

## TFN Impact Report

<b>Name of your Organisation:</b>	Maternity Worldwide
<b>Name of the project TFN funded:</b>	Home to Hospital Tracking Pilot
<b>Date Funded by TFN:</b>	28 <sup>th</sup> September 2016
<b>Were you able to undertake your project as planned?</b>	No
<b>If no, please outline how the project has changed.</b>	See below
<b>Can you describe and/or demonstrate the specific impact that TFN funding has had against your initial objectives?</b>	<p>The Home to Hospital Tracking Project explores options for investigating causes of the second delay of the Three Delays Model that pregnant women face when they are trying to access safe childbirth which is the delay in reaching care. The second delay is one of the most important factors in contributing to maternal morbidity and mortality.</p> <p>The pilot aims to establish a robust patient 'tracking' system of pregnant women's journeys through the existing referral pathways from their homes to where they give birth: either at a health centre or hospital using GPS or barcode technology which will be incorporated into bracelets that the women who take part in the pilot will wear.</p> <p>To date the Beyond Me team and Maternity Worldwide have updated the feasibility study. Following on from this two Trustees of Maternity Worldwide: the Chair and the Ethiopia Programme Lead visited Ethiopia in May as part of the wider Ethiopia programmatic work (trip not funded from this grant). During this time they met with and formed an agreement with the Telecommunications company that will support this pilot. In addition strategic and technical feasibility studies were completed. Reviews of other tracking programmes were carried out such as those with goods vehicles which demonstrated that the tracking technology works in Ethiopia making our project viable.</p> <p>The geographical project area for the project has been identified which is just outside Addis Ababa in the Oromia region. Pregnant women from this area are referred into St Paul's Hospital in Addis Ababa. This geographical area is not completely rural but was selected for the pilot site because with a large population it will be easier to recruit pregnant women for the pilot and more efficient logistically to project manage than a pilot in a very remote area. It is also an area of need as there are high levels of maternal mortality and morbidity.</p> <p>An advisor to support the development of the specification for the technology required for the GPS tracking has been identified. An MOU has been agreed between St Paul's Hospital and Maternity Worldwide and we have engaged the support of the lead obstetrician there. Whilst the Trustees were in Ethiopia interviews for the Project Manager took place and the team to deliver the pilot is now being</p>

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	formed which includes the Project Manager with support from the in country Maternity Worldwide team.
<b>What portion of the project did TFN fund?</b>	TBC when pilot is completed.
<b>How many direct beneficiaries did the TFN funded project reach?</b>	TBC when pilot is completed
<b>How many indirect beneficiaries did the TFN funded project reach?</b>	TBC when pilot is completed.
<b>Were you able to leverage further funding as a result of TFN support?</b>	N/A
<b>Did you receive any pro-bono support, volunteer offers or introductions as a result of the event?</b>	No
<b>How important was TFN funding in helping you achieve your objectives?</b>	We wouldn't have been able to achieve our objectives without TFN funding
<b>Since presenting at TFN, has your organisation undergone any other significant changes?</b>	No
<b>Can you tell us any personal stories to highlight the value of the project?</b>	As part of the evaluation of the pilot case studies from beneficiaries and professionals involved will be available when the pilot is completed.