momconnect

Facilitator Notes

Training of Clinic Staff

momconnect

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About this course

Aim

This course aims to introduce participants to the National Department of Health's mHealth for pregnant women programme, MomConnect, and train them in the use of this system.

Target Group

Nurses, health promoters, data capturers and volunteers within the clinic context who will consult with pregnant women around antenatal care and will register pregnant womans to the MomConnect system.

Specific Outcomes

By the end of this training, participants should:

- Have a clear understanding of the MomConnect service
- Be able to explain this service to a pregnant woman
- Have a clear understanding of how and why a pregnant woman should be registered to the service
- Be able to use the USSD registration code to register a pregnant woman to the service
- Understand the support material that they will receive

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Course Structure

Module	Module Name	Time Allocated
1	Introduction to the Programme	35 minutes
2	Introduction to Support Material	10 Minutes
3	Role Play	15 minutes

The Facilitator's Role

As a Facilitator you are highly experienced and skilled and it is easy to assume that participants already possess the same skills. However, although some learners may have many of the skills they need, they will in varying degrees need your support, guidance and encouragement if they are to further develop their knowledge and understanding.

Preparation

- Familiarize yourself with the programme and the content of each session. (Preparation is vital for effective facilitation)
- Obtain and organise any equipment and materials needed
- Ensure you have an understanding of all documents (policies, handouts, tools, guidelines etc.)

Delivery

- It is recommended that this training is done in groups of 20 people or less
- Encourage feedback and questions throughout the training
- Answer questions, clarify issues and give constructive feedback
- Emphasize the immediate usefulness and applicability of materials presented.
- Adult learners are particularly receptive to information that impacts their daily practice. Use relevant examples for workplace application
- Encourage sharing of personal experiences from the participants. Adult learners bring a wealth of experience to the implementation of the training and their contributions are an important resource to the training programme
- Be available after each session, and during breaks to answer questions and discuss concerns that might arise for the participants

- Praise or thank participants when they perform an exercise, participate in a group discussion, ask a question or help other participants

Principles of adult learning

Since the target audience for this training is adult learners, it is important that the facilitator is aware of the following principles:

- A supportive learning environment and safe training practices should be established. Participants must feel confident that their contributions will be received respectfully
- Facilitators must show that they are equally committed to the course and willing to share their own experiences, this will build trust between the facilitator and the participants
- Encourage active participation by building teamwork and a sense of belonging.
- Create a culturally sensitive and respectful learning environment by becoming familiar with local customs and values
- Allow health workers opportunities to practice what they are learning
- Facilitate the learning experience by creating a climate in which participants can accomplish course outcomes and explore their life experiences to help them to learn

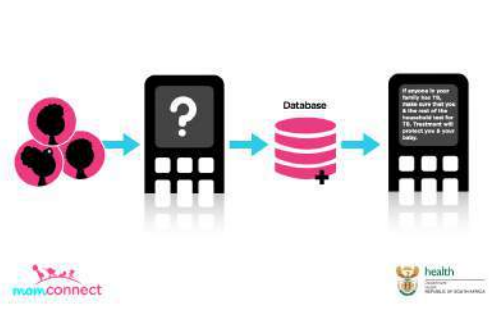
Module 1: Introducing the programme

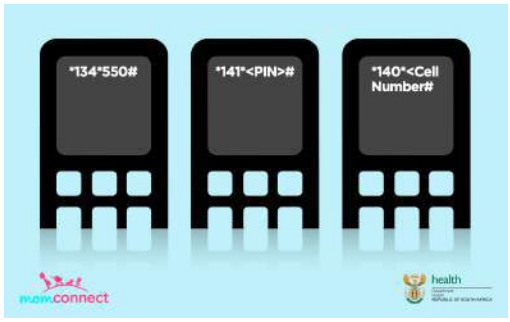
Summary

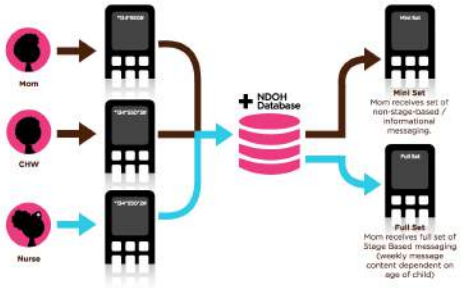
This module will introduce MomConnect using a presentation. Facilitator notes for each slide are given below.

