



mHealth solution for improved quality of RMNCH service delivery across the primary health care system

Dissemination of L10K's Learnings

April 27, 2022

Outline



- Background of mHealth in Ethiopia
- mHealth program objective
- Platform and alignment with other systems
- Phases and implementation
- Usage analysis
- Achievements and challenges
- Transition from mHealth to eCHIS

Background



- In Ethiopia mHealth solutions in the public health sector have contributed for reporting indicators as well as improvements in the delivery of quality health care
- The Ethiopian MOH has prioritized mobile technology as a potential solution to revitalize the Health Extension Program (HEP) within the Primary Health Care (PHC) system.
- Digitizing the health information system (HIS) and promoting data use are integral to achieving the Information Revolution pillar of Ethiopia's most recent Health Sector Transformation Plan (HSTP II).
- As part of the HIS digitization, the electronic CHIS (eCHIS) was launched in 2016 to digitize data flows from community level

L10K's mHealth Objectives and Strategies



Initial objective was to demonstrate innovative mobile solutions to improve PNC in the first 48 hours after birth

Objectives

- Improve timeliness and coverage of RMNCH services
- Improve quality & equity of RMNCH services
- Improve referral care for RMNCH services

Strategies

- Design the eCHIS in consultation with government and in line with eHealth architecture
- Design and test with HEW end users to ensure accurate content
- Phased roll out in target woredas
- Health area modules developed, tested and added over time for full coverage of health services

Alignment with the national mHealth initiatives



HEW Information and Communication needs

Referral system

Data Exchange

Supply Chain Mgmnt

Consultation

Training and Education

Designed mHealth Solution

- Pre-referral treatment
- HC referral app to receive and send referrals
- PHEM and other reports
- Information exchange between HEWs and supervisors
- Supervisory app
- Job aid
- Referral facilitation tool (HC-HEW)
- On- and off-site training
- System and tech support

Outputs

Defaulter Tracing

Report tracking

Devices (Smart phone, PV solar, PB)

Real time PM

225 HEWs and 135 Supervisors trained

mHealth development approach



- Landscape assessment for context-appropriate design
- Identified appropriate platform (CommCare) that is interoperable with other national digital systems and plans
- Engaged HEWs in design for end-user communications and information needs
- Test and iterate the mHealth solution
- Phased roll out in collaboration with MOH

mHealth application suites and development approach



Mobile Applications

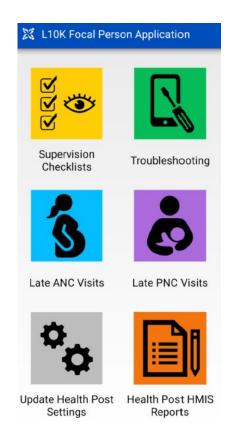
- 1. HEW App
- 2. HC referral App
- 3. Focal person App

mHealth Users

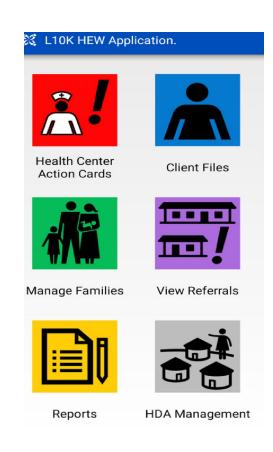
- Mobile app Users:
 - HEWs
 - Health Center workers
- Web-based Users:
 - Health administrators (Woreda Health Offices, Zonal and Regional Health Bureaus, and MOH)

Developing support within the system

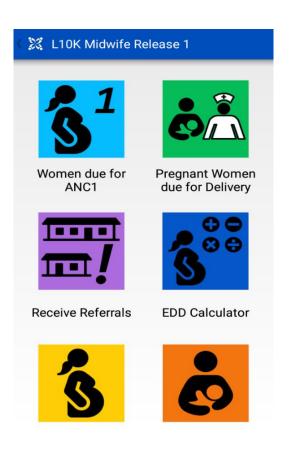












A focal person app was used to provide programmatic and technical support for HEWs

HEW helped HEWs to record, track clients and priorities services..

