



PROJECT SAVEMOM

Vaalaramkunnu, Wayanad
Paniya Tribal Community
Pregnant women : 7
Duration : 3 months
No of Visits : 3



SCOPE OF THE PILOT

To evaluate the efficiency and replicability of 'SaveMom' process working with Amrita SeRVe in 100 villages across India by implementing it for the pregnant women of Paniya tribal community in partnership with Amrita SeRVe.

OUR DELIVERABLES

- SaveMom Kit (devices and bag) - 1
- Nutrition and Vitamin Supplements following ANC recommendations (Every Month)
- SaveMom process which ensures a biweekly visit by CHW and 3 visits to hospitals for 'maternal and fetal assessments'.
- SaveMom Calendar for HealthCare Education.
- A training session by SaveMom team member.



OUR PROCESS

1. SIGNING MoU (29/07/2017)

We carefully examined the mission and structure of Amrita Serve and signed an MoU for the pilot at Vaalarmkunnu and for future collaboration with Amrita Serve.

A person wearing a blue jacket and holding a large black umbrella is walking away from the camera on a dirt path. The path is surrounded by dense green foliage and trees. The ground appears wet, suggesting it might be raining or has recently rained. The overall scene is a lush, green forest setting.

2. PREPARATORY VISIT (08/08/17 - 09/08/17)

*Read more about our experience here:
<http://tinyurl.com/preparatory-visit-savemom>*

2.1 What did we do?

- Identified Community Health Worker(CHW) – Mr. Hari
- Identified Remote Medical Officer – Dr. Uma Nair .
- Identified AmritaKripa as the local hospital apart from Government Medical Centers for emergency and regular care.
- Drs. Sanjeev and Ajitha were identified as the local medical officers who would assist our CHW.
- Introduced 'SaveMom' process to Amrita Serve's team.

2.1 What did we learn?

Pregnant Women

- There is a need for health education about Antenatal care but they did not know to read and write.
- Most of them do not have healthy food.
- Most of them haven't been to hospitals for Antenatal care.

Mobile Application

- Application should be available in regional language for CHW.

Savemom Kit

- Make a bag where all the devices can be placed for the CHW to carry with her during her home visit.

Savemom Process

- Make the process seamless to suit 8-16 visits which include biweekly house visits and 3 hospital visits before delivery.



2.IMPLEMENTATION VISIT (18/09/17 - 19/09/17)

*Read more about our experience here:
<http://tinyurl.com/implementation-visit-savemom>*



2.1 What did we do?

- Changed community healthcare worker from Mr. Hari to Mrs. SriKala as we believed it is better to have a female than a male in this project.
- Trained SriKala on app usage and on antenatal visits.
- Trained Dr. Uma Nair on the software and clarified her doubts.
- Accompanied CHW for 'ANC visits' and helped her execute 'SaveMom' care and go through process end to end.
- Introduced Nutritional and Vitamin supplements which was brought by Dr. Uma Nair.
- Interviewed local medical officer Dr. Ajithakumari to have an insight into local health care condition.

2.1 What did we learn?



Pregnant Women

- They need to be continuously reminded about Antenatal Care until it becomes a habit.
- Create a 'Good Habits Lesson' for pregnant women.

Mobile Application

- We need to still make changes to the UI & UX for the frontend facing CHW.
- Schedule next visits o Customise the purpose of the visit depending on the inputs from the remote doctor.
- Reminder her the rituals of every visit (measurements and nutrition reminders)
- Change the App's logic to suit WHO recommendations for pregnant women.
- Build algorithms that would extend the care to First 1000 days.
- We need to make changes in the registration process of pregnant women.





Savemom Kit

- Realised that the kit is too heavy to be carried around.
- Need to innovate to reduce the weight.



Savemom Process

- We will provide a biweekly visit to every pregnant women.
- There will be a mandatory 'Welcome Session' for every new batch of pregnant women where they would understand 'the mission of SaveMom', 'the importance of Antenatal Care' and 'their role in the SaveMom process'.
- Need to inform local government medical officers about SaveMom initiative in the region and our desire to network with them.
- Need to include in our process care for infants and toddlers during the First 1000 days.



Savemom Calendar

- Need to innovate on dates for the CHW to track the growth of the baby and mark the delivery date.
- Include pictures of fetal growth as stickers for pregnant women.

RESULT OF THE PILOT

- An understanding of the community's health status and the health condition of the pregnant women through an interview.
- Read More - <http://tinyurl.com/interview-drAjitha>
- Set a seamless process of Maternal Care based on WHO ANC and Childcare recommendations during the First 1000 days
- Built a network of multiple stakeholders for the successful execution of the SaveMom project
- Further Research to extend the care to First 1000 days.
- Added Nutritional interventions to SaveMom process.
- Realised a need to work with local government health care centers for better cooperation.

In 3 months...

1 SUCCESSFUL
DELIVERY AT
HOSPITAL

2 HIGH RISK
MOTHERS
IDENTIFIED

4 HOME BASED
ANTENATAL
CARE

Our Future Plan for Amrita Serve

108 VILLAGES
UNDER AMRITA
SERVE

1000+
PREGNANT WOMEN