)

2 News

2.1 Two central hospitals awarded center of excellence for breastfeeding

HÀ NỘI — Đà Nẵng Hospital for Women and Children and Quang Nam General Hospital have been named as Center of Excellence for Breastfeeding.

The awards were given by Alive & Thirve – a global nutrition initiative – and the Đà Nẵng and Quảng Nam health departments.

The hospitals received the prize for their efforts in creating and maintaining breastfeeding-friendly environments for newborns and mothers.

“90 per cent of mothers exclusively breastfeed their babies during their hospital stay in the Đà Nẵng Hospital for Women and Children,” said director of the health ministry’s Maternal and Child Health Department Nguyễn Đức Vinh.

“I acknowledged the hospital’s enormous effort to achieve this especially by ensuring skin-to-skin contact between the mother and child for the first 90 minutes after birth.

“Quang Nam General Hospital deserved the designation, given their concerted efforts and dedication to following essential newborn care procedures among mothers and children, and supporting breastfeeding.”

At the Đà Nẵng Hospital, skin-to-skin contact is not exclusive to healthy babies, but also provided to preterm, underweight or sick children with jaundice, respiratory problems through Kangaroo Mother Care.

The hospital’s Deputy Director Nguyễn Sơn said: “Pre-term or underweight newborns that receive skin-to-skin contact for 20 hours a day from their mothers or relatives see a 40 per cent reduced mortality rate, 44 per cent reduced infection rate, 66 per cent reduced hypothermia rate, and 20 per cent increase in exclusive breastfeeding rates after hospitalisation.”
At the Quang Nam General Hospital, mothers can choose anyone to support them during birth, if desired. This companion can support the mothers to breathe properly, motivate the mothers, comfort them with backrubs and cloths, and guide them to change postures during labour.

“We believe a successful birth delivery goes beyond ensuring the safety of mothers and children to include a relatively pain- and stress-free experience for the mother as much as possible, and breastfeeding within 90 minutes after birth,” said Dr. Nguyen Thi Kieu Trinh, head of the Obstetrics Department.

“In addition to medical interventions, emotional and psychological support is crucial to achieving this.”

The aim of the A&T initiative is to prevent illness and ensure healthy growth and development through improved maternal nutrition, breastfeeding and complementary feeding practice.

A&T regional director, Roger Mathisen, said: “I strongly believe the Quang Nam Provincial General Hospital will serve as a role model for other health facilities in early essential newborn care and breastfeeding support. Their birth companion of choice model is a brilliant step toward ensuring a positive delivery experience for mothers.”

According to the World Health Organisation, babies that receive prolonged skin-to-skin contact are three times more likely to breastfeed during the first 90 minutes.

The statistics observed in the Da Nang Hospital for Women and Children in 2018 have reinforced this evidence: exclusive breastfeeding rates rose by three times thanks to 90 minutes of uninterrupted skin-to-skin contact.

Prolonged skin-to-skin contact without interruptions for immunisations or weight measurements also helped reduce neonatal mortality by 15 per cent, neonatal intensive care by 30 per cent and the need for antibiotics by 50 per cent.

In a survey conducted by the Ministry of Health with 3,500 mothers after birth, only 39 per cent had skin-to-skin contact for 90 minutes, and 30 per cent mothers could not breastfeed their newborns within 90 minutes after birth.

The Center of Excellence for Breastfeeding Initiative has been developed and implemented by Viet Nam’s Ministry of Health, provincial Departments of Health with support from Alive & Thrive and Irish Aid, encouraging health facilities to create and maintain breastfeeding-friendly environments by practicing early essential newborn care and supporting breastfeeding.

2.2 Public hospitals need more independence: NA deputies

The National Assembly’s Committee for Social Affairs continued its meeting on Thursday on the implementation of autonomy at public hospitals.

The committee’s chairwoman Nguyen Thuy Anh said that since late last year, the committee had set up inspection teams to monitor the implementation of the mechanism which was regulated in the NA’s resolution 10 years ago.

So far, inspection teams had carried out their work in 10 provinces and cities and received reports from other localities on the issues nationwide, Thuy Anh said.