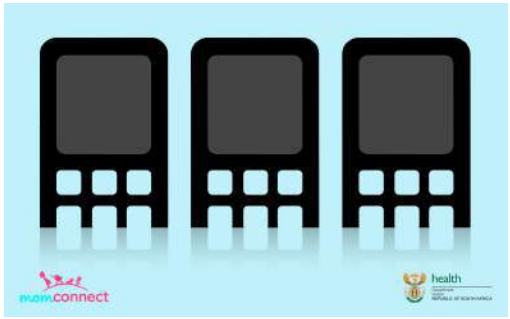
Facilitator notes

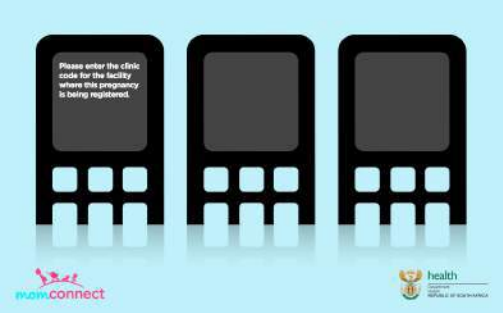
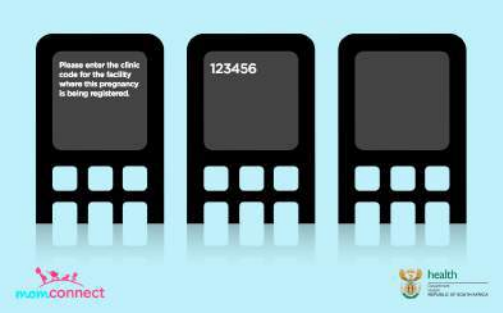
Slide	Notes
	Welcome and arrangements (Introduce yourself, welcome participants, discuss training admin, go through the agenda, tea breaks, lunch break, toilets, smoking facilities and establish 'house rules')
	Give learners a chance to introduce themselves.

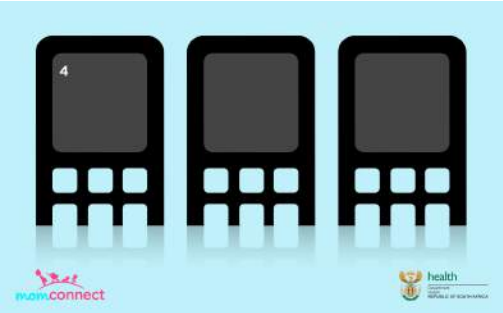
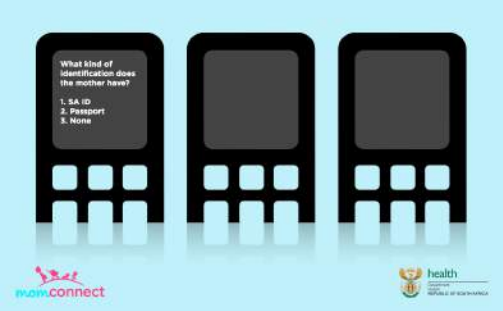
	There are three sections to this training and the training will take approximately 2 hours. This is an interactive presentation so please feel free to ask questions or make comments as we go through the training. The first module will introduce you to the project and take you through a demonstration.
	MomConnect is a **NDOH initiative** to use **mobile tools** to **register pregnancies in SA**, and ,once registered, to send each pregnant woman **stage-based SMSs** to support her and her baby. The emphasis should be on the fact that we are using Mobile Technology to register Moms and then we will be able to support them in their pregnancy.
	At this point you can show the video about the mobile generation which can be found here: https://www.youtube.com/watch?v=0bXjgx4J0C4 Or you could talk to the following: *Why Mobile? Mobile technology is changing Africa and South Africa. Africa is the 2nd Largest Mobile Market in the world and the fastest growing too. In South Africa every person at least has access to a mobile phone. Mobile technology is allowing people access to information and services that they never had access to before and is improving People's lives.*
	We knew that we wanted to use mobile technology. But now we needed to identify what type of mobile technology we wanted to use.