A HC app was designed to receive and send referral feedbacks for HEWs

eCHIS Development and Roll Out Phases



Release 1: 2017 ANC
Delivery PNC
modules

Piloted in 1 woreda SNNP (4HC, 19HPs and 35 HEWs) Release 2: 2018
Family planning
Nutrition EPI and
IDSR modules

Tested and implemented in 3 additional woredas in Amhara, Oromia and Tigray (18 HCs, 84 HPs, 159 Hews and total of 225 users)

Release 3: 2018

CBNC iCCM modules completed the development and was ready for testing

Release 4:

Hospital referral application (requirement gathered

Usability of mHealth solution: the end-user perspective

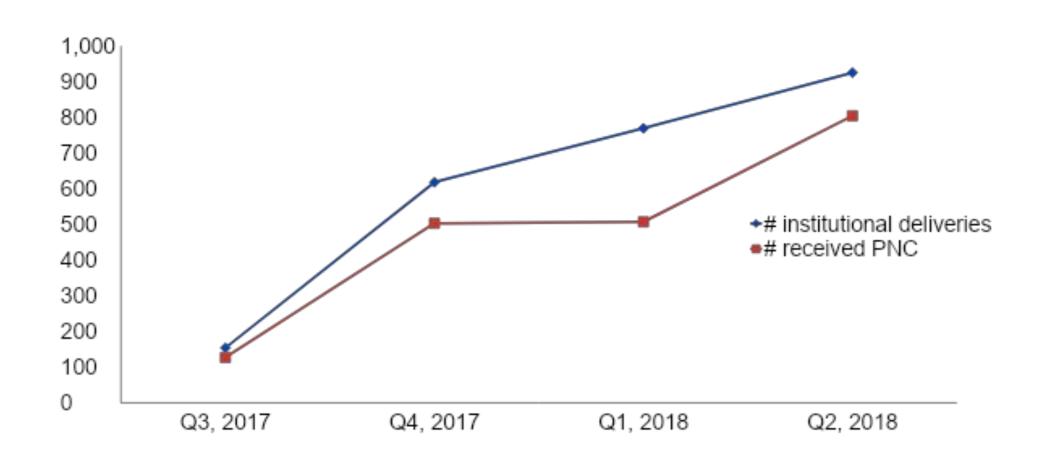


Process evaluation results after 2018 Release 2:

- Information from 20 HEWs, 8 midwives, and 6 focal persons
- HEWs preferred the electronic mHealth over the paper-based client tracking
- HEWs reported that the mHealth app was easy and enjoyable to use
- Users demonstrated how the app works
- Easily identify and trace defaulters and bring them back into care
- Identify pregnancy danger signs and complications, leading to more timely referrals
- Provided standardized care
- Users believed clients' adherence to the pregnancy continuum of care improved
- Improved interactions, linkages between facilities, and timely exchange of real-time information

Pregnancy registration and adherence to treatment protocols and continuity of care during mHealth solution roll-out in the mhealth woreda





Big Picture: L10K has supported mHealth has to evolve into the national eCHIS program



Demonstrate mHealth solution for early PNC Strengthen RMNCH quality delivery at PHCU and referral mHealth designed for the envisioned eCHIS

Fit with MOH's broader vision of leveraging ICT

Development of further modules

Health system capacity building (configuration of CommCare, server, training to staff

Lesson learned



- Use of mHealth offered a potential solution to improve timeliness and quality for RMNCH care services.
- Stakeholder engagement during design, developing, testing, and deploying the mHealth applications was critical.
- Ownership, ensuring skills and knowledge transfer at all levels is vital.
- Landscape assessment (resource + infrastructure)before design and deployment were critical.
- Frequent follow-up and support is important for performance improvement and quality of care.





Thank you!







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