

TWO DAY MEETING OF ACHAP AFYA STAFF FOR M-POWER TRAINING AT SILVER PALM HOTEL ON 16TH

AND 17TH JUNE 2021

Training facilitators

1. George Maina
2. Dr. Cyprian kamau
3. Mark Machira
4. Musa Abdalla

Training participants

1. Rose Odeny
2. Winnie Nyabenge
3. Maureen Kang'ethe
4. Emmanuel Masha
5. Rita Nabonwe
6. Risa Samba
7. Monica Namnaba
8. Juliet Kimatu
9. Jack Omondi

❖ M-power Training (Android based App)

Training Objective

1. To share with the ACHAP Afya project team on the CHAK M-POWER android application system overview.
2. To understand how the M-POWER APP can be integrated into some of the project's activities so as to enhance the outcomes (Defaulter tracing and Household visits and mapping activities)
3. To help the project team to come up with a blue print of project activities and flow charts/ flow diagrams with regards to CHAK M-POWER systems application for the management of defaulter tracing activities and Household visits and mapping.

Opening remarks

Was led by Rose welcomed who welcomed all the staff into the training. Opening Prayer led by Masha.

Introductions done by all participants present during the training

Expectations of the participants captured as below

- To be able to know how the CHAK M-POWER APP will help in implementing some of the project activities.
- To be able to know how the CHAK M-POWER works and to be able to use it as well.
- To know how APP works and how it can be integrated into the workings of the project activities for which it will be designed for at the community level.
- To know how CHAK MPOWER will help make the project works at the community better.
- To understand the CHAK M-POWER application in the context of the ACHAP AFYA project.
- To be able to see how the APP will help the project in managing the complete referrals for defaulters traced and linked to services.
- To know the elements of the projects that the CHAK M-Power will help solve

Key Notes/highlights from DR. Kamau

Brought the team up to speed with regards to what technology, innovation and discovery implies within the context of CHAK M-power.

Urged the team to think of the problems they would wish the APP to help achieve with regards to the project activities.

Helped the team to understand that the presentation for the current APP was programmed for NCDs and therefore the team to borrow from the same design so as to come up with the project tailor made one to help address some of project specific activities. *(Defaulter Tracing and Household Mapping)*

Urged the team to think of the flow charts for the activities that would help George in programming the M-POWER system.

CHAK M-POWER APP PRESENTATION BY GEORGE

CHAK M-POWER APP:

- Supported by both Android and Apple operating systems.
- Currently available in google Play store *(can be downloaded)*
- Current APP was initially developed for the NCDs programme and initially used to manage Hypertension clients.
- Took the team through the CHAK M-POWER Dashboard for NCDs Modules
- Asked the team to brainstorm on how they would want their dashboard to look like once the application is developed especially for the demographic data.
- Workflow to come from the team to enable George design the APP
- Data will be uploaded automatically over the internet connectivity.

Questions

Data access

- ❖ Access rights will be in place for the system users
- ❖ CHVs will be able to view their entries during the entry and after submission data will no longer be available for them to view.
- ❖

Other highlights

- ❖ Possibility of system being integrated to initiate short messaging reminders
- ❖ CHV desk to be fully implemented in order to support the utilization of the M-POWER app
- ❖ CHVs will be listed into the system for the purposes of linking them to their respective Villages
- ❖ MOH 100 be integrated into the CHAK M-POWER APP for the Healthcare workers to access it form the system and document their part as well.
- ❖ Classification of complete referrals as effective and non-effective
 - *For effective referral, services are fully received for which they were referred*
 - *For Non-effective referrals, clients reach facility but due to lack of commodities clients may be turned back and rebooked for another return date for services.*
- ❖

Project Activities for CHAK M- POWER integration

1. Defaulter Tracing/tracking
2. Household Mapping

Steps

Defaulter Tracking/Tracing

Indicators to be tracked listed as bellow:

- Immunization
- Vitamin A
- Deworming
- Growth monitoring
- ANC mothers

Process of Defaulter Tracing/Tracking

- Identification of the defaulter/line listing
- Tracking of the defaulters/HH visits by the CHVs
- Outcome of the defaulter tracked
- Action taken on the defaulter