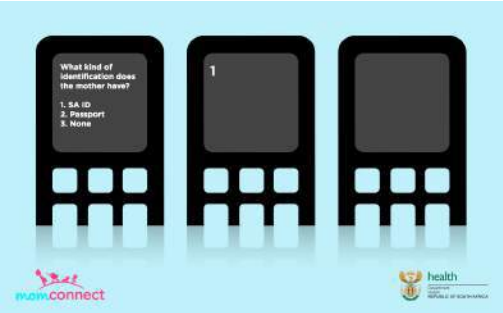
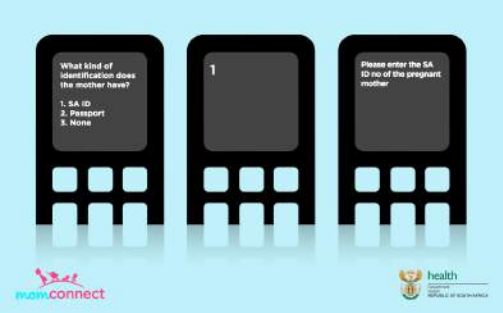
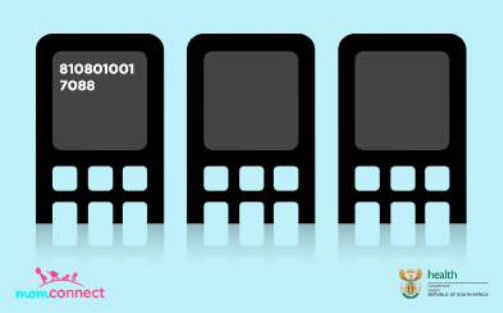
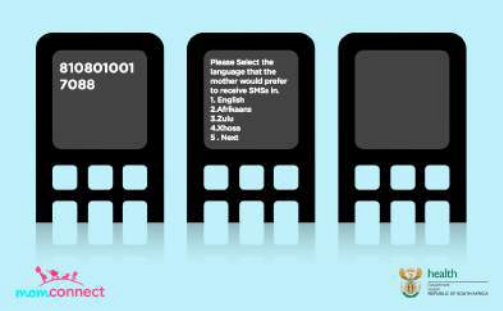
	USSD stands for Unstructured Supplementary Service Data but that doesn't really tell us much about what USSD is and how we can use it.
	So if any of you in the room have ever topped up your airtime, sent a Please Call Me, or checked your airtime balance you have used USSD. USSD is like dialing into a text conversation where you can choose various options and give various inputs in order to work through a menu system. For example if you are on Vodacom and dial *111# you will be given a menu option of things you can do like Buy Bundles, check you balance etc Depending on which of these you choose you will go through a different set of menus to perform a different function. So the advantage of this is if you are collecting lots of data its much better than SMS.
	The other advantage of USSD is that it works on every phone, from the most basic to the most advanced. If you can get a call or send an SMS, you can use USSD
	We have also negotiated with the Mobile Network Operators to be able to provide this service FREE of charge for those using it. This means that you wont need any airtime on the phone to register. This is very important because we know that in many instances people don't have airtime when they are at the clinics.