After 10 years, the implementation of autonomy at public hospitals had seen some positive results.

At present, all public hospitals across the country have been given more independence, which helped raise the quality of healthcare services, increase the application of technology in diagnosis and treatment, and improved facilities.

The mechanism had also increased incomes of health workers.

However, the committee had found shortcomings during the implementation, including insufficient instructions for specialised hospitals at the grass-roots level.

There were shortages of controlling mechanisms, leading to unnecessary healthcare services which increased costs for patients as well as for the health insurance fund.

“The meeting today was an open forum with different parties, with an aim to publish all information to people and voters nationwide on the implementation of the mechanism at public hospitals and clarify difficulties, shortcomings and responsibilities of the Health Ministry,” said the chairwoman.

The deputies would also discuss solutions to improve healthcare services, she added.
Difficulties

In the report on the Health Ministry’s responsibilities delivered at the meeting, Minister of Health Nguyen Thi Kim Tien said that the independent mechanism for public hospitals had made great contributions to raise the quality of healthcare services and patients’ satisfaction, and reduce overloading at many hospitals in big cities and provinces.

The Cancer (K) Hospital, the Central Paediatrics Hospital and the National Hospital for Endocrinology had reduced the rate of shared patient beds to between 60 and 70 per cent, the minister said.

Thanks to the mechanism, index of patients’ satisfaction at public healthcare facilities was up to 1.96 in 2018 as compared to 1.92 in 2017.

Along with progress, the minister highlighted difficulties in the implementation of the mechanism, such as imbalance in infrastructure facilities, medical equipment and human resources among hospitals at central and grass-roots levels.

The mechanism allowed the hospitals to set up or dismantle their own organisations or departments.

This could lead to hospitals setting up departments to increase income while dismantling sections which were not profitable.

In fact, healthcare activities require the involvement of all departments in hospitals, said Tien.

The pricing of healthcare services had faced difficulties due to being regulated in many different legal documents.

Solutions

Deputy Nguyen Anh Tri affirmed that the mechanism was correct, but still contained many shortcomings.

Meanwhile, deputy Nguyen Ngoc Phuong said: “For years, the healthcare sector had gained achievements and the Health Ministry had been active in implementing the mechanism.”

“However, many public hospitals had not yet been given absolute independence in investing in facilities and recruiting health workers,” Phuong said.

He asked relevant ministries and sectors to clarify the issues and seek solutions.

Deputy Nguyen Thanh Xuan showed evidence that Cần Thơ City had 13 independent hospitals. But the committee’s inspection teams found that these entities still have to consult management agencies.

In response, Minister Tien said that the autonomy mechanism for public hospitals was indispensable and in line with the trend of public financial reform in the market economy.

“However, the implementation of the mechanism needs attention because the sector’s activities were directly related to people,” she said.

The Health Ministry would co-operate with other sectors to help hospitals gradually overcome the hurdles, she added.
At the meeting, representatives of the Ministry of Finance said they would draft and issue circulars guiding financial independence for district-level healthcare centres.

The ministry also recommended revisions on the Law on Health Care to encourage people to use services at clinics and hospitals at grass-roots level.


2.3 Local health stations set to be renovated

Phan Lê Thu Hằng, deputy general director of the Planning and Finance Department under the Ministry of Health

Phan Lê Thu Hằng, deputy general director of the Planning and Finance Department under the Ministry of Health, talks to Vietnamplus online newspaper about improving primary healthcare

What’s your evaluation of the communal health stations being piloted by the Ministry of Health (MoH)?

To meet the demand for developing the grassroots healthcare network, the sector is implementing a project to renovate the network nationwide.

Under the project, which has been approved by Prime Minister Nguyễn Xuân Phúc, the MoH has been piloting family medicals plans at 26 medical stations in eight provinces and cities.
The ministry has assessed the 26 stations with a view to expanding the model. The results show that infrastructure, human resources and management remain limited, and financial bottlenecks continue to be a problem. These are the obstacles that we need to overcome to implement this new service model.