WORKFLOW

Defaulter Identification

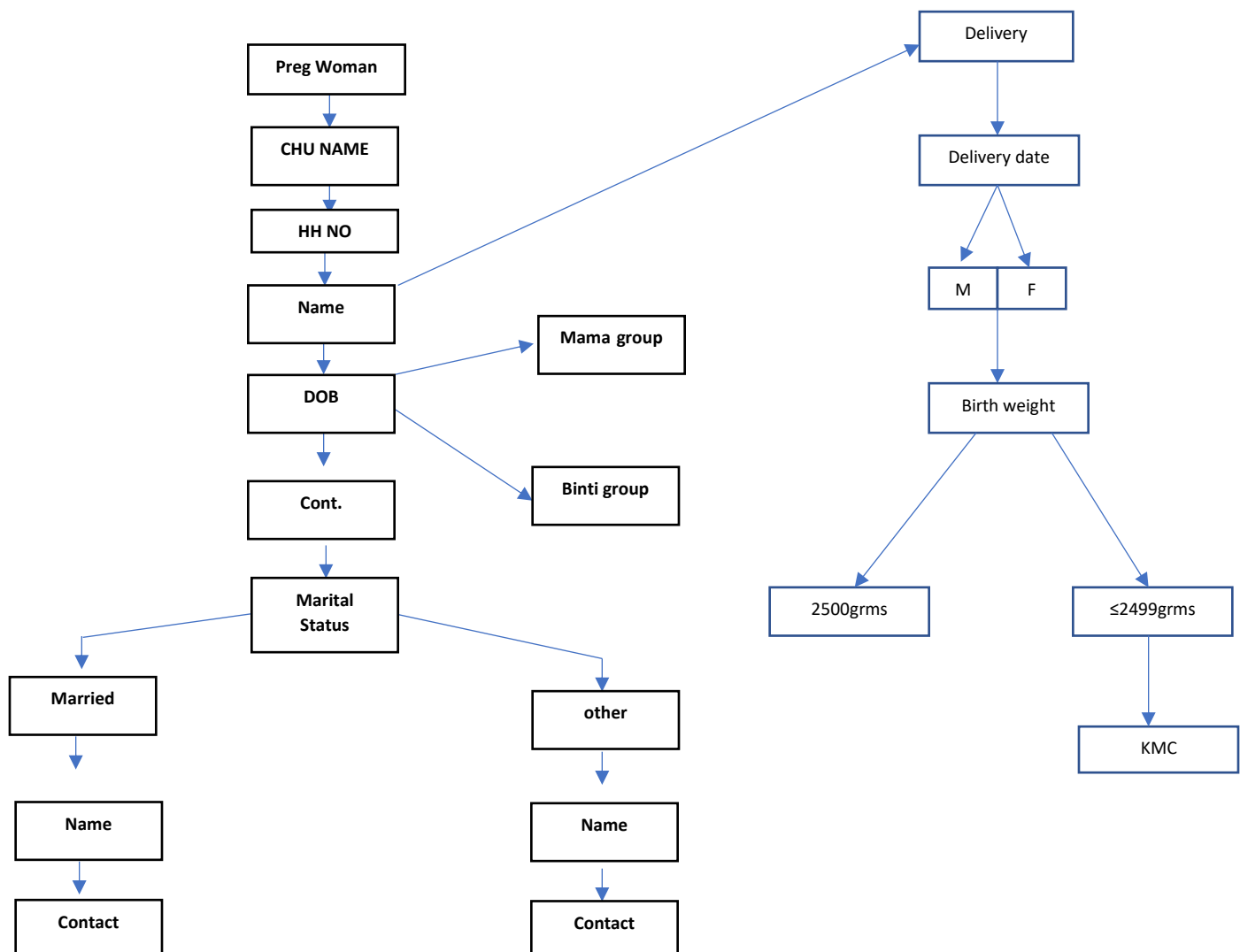
Defaulter list immunization:

- Unique ID (*for instance VSK01/2021*) for Vishakani Dispensary

- Name
- Date of Birth
- Sex
- Date missed
- Service missed:
 1. ANC
 2. Immunization
 3. Vitamin A
 4. Deworming
 5. Growth Monitoring (Mother Child Booklet) up to 2 years

Sample list of defaulters by service

NAME	VILLAGE	P/G	CONTACT	SERVICE
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HOUSEHOLD MAPPING

Focus areas

- ❖ Pregnant Women
- ❖ Newborns
- ❖ PNC mothers
- ❖ Malnourished
- ❖ All <1yr
 - 0-23

Target population

	Reportable data elements
Pregnant women Support groups <ul style="list-style-type: none">❖ Mama groups❖ Binti groups	<ul style="list-style-type: none">❖ ANC❖ Male involvement
Newborn 0-28 days <ul style="list-style-type: none">❖ Birth Weight	<ul style="list-style-type: none">❖ KMC
PNC <ul style="list-style-type: none">❖ Referrals	<ul style="list-style-type: none">❖ Post per term family planning❖ PNC services
Malnourished Assessment <ul style="list-style-type: none">❖ MUAC❖ Weight Vs height	

Way forward

2 log-in options be in place

- ❖ CHV
- ❖ CHV Desk
- ❖ Timelines for the systems implantation
- ❖ Spot checks for data authenticity be done one the implementation phase in started.
- ❖ Actions taken.

