Maternal Concept Lab HST.S14 Project

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- World's best practices within MNCH available in highly accessible, standards-based formats
 - High-quality MNCH content reused across multiple projects, organizations and countries.





- MDG 4 Reduce by two-thirds the under-5 mortality rate
 - U5MR (under-5 mortality rate)
 - IMR (infant morality rate)

- MDG 5 Reduce by three-quarters the maternal mortality ratio; Achieve universal access to reproductive health
 - MMR (maternal mortality rate)
 - Births attended by skilled health personnel
 - Contraceptive prevalence
 - Antenatal care coverage





Interventions are known!

Chart of packages of interventions for pregnancy care removed due to copyright restrictions.





MNCH Best Practices...

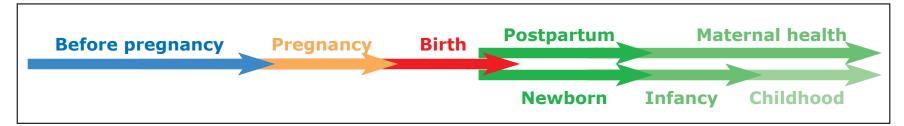


Image by MIT OpenCourseWare.

- PAHO, Perinatal Clinical Record
- UNICEF/USAID, Community Integrated Management for Childhood Illness
- FHI, Family Planning Protocols





PAHO Perinatal Clinical Record

Clinical record removed due to copyright restrictions.





...standards-based formats...

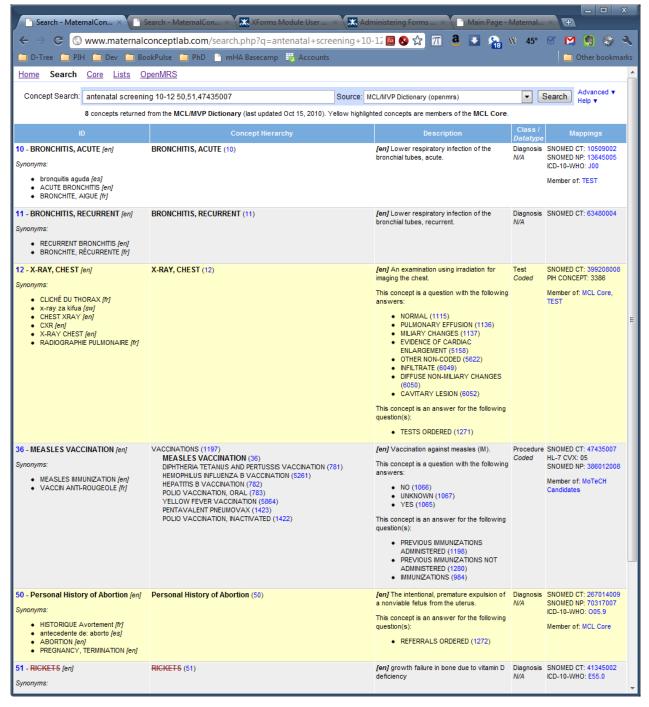
- Medical Terminology
 - Concept dictionary with 200,000 terms mapped to international reference terminologies
 - SNOMED
 - ICD-10
 - HL7
 - LOINC
 - RxNorm
 - Partnership with Columbia University International eHealth Laboratory
 - Data → Information → Indicators





Concept Search Tool

- Multiple Dictionaries
- Concept ID
- Concept Synonyms
- Concept Set
- Descriptions
- Question/Answer Sets
- Class and Dataype
- Mappings
- Concept Lists
- List Highlighting
- Advanced Filters