**What measures will the MoH adopt in the future?**

Based on the evaluation of the pilot commune health stations (CHS), the MoH has developed a plan to upgrade the stations and invest in medical equipment such as that used for blood glucose tests. Regarding human resources, the ministry has set up training programmes at the 26 health stations that are to all staff. A management course has also been launched for the first time. The health sector has updated technical guidelines related to the provision of health services such as the management of non-communicable diseases at CHS and in the community. The MoH and health departments in the eight provinces are working hard with the health insurance agency to create favorable conditions for the payment of health insurance.

Once the infrastructure is upgraded, training has been carried out and health insurance payment issues have been resolved, we hope healthcare will be improved.

**Equipment and staff are vital to improving the effectiveness of disease management in the community. How does the MoH plan to deal with its investment in piloted stations?**

Technical systems are very important factors at CHS. The MoH and health departments are upgrading facilities at the 26 stations we are talking about. In addition to the deployment of new medical equipment, investment is also being poured into IT to ensure the availability of computers and internet connections at CHS.

**What solutions are being implemented by the MoH to strengthen the capacity of health stations?**

All staff are being trained in accordance with the principle of family medicine. Co-ordination between CHS and district levels will also be strengthened to ensure regular support for stations when needed. Provinces are also conducting specialised training courses for CHS staff.

**What challenges are facing CHS in terms of securing investment?**

There have been a number of difficulties relating to financing CHS. Firstly, investment for nearly 12,000 CHS would require huge funding. Secondly, some localities are yet to ensure expenditures for the stations. For example, some types of healthcare services do receive the necessary amount of funding, such as the management of non-communicable diseases. These are issues that need to be settled. To overcome these difficulties, the MoH is mobilising resources from loan and non-refundable projects to invest in CHS in disadvantaged areas.
The MoH is also working closely with the health insurance agency to solve problems involving payments and more services will gradually be added to the list of basic services covered by insurance.

With the adoption of solutions by the MoH, it is expected these financial difficulties will be resolved soon, contributing to improving capacity as well as quality of health services for the community. — VNS

Source: http://vietnamnews.vn/opinion/536138/local-health-stations-set-to-be-renovated.html#tGtPkevM0exBe4fc.99

2.4 Healthcare service stays muted for deaf people
In Vietnam, hospital processes are loaded against deaf and speech-impaired people.

A mother communicates with her deaf son as she takes him to a hospital in Hanoi for a health check.

After waiting in line for hours to meet a gynaecologist at a hospital in Hanoi, two hearing- and speech-impaired women finally met the doctor.

The three used hand signs to try and communicate with each other.

The meeting ended within a minute since the doctor and patients could not understand each other and there was no interpreter around.

"Hearing and speech-impaired people usually face a great disadvantage when getting health checks at hospitals," Lan Anh, one of the patients, later told VnExpress through an interpreter.
"The doctor asked us about our reproductive health, and we could not provide any information because we don’t have any knowledge in that field. When the doctor gives us a prescription, we don’t understand our condition, how to take the medicine, or how the treatment will go."

Deaf people have the same need for medical services as everyone else but in most cases hospitals do not provide them with any support, she said.

Many deaf people in Vietnam are illiterate and thus cannot communicate with doctors by exchanging notes.

In most cases, hospital staff call out patients’ names, and deaf people are at an obvious disadvantage.

At some places deaf patients are provided with an interpreter who is however not allowed to enter doctors’ consulting rooms.

VnExpress learned about a recent incident in which a speech- and hearing-impaired married couple, who asked not to be named, visited a hospital for a prenatal check for the wife.

The doctor did not allow the husband into the room.

Suddenly she ran out in panic after realizing that the doctor was about to perform an abortion on her.

Vu Huong Giang, an interpreter at the Hanoi Association of Sign language Interpreters, which provides services to deaf people, said she was once hired by a childless couple in Hanoi to inquire why they could not have children.

The sad story came to light when Giang visited the wife’s family.

Her parents had her uterus removed before she got married fearing she could not take care of children. Since the family was not rich, it could not afford to hire help either.