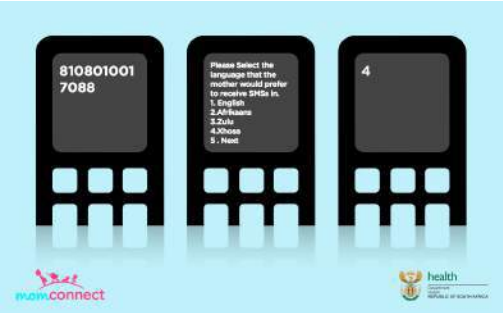
	Advantages for the pregnant woman: This is some of the feedback we have had from pregnant women in terms of how these SMSs have helped them. However you probably have a lot of experience as to how these messages could be helpful for a pregnant woman. What are the instances that you have come across where you think this would be useful for the pregnant woman?
	Advantages for you: We are very aware that we do not want to create any extra burden for you in your already busy jobs. This may seem like yet another thing to do, but in the pilot that we ran, nurses were finding that taking the time to register the pregnant women with this service were solving them A LOT of time over the rest of the woman's pregnancy. The pregnant women were less likely to come to the clinic when they didn't need to, they knew a lot more and so could ask specific questions rather than not knowing what to ask. How do you think this system could benefit you?
	There are currently 3 ways that someone can register or subscribe to the project. **The pregnant woman herself:** The pregnant woman can subscribe herself for messaging on the publicly-available USSD service. This will not mean that her pregnancy is officially registered. She would still have to go to a facility to do that. This subscription entitles the mom to a **set of non-stage-based / informational messaging.** This informational messaging will primarily be to drive the pregnant woman to the clinic to register for a full set of messages. **At the Clinic** A pregnant woman will get registered into the official pregnancy registry at a facility, by a nurse or facility worker. This mom will be officially registered and will receive the **full set of Stage Based messaging** because the pregnancy has been confirmed by a clinic representative. **By a CHW** A pregnant woman will be seen by a CHW in a community. The CHW and/or the mom can suspect pregnancy and the mom would be advised to go to the clinic to have her

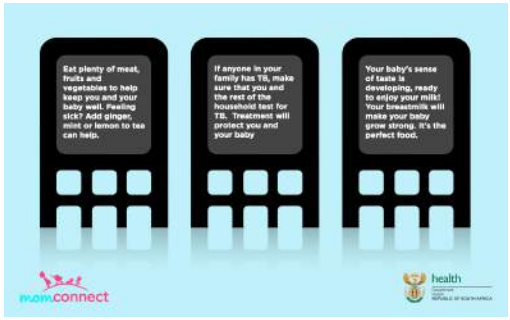
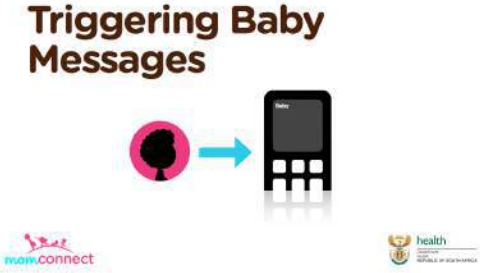
	pregnancy confirmed and have it officially registered by the facility. The CHW will sign the pregnant woman up to a subset of messages. Note: These lines will be the live lines but if you dial them now you won't get anything because we haven't gone live with the final project. We will let you know when we do.
	I will now take you through a demonstration of the clinic registration system. I will take you through the step by step process on my screen and then will give you the opportunity to use it yourselves. This demonstration will be for the Clinic USSD line
	At the clinic the pregnant woman will do a test to confirm that she is pregnant. The nurse or clinic worker will then ask the pregnant mom if she would like to receive weekly helpful messages. If the mom says yes, the nurse or clinic worker will then dial the USSD number. They can do this on ANY PHONE. It doesn't matter if its the mom's phone, the clinic worker's phone or a facility phone or another patient's phone.
	The screen will then show the welcome screen and will ask if you are dialing in using the Mom's phone or another phone. If you are dialling in using another phone it will then ask you to enter the mom's number on which she would like to receive the messages.

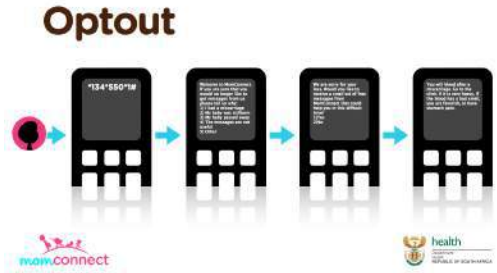
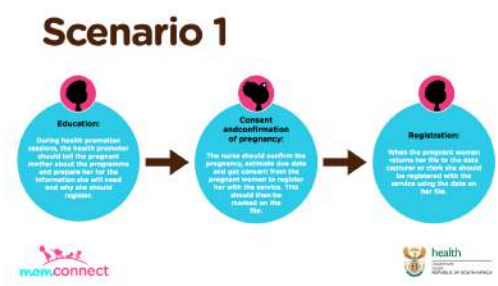
	In this demo however I am going to say that I am using the Mom's phone so I enter 1.
	You will now be asked to enter the clinic code for the facility you are registering the pregnant woman at. This is very important because this is what confirms that this is a confirmed pregnancy and that the mom can now get the full set of messages.
	The will be a short set of numbers and or numbers and letters. Here I am entering the example 123456.
	Now you will be asked what the month is that the baby is expected to be born. This is very important so that we can give the moms a set of stage based messaging. In other words when the pregnant woman is 14 weeks pregnant she gets different messages to when she is 35 weeks pregnant because she and the baby are going through different things.

