Stakeholder and Feedback information meetings

June 2019

Present;

Public Health Consultant

Public health administrator

Midwifery Tutor/ Educator

Senior Midwives

Clinical Director OBGYN

Consultants

Registrars

Discussion of the tool.

Could it used for one specific person overnight? Sleep apnoea?

Would women’s groups be able to use?

Maybe women aren’t able to use themselves. Are they able to manage? It would help if the Asha worker be able to teach and use it for the mothers. Maybe best able to use in PHC/ small hospitals with clinical staff.

Hypertension and Anaemia important parameters

Could we monitor Fetal Heart? Yes, possible but ethical challenges. Who to have, danger of over treatment. Could we limit the Asha workers

Could we use for new-borns?

Saturations could be useful but issues of access to services and diagnosis.

Billicheck would be useful.

Would thyroid be useful to check; is it possible non invasive?

Will you be able to add clinical history data, voice recognition into hub/ interface. Need to be in Indian language. Most useful for rural communities who may not be able to write?

Is visual photo/ videos possible?

Data Security: How secure is the data? Will need to be very secure.

How will the app work? How will emergency readings be managed? Who is responsible? Will need an alert system.