MCL Search Example

Concept Mapping

F		2 3	-			Table Tools	D-Tree - neonatal cor	mmunity prot	tocol - gayle.xlsx - Micros – 👨 🗴
	Ho	me In		ge_Layout Form	цlas Data Review View	Design			@ _ □ ×
	B2		N + 6	f _{sc} conce		JT			*
	A	В	С	D	E	F	Н		J
	Core		Element		L				,
		Attr/	Person					Form Info	
1	_	1	(option	Element Grou	Element Name	Element *	Comment	1	Form Info 2
2								Registration	1
3		attr	MOTHER?	patient_identifier	identifier	RCH1		1. Enter num	nber from RCH1 card: # entry
4				_	-			2. If not ava	ilable then send mother to facility to get RCH
5		attr	CHILD	patient	birthdate, birthdate_estimated	?		3. Child birt	thdate - date entry, must be today's date or ea
6	N	concept	CHILD	?	BIRTH WEIGHT (kg)	5916		4. Child birt	thweight (kg) - numeric entry
7		attr	MOTHER	person_name	name	?	same as above	5. Mother's	name:
8		attr	FATHER	person_name	name	?	same as above	6. Father's n	name:
9		attr	CLIENT?	person_address	district	?		7. Client's d	istrict:
10		attr	CLIENT?	person_address	village	?		8. Client vill	lage:
11		attr	CLIENT?	person_address	subvillage	?		9. Client sub	ovillage:
12		attr	CLIENT?	person_address	address1	?		10. Client st	reet:
13		attr	CHILD	person_address	neighborhood_cell	?		11. Name of	ten-cell leader for child's home:
14								First home v	visit
15					-			Day 1 after	discharge from health facility/after delivery
16					-			1	Greet client and introduce self and purpose
17					?	?	No comparable concept	2	Ask how the baby is doing. Well/Not well
18	N	concept			IN GOOD HEALTH	1855			Well
19		concept			?	?	No comparable concept		
20					-			3	Explain the purpose of the phone
21	N	concept			INFORMED CONSENT	1710	No concept re: phone us	4	Does client consent to allow provider to use
22	Y	concept	<u> </u>		YES	1065			Yes
23	Y	concept			NO	1066			No
24					-				If no, then display "put phone down and pro
25					-				If yes then continue to 5
26	N	concept			NORMAL APPEARANCE		Not sure		the baby look? Well/Not well
27	N	concept			IN GOOD HEALTH	1855			Well
28		concept			?	?	No comparable concept		
29	N	concept			NO SIGNS OR SYMPTOMS OF DISEASE		Not sure		other if the baby has any of the danger signs
30	N	concept			LETHARGY	116334			Weakness, limp, baby cannot be woken up (I
31	N	concept			CONVULSIONS	113054			Convulsion/fits
32	N • • I	concept		Legend 💝	DYSPNEA	122496	T 4		Difficulty breathing
	_	Summary	Form	Legend &				III	86% 🔾 🖵 🛨
Read	шу								₩ □ ₩ 86% ⊝ □ □





Core Dataset and Indicators MCL:Core Drugs/ Patient Referrals Counseling Medications Vaccinations/ Breastfeeding **Immunizations** Indicator MDG Description Unit The maternal mortality ratio (MMR) is the annual number of female deaths Deaths per 100 Maternal mortality ratio (per 100 000 live births) - interagency from any cause related to or aggravated by pregnancy or its management 000 live births OPV estimates (excluding accidental or incidental causes) during pregnancy and childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, per 100,000 live births, for a specified year. Births attended by skilled health The proportion of births attended by skilled health personnel. N/A personnel (%) **Tetanus Toxoid** Numerator: The number of births attended by skilled health personnel (doctors, nurses or midwives) trained in providing life saving obstetric care, including giving the necessary supervision, care and advice to women during pregnancy, childbirth and the post-partum period; to conduct deliveries on their own; and to care for newborns. Denominator: The total number of live births in the same period. Contraceptive prevalence (%) The percentage of women aged 15-49 years, married or in-union, who are currently using, or whose sexual partner is using, at least one method of contraception, regardless of the method used. The percentage of women aged 15-19 years, married or in-union, who are Contraceptive prevalence, among women aged 15-19 (%) currently using, or whose sexual partner is using, at least one method of contraception, regardless of the method used. Adolescent fertility rate (per 1000 The annual number of births to women aged 15-19 years per 1.000 women Births per 1000 girls aged 15-19 years) in that age group. It is also referred to as the age-specific fertility rate for women in the women aged 15-19. respective age group

...highly accessible formats...

- Compatible with Common Platforms
 - JavaRosa Compatible Xforms
 - OpenMRS
 - DHIS2 SDMX-HD
- Packaged for re-use





The Project

Prepare selected MNCH best practices for re-use while contributing to the development of a platform and processes for use of standard interface terminologies.

- Map selected MNCH best practices to the dictionary
- 2. Develop core dataset and link to WHO Indicators
- 3. Select and design delivery platform (paper, mobile, OpenMRS, etc.)
- Design relevant reports, tools, processes to support delivery of the tool
- 5. Package for reuse





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