Giang said:"I can never forget the scene when that woman learned about her ovary. She kept screaming, ‘Why didn’t you tell me?’"

Vietnam has around 1.3 million deaf people.

"They all have difficulties accessing healthcare services, especially reproductive health services, due to communication barriers," Nguyen Duc Vinh, head of the Ministry of Health’s maternal and children health department, said recently.

"This situation makes deaf people vulnerable to isolation, abuse and discrimination."

Vietnam has just 10 qualified sign language interpreters, said Tran Xuan Nhi, chairman of the non-governmental organization Vietnam Association for Education for All.

Dr Phan Thi Thu Nga of the outpatient department at the National Hospital of Obstetrics and Gynecology in Hanoi said almost all hospitals have a social activity office to support those in difficult situations, and deaf people could seek help from the staff there.

Anh said, "What we need is specific guidance and respect when getting healthcare services."

She also wanted hospitals to have exclusive rooms for deaf people so that doctors know they require special services.
### 3 International cooperation

#### 3.1 Japan adopts new forms of assistance to Vietnam to suit the new situation

**NDO** – Of the fields of operation in Vietnam, Japan is interested in cooperation to support development not only for infrastructure systems and human resources, but also in agriculture, health care and environment. Although the ODA gives support by new forms of assistance to suit the new situation, Japan will provide the most effective and stable support for Vietnam.

The remark was made by Chief Representative of the Japan International Cooperation Agency (JICA) in Vietnam Konaka Tetsuo at a mid-term press conference in Hanoi on October 17.

According to the JICA official, Vietnam is maintaining an outstanding pace of growth in the context of drastic changes in the global political and economic situation.

He went on to say that Vietnam's macro-economic growth has been relatively stable since the beginning of this year.

The enactment of the Comprehensive and Progressive Agreement for Trans-Pacific Partnership (CPTPP) in early 2019 and the signing of the EU-Vietnam Free Trade Agreement (EVFTA) and the EU-Vietnam Investment Protection Agreement (EVIPA) in June 2019 have boosted Vietnam's integration into the global economy, he said.

Furthermore, the relations between Vietnam and Japan has continued to thrive over recent times thanks to visits and working sessions between the two countries’ senior officials as well as cooperation programmes and projects between localities, non-governmental organisations and universities, he added.

While evaluating the official development assistance (ODA) projects between Japan and the Vietnamese Government, Konaka said many new ODA projects on technical collaboration and non-refundable aid packages carried out by JICA have been signed and implemented smoothly.

He also mentioned the delay in some projects which were signed in 2018, and the slow disbursement of capital in underway projects, adding that the Vietnamese Government has been working to address these problems by improving relevant legal institutions and creating more favourable conditions for investors’ businesses to carry out projects.

He called on Vietnam to promote its pioneering role in global issues such as climate change, universal health coverage, and sustainable development goals.

JICA will continue implementing cooperation projects to address issues not only in Vietnam but also at the regional and international scale, in line with the Japanese Government’s free and open Indo-Pacific strategy and the high-quality infrastructure policy, he added.

3.2 Vietnamese doctors provide free health checks to Lao patients

HÀ NỘI — Heading north from HCM City, a van carrying the Vietnamese doctors arrived at the border gate with Cambodia.

But that was far from their final destination.

A Vietnamese doctor examines a Lao patient.

The doctors then continued their trip across Cambodia to the south of Laos, a 1000-km journey taking them to the border district of Tha Teng.

Their patients knew they were coming, and were eagerly awaiting their arrival.

A makeshift hospital was quickly set up in the middle of a factory owned by a Vietnamese company. Tables were lined up for registration, general diagnosis, ultrasound and other medical treatments that may be common to many, but rare to this particular group of patients.

Hundreds of Lao residents started flooding into the makeshift hospital.

Aided by health staff at the Tha Teng Medical Centre, the doctors got down to business.

The trip was the third in three for doctors of HCM City Young Doctors Association to Laos. Their destination this year was Tha Teng District in the Sekong Province which was adjacent to the central part of Viet Nam.