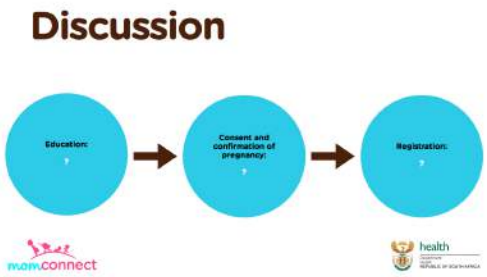
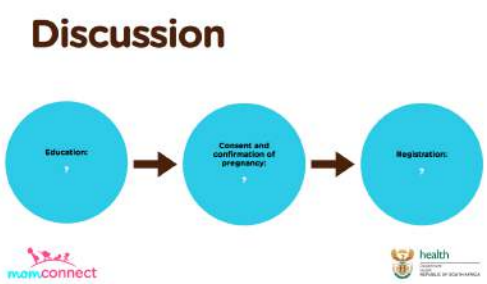
	So I think that the pregnant woman I am registering is due in July so I select 4.
	The system then asks what day the baby is due on. This does not have to be exact but the closer it is to the EDD, the more accurate the messages will be for the pregnant woman. Of course there is always some error in estimating EDD but we have designed the messages to be a bit flexible.
	In this demo I am going to say that the baby is due on the 14th of July.
	Then it asks me what kind of identification the pregnant woman has. Here we would prefer that a pregnant woman has a South African ID or a passport, however if the pregnant woman does not have one of these you could select none and then you would be asked for the pregnant woman's date of birth. You may get some questions and concerns about this question from pregnant women. You should assure her that we are only asking for this so that if they go to another clinic somewhere else, or register again, that we can match her records and give her the best care possible. This information is safe, is not on the phone you are using and will not be shared with anyone.

	In this demo I am going to select 1 for a South African ID
	It will now ask me to enter the SA ID number
	...and I enter this. Its important that this is a valid ID number as otherwise the system will not accept it.
	Now we are asked what language the pregnant woman would like to receive messages in. The mom can choose the language that she is most comfortable with. This is important because when you are trying to explain something complicated it is often easy to get intricacies across in your first language.

	I am going to choose to receive messages in Xhosa so I enter 4
	The screen will now display a thank you message.
	The pregnant woman will get an SMS on her phone telling her where she can get more information and how to stop getting messages.
	Here are some examples of the type of messages that the mom will receive.

	The messages that the pregnant woman will receive are stage based so that they receive the best information for their stage of pregnancy. The content of the SMSs range from messages that delight and inspire pregnant women by telling them how their baby is developing, to giving pregnant women vital medical information. The messages have been tailored to be specific to the South African context and address issues that moms may face during their pregnancy such as Gender Based Violence. Messages will also be delivered once a mom has given birth. They help to promote exclusive breastfeeding and remind moms when to go to the clinic for follow up visits.
	Now is your time to try this out. Please remember though that this is just a demo line. Not all the fancy functionality, like checking if a code is valid, is working here because we are just testing the menu structure. Also remember that on this line and the one we will launch with there will be timeouts. This is when the line ”hangs up” on you. This will happen after 180 seconds. If this does happen you wont have to start again. You will be dialed back into the place where you left off and you can continue registration. Please remember that this is not free. Only the final line will be free and so you will be charged 20c/20 seconds.
	We have mentioned that women will get messages up to 1 year after the baby’s birth. At 42 weeks the messages will automatically change over to baby messages but most women will give birth before then.
	So women will be able to start their baby messages when they give birth by replying to any message that has been sent to them by MomConnect with the word baby.

