UC12: Health Center Worker assesses for high risk delivery criteria and refers

Description: Mothers in Rwanda deliver their children in multiple types of health care settings, as well as in their home/community. Standards of care in Rwanda seek to support mothers delivering all of their children consistently in health centers, given normal uncomplicated pregnancies. However, if mothers have high risk delivery criteria, the standard of care is to deliver the child in a district hospital, which has a larger assortment of equipment to support complicated deliveries, and a cohort of clinicians with a broader experience to support these specific cases…

Actors: Community Health Worker, Health Center Worker, Patient, patient record system (OpenMRS), District Health Worker, and Shared Health Record (SHR)

Pre-Conditions: mother registered into health center, health center worker identifies high risk delivery criteria on history/examination of patient

Post-Conditions:

Special Requirements:

Event Flow Chart:

Ideal Pathway: health center worker notes a potential high-risk delivery in the antenatal visit form in OpenMRS, patient is registered as a high-risk delivery in the SHR, CHW is alerted of this patient’s high-risk delivery criteria via a SMS alert, district health worker is “alerted” (along with additional contextual information such as EDC, and specifics on what puts them at risk) **[once again, technology in district hospital is not well understood]**, health center worker is provided patient handout to educate mother on what to do at time of delivery.

Technology Navigation:

State Diagrams (if applicable):

Alternative Pathway(s):

* **Contextual information not available to clinician in real time**: While entering the clinical encounter into OpenMRS, patient is registered in SHR as having a high risk delivery criteria, for others to be aware of. SMS alert sent to CHW of this high-risk condition. Alert also sent to district health center.
* **Data Entry Clerk vs. Nurse/Midwive direct entry:** real-time alerts could not be generated in this case either, given that forms are typically entered following the encounter, which is too late.
* **No patient manangement system at district hospital:** unclear how alerts could be sent to district hospital about pending transfer in this case. Need more information about technology in district hospital.

Extension Points (other use cases that link):