Tha Teng was a typical border community where farming was the main way of life for most of the residents.

The modern world seemed a million miles away, so too was healthcare.
Doctor Lê Hồng Tuân, head of District 2 Hospital’s Department of Cardiology, has been on all three volunteering trips. He recognised the similarity in the disease pattern between the Lao patients in remote areas and the Vietnamese back in the 80s.

“Poor nutrition and hard labour tend to leave them with bone and muscle pain, eye pain, dermatological diseases or intestinal and respiratory problems,” he said.

Methao Vifon, 70, lived some 25km away from the district centre where the makeshift hospital was set up. She woke up earlier at 5 am on the health check day and went with her son.

“I was very happy when heard Vietnamese doctors were coming over,” she said.

“They are very good doctors, their medicine work better than the herbs on the mountain.”

Another elderly patient, 76-year-old veteran Kham Biem, was thankful that he was examined by Vietnamese doctors. His only regret was that his wife could not come to the hospital.

“The local authorities said that only one person in each family can come so my wife let me go,” he said.

“I hope Vietnamese doctors come here several times so that Lao people can have more free health checks.”

The doctors were doing their very best to help the poor patients, but there were things beyond their capability.

A man drove his 77-year-old father on an agrimotor from their house which was 15km away. He was so weak he struggled to climb out of the vehicle.

Doctor Trần Quang Châu went to examine the old man, said revealed he suffered from diabetes and tuberculosis, which were worsened by poor nutrition that gradually eroded his health.

“We could not do anything for him but only suggesting his family take him to a hospital,” Châu said.

“It seems unfeasible though considering the family’s economic status.”

Doctor Diêu Hà Nam said many patients had very serious illnesses but could not find adequate healthcare services.

He said: “They were in so much pain but our time here was limited while the medicine and the medical equipment were not sufficient to cure their diseases. Looking at their eyes beaming with hope, I just couldn’t stop that sour feeling overwhelming my heart.”

Khuonmixay company director Nguyễn Văn Việt, one of the biggest sponsors for the charity trips, said that the lives of Lao people along the borderline were extremely difficult.

“They have very little chance to gain access to healthcare services. There are those to whom healthcare is not a priority as they can’t even have three meals a day let alone coming to the hospital,” Việt said.

Lao people were particularly fond of Vietnamese doctors whom they believed were very skillful, he added. It was also the reason why Việt decided to provide financial support to bring the doctors to Laos over the last three years.
“It is my company’s social responsibility to help Lao people approach the best possible medical services,” he said. — VNS

Source:  [http://vietnamnews.vn/society/536661/vietnamese-doctors-provide-free-health-checks-to-lao-patients.html#fpMzg6wYsEHb8yHs.99](http://vietnamnews.vn/society/536661/vietnamese-doctors-provide-free-health-checks-to-lao-patients.html#fpMzg6wYsEHb8yHs.99)

### 3.3 Generali Vietnam and OCB announce 15-year exclusive bancassurance partnership


Under the agreement, OCB will be the exclusive distributor of Generali Vietnam’s life and health insurance products to meet customers’ needs in healthcare, protection, savings and investment. Generali’s pre-eminent products such as VITA - Live Confidently; VITA - Golden Shield; VITA - Live Optimistically; VITA - Live Prosperously; and etc., will be distributed via OCB’s country-wide network and online channels.

Ms. Tina Nguyen - Generali Vietnam CEO said: "We have enjoyed and valued our partnership with OCB over the last two years and now look forward to building on our excellent business performance together under this new exclusive partnership. This strengthens our relationship even further and highlights our commitment to work together to develop customised solutions and products that will cater different OCB customer segments. This commitment is based on our mutual strengths in data analysis, digital capabilities and shared focus on customer centricity."
Mr. Nguyen Dinh Tung, CEO of OCB, said: "The exclusive partnership between OCB and Generali recognizes the increasing development and success of the bancassurance model in Vietnam to leverage and enhance the strengths of both sides, bringing mutual efficiency as well as benefits for customers. I hope this signing ceremony will be the foundation for OCB and Generali’s cooperation in developing and distributing high quality life insurance products to meet the needs of each customer segment and earn long-term trust from customers."