	We are very aware that women may suffer a miscarriage, stillbirth or death of a baby and we do not want to continue to send her messages in these cases.
	We have therefore developed a system where a woman can stop receiving messages by dialing the *120*550*1# line. Here we will ask for a reason for choosing not to get messages anymore. We do this because we can then give pregnant women the opportunity to get messages of support if she has suffered a loss. If she chooses this option, she will get a set of 7 messages designed to help her deal with her loss.
	We know that every clinic will be different but from talking to various clinic staff we think that this will be one of the best scenarios. Firstly, when the pregnant woman is in the education classes, the health promoter should tell her about the programme, the information she will need to provide, what she gets out of it and how she can register. Then in the consultation, the nurse should confirm the pregnancy, estimate a due date and ask the pregnant woman if she would like to be registered. If the pregnant woman agrees to register, the nurse should indicate this on the file. Lastly, when the pregnant woman returns her file to the data capturer, then the data capturer will register the pregnant woman, using the USSD line and the information in her file.

	This is also a scenario that we have identified. Here the sister or nurse is the main person involved in the process. She informs the mother about the project during the health education classes and then during the consultation, she will confirm the due date, estimate the due date and ask the mother if she would like to register with the programme. If the mother wants to receive the messages, she will then either register the pregnant woman herself, or will hand this responsibility to the nurse assistant before the mother leaves the consultation.
	It is important to make this process work at your clinic. Lets discuss whether the scenario we have outlined will work for you or if you think another process will work better. Remember that it's important that before the pregnant woman registers, she has had her pregnancy confirmed and her due date is estimated.
	We will be going through support material in more detail later but just so you know, this is the support material that you will receive: • Promotional Video • Posters • Fliers • Laminated "How to" Guide/Script • Messages • FAQs
	Here are some examples of the support material you will receive.

	We are still awaiting confirmation of the exact date of start of this project but we hope to start the pilot in the next few weeks.
	We would like to give the pregnant woman other support beyond the messages. We have therefore designed additional services that will allow her to: ● Rate the service she has received ● Log a complaint ● Give a compliment ● Look for additional information on pregnancy and baby ● Ask a question These have not yet been developed but will be developed for launch of the national rollout.
	At this point please open up the floor for discussion and questions.

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Module 2: Introduction to the Support Material

Summary

The following table gives an outline of the support material that will be available at clinics and the target audience for each. Note: Those marked with an * are still in production and will be supplied when they have been finalised.

Material	Description	Target Audience
Flier*	This flier will be given to pregnant women during the education phase of the process and will give her background on the project and instructions on elements of the project such as the cost involved and how she can get more information.	Pregnant Women
Poster*	This poster will be displayed in the clinic and will give the pregnant woman background on the project and instructions on elements of the project such as the cost involved and how she can get more information.	Pregnant Women
Laminated Script*	This script will be a tool that clinic staff can use while educating pregnant women about the project and registering them with the service. It will help to walk clinic staff through these processes and will also give them visuals that can be used during the process.	Clinic Staff
Messages	It is important that clinic staff are aware of all the messages that a pregnant woman will receive. Therefore all of these messages will be supplied to clinic staff.	Clinic Staff
FAQs	In order to help to answer the questions that clinic staff may have about the project, we have completed an FAQs document which will be available for all clinic staff.	Clinic Staff

Please distribute the FAQs and messages to the participants and give them some time to go through these.

Module 3: Role Play

Summary

In this section we would like to reinforce what the participants have learned so far by asking them to participate in a role play exercise where we get volunteers to enact 3 scenarios that we see happening at the clinic.

Process

There are slides in the presentation to support this, however these do not cover the process for carry out this exercise.

