emocha Begins Phased National Expansion in South Africa

title

Baltimore, MD | September 3, 2015 – emocha’s robust linkage to care system, miLINC, has been successfully implemented for multi-drug resistant tuberculosis (MDR-TB) in three clinics in South Africa, and will now begin a phased national expansion. Currently, more than 16,000 people are diagnosed with MDR-TB each year in South Africa. Of these, half do not return to the clinic for care after diagnosis. To bridge the gap, emocha integrates several providers onto the emocha platform, keeping each informed as the patient progresses to initiation. Key to miLINC is the interface with the National Health Lab Service (NHLS), which boasts a national network of 260 laboratories that services over 80% of South Africa’s population, to rapidly get test results to the patient and healthcare providers.

The emocha miLINC implementation is a team effort led by the MDR-TB Partnership, an international, multi-sector effort to stop MDR-TB. The Partnership is lead by Johns Hopkins University School of Nursing in collaboration with the National Department of Health South Africa, Jhpiego-SA, the National Health Laboratory System, the CDC, the Global Fund, PEPFAR, and emocha. This Partnership is leveraging the collective know-how of this strong team to build innovative approaches to address the TB and drug-resistant TB crisis in South Africa.

“To date, over 3000 patients have been enrolled into emocha miLINC, and more than 90% of MDR-positive patients have been initiated into care,” said emocha CEO, Sebastian Seiguer. “Most impressive has been the speed with which patients are initiated to care. In some cases the time from diagnosis to initiation has gone from weeks to three days or less. This demonstrates how integrating and sharing patient data between multiple providers can dramatically improve an individual patient’s access to care.”

Multiple parties interact with emocha miLINC to get a patient from diagnosis to care. Primary Health Clinics, Linkage Officers, and specialized MDR-TB Clinics each have a tablet-based application to register, track, and document enrollment, contact, appointments, and initiation of patients. Notifications to patients and providers keep everyone on track. The patient is the focus of efforts, with critical data centralized to miLINC.

“As we phase into new clinics, we get valuable feedback from the linkage officers and nurses using the applications” said Dr. Jason Farley, project lead from the Johns Hopkins School of Nursing. “Buy-in from those on the ground has been essential to the success of the first phase and we are very pleased to see excitement in the new clinics. People understand how this will make their jobs easier, and the positive impact it will have on the country’s health,” concluded Farley.

Expansion will begin across the Kwazulu-Natal and Eastern Cape districts, with the launch of miLINC in 20 high-burden clinics over the next three months. The MDR-TB Partnership will continue the phased national rollout to satellite clinics in 2016.

emocha Mobile Health is a mobile health platform that supports a wide range of applications for remote patient management. Clinicians and researchers use the platform for mobile data collection, education, and communication. Additionally, a web interface provides real-time data visualization and analytics. emocha has been implemented in more than ten countries across four continents.

The MDR-TB Partnership is a multi-sector initiative lead by Johns Hopkins University School of Nursing in collaboration with the National Department of Health South Africa, Jhpiego-SA, the National Health Laboratory System and emocha. This Partnership is leveraging the collective know-how to build innovative approaches to address the TB and drug-resistant TB crisis in South Africa. The Partnership’s mission includes 1) improving access to care through task-sharing approaches; 2) rapid linkage, tracing and scheduling of care through m-health solutions; 3) clinical excellence and holistic decentralized treatment centers; 4) evidence-based clinical decision making. Through this collaboration we are assisting the Department of Health to realize its 90/90/90 strategy.

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