**Generali Group**

Generali is one of the largest global insurance and asset management providers from Italy. Established in 1831, Generali is present in over 50 countries, with total premium income exceeding EUR 66 billion in 2018. With nearly 71,000 employees serving 61 million customers globally, Generali has a leading position in Europe and an increasingly significant presence in Asia and Latin America.

**Generali Vietnam**

Generali Vietnam is a member of Generali Group. After 8 years of operation, Generali Vietnam currently has a nationwide network of over 60 GenCasa (agency offices) and customer service centers, serving approximately 200,000 clients including individuals and insured members of domestic and foreign businesses in Vietnam.


4 Digitalisation

4.1 Vietnam sets out roadmap to make hospitals smart

The Ministry of Health has unveiled a roadmap for digitising patients’ records at hospitals and setting up smart hospitals, a conference heard in HCM City on Wednesday.

Assoc Prof Dr Phạm Lê Tuấn, a former Deputy Minister of Health, said: “The smart hospital approach is an inevitable choice in Việt Nam to improve the quality of healthcare to achieve customer satisfaction and ensure security, safety and efficiency in hospital management.”

The fourth industrial revolution has been changing the face of the world and the lives of people in all fields in positive and promising ways, he said.

“Healthcare is therefore also greatly affected by the application of new techniques and technologies such as AI, expert systems, the internet of things, and big data to create information management systems and powerful applications that effectively support the management in medical as well as professional work”.

Many hospitals in the country have adopted health information technology systems such as electronic medical records, eHealth and telemedicine, he said.

A system to share data on treatment covered by health insurance between health facilities around the country has been set up, he said.

Health data is a valuable asset, especially for medical science, with its complex characteristics and increasing volumes, and so there is need for a plan and strategy to manage and exploit it, he added.
Nguyễn Thế Dũng, vice chairman of the Việt Nam Health Economics Association (VHEA), said globally digitisation has created great transformation in the healthcare industry, improving its quality and efficiency.

"AI, internet of things, big data, blockchain, cloud computing, and other digital technologies make hospitals smarter and smarter."

According to professor Võ Văn Tới, head of the School of Biomedical Engineering at the International University under the Việt Nam National University HCM City, telemedicine is an appropriate way to develop smart healthcare, especially for low- and middle-income countries.

His school has developed the internet of things for healthcare including point-of-care devices that patients can use at home or anywhere else to measure their vital signs, websites and apps to record and notify family members and physicians to assist the latter in monitoring and immediately taking care of the patient if necessary, servers to stores data, and software for connecting the above devices and persons and analysing data, he said.

A clinical trial of the system was funded by the Bình Dương Province Department of Health and a medical centre for public servants in the province.

The 1st International Health Informatics Conference Towards Smart Hospital was held by VHEA and the School of Industrial Management affiliated to the University of Technology, and provided an opportunity for hospital managers to discuss how to make their hospitals smarter.


### 4.2 Health ID to be issued for citizens
Each person will have a unique health ID.

HÀ NỘI — Each Vietnamese citizen will be issued with a unique health ID card, which they will be able to use throughout their lives, according to the Ministry of Health.

The ID will be automatically generated through the general identification system of the ministry and used to identify individuals for healthcare services.

Each ID will have a series of characters, of which the first ten are unique to the holder.

The numbers are based on basic personal information including name, year of birth and place of birth.

According to the regulation issued by the health ministry on creating, using and managing health IDs, each healthcare facility will have an account to access the national health identification system.

If the facilities are not connected with the system, healthcare staff must access the website of the national health identification system and search for the details of each patient.

The ID cards will be able to create and connect health reports for patients nationwide.

Healthcare facilities are responsible for managing the IDs and have to ensure the security of personal information and the national system.

The health identifications are managed through the national health identification system located at the healthcare data centre at the Information Technology Department under the health ministry.

