EXECUTIVE SUMMARY

THINKMD, eHealth Africa (eHA) and the State Ministry of Health, Kano State in Nigeria, partnered to perform a field-based study between April 25, 2018 and August 7, 2018 to investigate the usability and accessibility of THINKMD’s MEDSINC mHealth platform, as well as measure if utilization of this platform increases adherence to WHO-IMCI guidelines, in particular for critical danger signs for children <5 years of age by community health workers (CHWs).

WHO-IMCI guideline adherence was assessed by observational analysis of 28 CHWs utilizing their current paper-based approach (Pre-MEDSINC, n=384 assessments) during the use of the MEDSINC platform (MEDSINC-observation, n=384; MEDSINC-use, n=2230 assessments), and following the use of the MEDSINC platform using their original paper-based approach (Post-MEDSINC, n=384 assessments). Usability and acceptability surveys were conducted following the completion of the MEDSINC portion of the study.

Main Study Findings:
• Utilization of the MEDSINC platform resulted in an observational mean 40.8% increase in WHO-IMCI compliance from (30.6% to 71.4%). Actual mean increase was 50.4% (from 30.6% to 81.0%) based on data acquisition and documentation by MEDSINC/DATASINC.
• There was a mean 26% increase in IMCI compliance to 56.5% compliance using original paper-based assessments following the use of the MEDSINC platform, demonstrating the MEDSINC platform can serve as a continuous training tool.
• >40% increased acquisition of key IMCI danger signs.
• >50% reduction in training cost when implementing MEDSINC platform using a distance learning approach.
• 93% of CHWs said the MEDSINC platform was very easy to learn and use.
• 100% of CHWs said that MEDSINC was a valuable training tool.
• 100% of CHWs said that MEDSINC helped them identify sick children.
• 100% of CHWs that they were extremely likely (75%) or likely (25%) to recommend use of the MEDSINC platform to other CHWs.
  o Net Promoter Score >80%

MEDSINC Impact:
• Significant increase in CHW IMCI compliance and acquisition of key danger signs for children < 5 years of age
• Effective training/maintenance tool for implementing IMCI guidelines
• Significant reduced training and maintenance cost of IMCI-based CHW programs
• High usability/acceptability and adoption of mHealth IMCI-based guidelines

Conclusion:
This study provides strong evidence that THINKMD’s MEDSINC platform will have significant health impact for children less than five years of age at a reduced cost when used by eHA-Kano State Ministry of Health CHW programs.