1. If you have a group of more than 20 participants you should split the group into 2 groups so that they can engage more effectively.
2. Ask for volunteers who can enact the roles of pregnant woman and nurse or clinic representative.
3. Call these volunteers up to the front and brief them on their roles as in the table below.
4. Have the volunteers enact the scenario
5. Thereafter, encourage the other participants in the training to give positive feedback around how the clinic worker handled the situation.
6. Be clear with participants that this is not meant as a criticism to those who volunteered and so we should start with what the volunteer did well and then transition into some helpful suggestions on how to improve the interaction from the clinic worker in a similar situation in the future.

Scenarios

Scenario 1

The enthusiastic mom

In this scenario brief the volunteer who will be playing the role of the **pregnant woman** as follows:

- You are 20 weeks pregnant and when the clinic worker explains the service to you, you are eager to register.
- You allow the clinic worker to use your phone to register.
- You have a South African ID and are happy to share this with the clinic worker who is registering you, although you do just want to check that your information will be private and so you ask the clinic worker about this.
- Your ID Number is 8108010017088.
- You would like to receive your messages in Zulu.

In this scenario brief the volunteer who will be playing the role of the **clinic worker** as follows:

- Your clinic code is 123456

Scenario 2

The reluctant mom

In this scenario brief the volunteer who will be playing the role of the **pregnant woman** as follows:

- You are 20 weeks pregnant and when the clinic worker explains the service to you, you are not eager to be registered.
- You don't believe that the service is free
- You want to know how the service will help you and ask the clinic worker to give you an example of the types of messages you will get.
- You don't want to use your phone to register because you don't feel comfortable with the clinic worker using your phone and you still don't believe that it will be free.
- Your cell number is 0821234567
- You are a foreign national and you have a passport but you are not happy giving this information to the clinic worker because you are scared that it will be used to deport you.
- You would like to receive your messages in English

In this scenario brief the volunteer who will be playing the role of the **clinic worker** as follows:

- Your clinic code is 123456

Scenario 3

The miscarriage mom

In this scenario brief the volunteer who will be playing the role of the **woman** as follows:

- You were 16 weeks pregnant and have been receiving messages for 4 weeks now.
- You thought that you were safe now but you have just found out that the reason you were bleeding was that you have had a miscarriage
- You can't imagine receiving messages about your growing baby like you have been for the past few weeks and want to make sure that you don't receive them anymore.

In this scenario brief the volunteer who will be playing the role of the **clinic worker** as follows:

- You need to walk through the opt out process with the woman and encourage her to use her own phone because you cannot opt out for her

Glossary

Pregnancy Registration: Full registration. Only applicable to pregnant women who we can confirm are pregnant. Confirmed at a clinic by doing a pregnancy test and then entering the clinic code. Performed by a clinic worker, fieldworker or other representative.

Suspected Pregnancy Registration: Partial registration without confirmation of clinic code but conducted by a CHW in the community or at a patient's house. The CHW suspects pregnancy but cannot confirm with a test.

Subscription: Gathering of a minimal dataset in order to trigger messaging. This is done by the pregnant woman herself.

USSD: Unstructured Supplementary Service Data is a capability of all GSM phones. It is generally associated with real-time or instant messaging type phone services. There is no store-and-forward capability, such as is typical of other short-message protocols (in other words, an SMSC is not present in the processing path). Response times for interactive USSD-based services are generally quicker than those used for SMS. At Praekelt, USSD projects are built using Vumi, our real-time messaging platform.

In Layman's terms, USSD is an interactive text menu system which can be used on any GSM phone. A user dials a number such as *120* and is then presented with a series of text screens to which they can respond by replying with a number that corresponds to a multiple choice question or by entering free form text. This menu system times out after a certain amount of time which varies depending on the MNO but is usually approximately 180 seconds. All prepaid users use USSD to manage their account by doing things such as top up airtime but USSD is not commercially available in all countries. Additionally USSD usage is charged per second and not per interaction and so has a major advantage to SMS when requiring multiple inputs from users, for example in registering for a service.

SMS: Short Message Service - a text message on the GSM cellphone networks. Limited to 160 characters, but may be sent as multiple messages to show as one message on the recipient's phone.

Stage Based: Messaging developed to be relevant to a specific time or stage within a process.

Database: A database consists of an organized collection of data for one or more uses, typically in digital form.

Optout: The ability to notify a service that you no longer want to receive messaging from them.