The database of the national health identification system will be linked with the database of households signing up for the social security scheme. — VNS

Source: http://vietnamnews.vn/society/536122/health-id-to-be-issued-for-citizens.html#Wg1yXLw474DukPz6.99
4.3 Digitisation of healthcare sector, a double-edged sword

Digitisation of the healthcare sector is important to better serve patients, but hacking by cybercriminals is a grave risk, and great efforts are needed to keep patient information secure.

HCM CITY — The development of technologies such as 4G, 5G, internet of things and artificial intelligence has rapidly changed the healthcare sector’s landscape globally, including in Việt Nam, with more organisations adopting digitisation, according to experts.

The goal is to have multiple affiliated organisations sharing patients’ digitised medical records to provide more holistic healthcare.

Many healthcare institutions are also using smart equipment to carry out conventional tasks. For example, various devices measuring vital signs today are directly connected to the hospital’s systems. Once measurements are taken, the data is incorporated directly in the patient’s medical records without the need for manual intervention.

New technologies have enabled the healthcare industry to carry out remote operations. For instance, earlier this year, a surgeon in China successfully carried out an operation remotely. Digitisation across the healthcare industry has helped service providers improve the quality of care and accelerate medical breakthroughs for better patient outcomes and mitigate the rising cost of healthcare.

The Vietnamese Government is also supporting the digitalisation of healthcare, launching projects to encourage and enable digital health solutions to be adopted around the country.
According to the Ministry of Health, all healthcare establishments will complete digitisation of medical records by 2030.

According to the Australian Trade and Investment Commission (Austrade) Việt Nam, Việt Nam’s economic growth, health-conscious population and fast-developing 4G and 5G infrastructure provide the perfect environment for digital health solutions.

There is strong interest in telemedicine and advanced technologies and systems that can improve decision making, improve operational efficiency and enhance patient care and experience, it said.

Yeo Siang Tiong, general manager of Kaspersky Lab Southeast Asia, said most hospitals were in the first stage of digital transformation, digitising simple data such as patient records, personal information, past diagnosis, and medicine.

But the digitisation of the healthcare industry had led to a massive increase in the number of targeted attacks against the sector, he said.

“The healthcare sector tracks a person’s medical history, personal information, sometimes they also track who their parents are, and genetic conditions that pass down from parents to child. “Some of this information is actually worth more than a bank card.”

In addition, "the sector is less protected than sectors such as banking and finance," he said.

In the healthcare industry, cyber security should not be taken slightly because any issue could be a matter of “life and death,” he warned.

“What would happen when you need to treat a patient in an emergency room, but the information is suddenly not available. It is a life and death situation. It is actually very dangerous.”

At a recent conference on cybersecurity in the healthcare sector, experts said the consequences of a breach could be quite detrimental since healthcare records are highly personal and sensitive in nature.

If patients’ records were stolen, their private data could be traded on the dark web to be exploited by cybercriminals for scams and frauds, and worse still it could cause tremendous trauma to the patients, they said.

Yeo said to protect the healthcare industry from cybercrimes, it was very important to “raise security awareness not just among IT workers but also users of the equipment, doctors, nurses, and healthcare workers.”

"A lot of hospitals do not have chief security information officers," he said, suggesting that they should focus on developing human resources to ensure cyber security, he said.

The healthcare sector is a critical one, and therefore hospitals, public and private, should start drafting regulations to address the rising threats, according to Yeo. — VNS

4.4 Work on hi-tech healthcare complex starts in Hanoi
The first phase of a hi-tech healthcare complex, expected to cost more than 1 billion USD, kicked off in Hanoi’s outskirt Dong Anh district on October 14.

At the groundbreaking ceremony

Hanoi (VNA) – The first phase of a hi-tech healthcare complex, expected to cost more than 1 billion USD, kicked off in Hanoi’s outskirt Dong Anh district on October 14.

The 40ha complex, invested by TH Group, is divided into two stages with the first slated for completion in the second quarter of 2022, providing 300 beds.

The second stage is expected to be finished in 2025, raising the number of beds to 1,000.

The TH Medical complex will include five main areas that are an e-prevention centre, an international hospital, a wellness and rehabilitation centre, an international R&D centre and a geriatric centre and nursing home.

Addressing the groundbreaking ceremony, Chairman of the Hanoi People’s Committee Nguyen Duc Chung highlighted the significance of the project in improving healthcare services for local residents, pledging that the city will support the implementation of the project.

During the ceremony, the TH Group and TH Medical signed a cooperation agreement with Keio University and Keio Hospital of Japan on collaboration in the project’s management, operation and personnel exchange.

Statistics from the Ministry of Health revealed that healthcare spending accounts for approximately 7 percent of the country’s annual GDP. People’s spending on overseas medical treatment reached nearly 2 billion USD./.
4.5 Doctor Anywhere partners with ViettelPay, part of Vietnam's largest mobile network operator Viettel, to become the 1st telco and payment gateway to provide online healthcare services

HANOI, Vietnam, Oct. 21, 2019 /PRNewswire/ -- Doctor Anywhere (DA) and ViettelPay, part of Vietnam’s largest mobile carrier Viettel, have signed a strategic cooperation agreement to bring a full suite of online healthcare services to ViettelPay’s more than 6 million registered users throughout Vietnam. ViettelPay’s customers will be able to directly connect to Doctor Anywhere’s virtual clinic and consult a locally-registered doctor, as well as access a range of wellness services directly on the ViettelPay App. Payment for doctor consultation, medication, and other services can be made easily using the App.

With this partnership with Doctor Anywhere, ViettelPay’s users will soon be able to have direct access to online video-consult with a locally registered doctor, and shop on the DA health and wellness Marketplace - all payments processed through ViettelPay’s digital payment gateway.

This unprecedented agreement is set to expand ViettelPay’s reach and influence in the Vietnam market, as the first telco and payment gateway in Vietnam to be integrated with online healthcare services. It is also a significant boost to Vietnam’s healthcare ecosystem, as this partnership is set to make healthcare delivery even more seamless and convenient. With Viettel’s extensive network coverage throughout the country, this will mean that people who live in remote and rural locations will be able to access high quality healthcare on their phones, and make payment easily using ViettelPay’s payment gateway.
Mr. Pham Trung Kien, General Director of ViettelPay expressed his optimism in this partnership, "This cooperation between ViettelPay and Doctor Anywhere will greatly improve the distribution of reliable healthcare in Vietnam. ViettelPay's users can have direct access to a wide variety of healthcare services anytime, anywhere. All they need is a smartphone connected to the internet."

In a country of 96 million with a smartphone penetration rate of 84%, anyone with a smartphone can easily download the ViettelPay App and immediately access Doctor Anywhere’s services. This will help to ease the strain and improve efficiency of public healthcare in the country, and bring about better quality of care for the Vietnamese population. This service is slated to go live on ViettelPay App in early 2020.

Mr. Lim Wai Mun, Founder and CEO of Doctor Anywhere, stated: "We are excited to go forward with this partnership with ViettelPay to bring digital healthcare services to more people in Vietnam. I am confident that with this partnership, we can better achieve our vision of a more robust and sustainable healthcare ecosystem in the country and region."

**About Doctor Anywhere**

Doctor Anywhere is a regional tech-led healthcare company headquartered in Singapore. With a strong network of established healthcare providers and experienced doctors, Doctor Anywhere's digital platform enables users to manage their health easily and effectively through the Doctor Anywhere mobile App. Users can consult a doctor anytime, anywhere, and get medication delivered to them within 3 hours.

On the in-App Marketplace, users can shop for a wide range of health and wellness products and services such as nutritional supplements, beauty treatments, physiotherapy sessions, and even book home-based healthcare services - all in one place.

In Vietnam, Doctor Anywhere operates a chain of medical clinics and pharmacies in strategic locations to best meet the healthcare needs of the people.

**About ViettelPay**

ViettelPay is part of a vast digital ecosystem under Vietnam’s largest mobile network operator Viettel, that includes digital payment gateway, data services, insurance, and e-commerce. It currently serves more than 6 million users throughout Vietnam.

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