**Interpretation:** As emergency medicine continues to develop in Colombia, more residency programs are expected to emerge with a focus on standardization of training across the country. Faculty development and sustainability of academic pursuits will be critically important. In the long-term, the specialty will need to move towards certifying board exams and professional development through a national EM organization.

**Source of Funding:** None.

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### The PIERS on the Move mobile health application

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**Program/Project Purpose:** To develop a simple decision aid for triage and treatment of women with hypertensive disorders of pregnancy (HDP) in low-resourced settings that can be sustainably implemented through public/private partnership.

**Structure/Method/Design:** The PIERS on the Move app uses a simple graphical user interface to assist the healthcare worker using triage and treatment decisions based on validated clinical risk assessment models that identify women with a suspected hypertensive disorder of pregnancy at greatest risk of developing severe adverse maternal complications, such as eclamptic seizures or antepartum haemorrhage, within 48 hours.

**Outcome & Evaluation:** From 2012 - present, this app has been evaluated for usability and feasibility for large-scale implementation at primary health care level in a large multicounty cluster RCT, the Community Level Interventions for Pre-eclampsia trial (NCT01911494). During the pilot trial phase 8370 women were cared for using the app and 302 triage or treatment decisions were made. The definitive trial phase is expected to conclude in December 2017 and will establish impact of task-shifting antenatal care to community based health workers using the PIERS on the Move app on combined maternal and perinatal mortality or severe morbidity.

**Going Forward:** As the CLIP trial concludes, significant additional work will be required to ensure sustainability of the program through integration into a health system. In order to transition from the context of a clinical trial to a sustainable scale-up, we have established an industry partner to design a commercial product based on our app. Through the CLIP trial process evaluation, we will identify the policy maker and end-user needs and requirements for designing a sustainable product. This will likely include expansion of the scope of the app beyond the HDP, depending on the local health system needs. A quick and effective method of iteratively testing and refining updates to the application in response to these policymaker and end-user needs will be required to maintain certainty of effectiveness as we transition from health services research to scale.

**Source of Funding:** Saving Lives at Birth (Grand Challenges Canada); Bill and Melinda Gates Foundation.

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### Assessing the Impact of Standardized Educational Curriculum Modules on Medical Interns’ Preparedness for Independent Practice in Botswana

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**Program/Project Purpose:** Currently, there is no standardized internship educational curriculum in Botswana. Medical school graduates participate in one year of internship training, after which they are assigned to practice independently as medical doctors. Challenges to training in this setting include variability in medical school backgrounds of interns and in clinical resources and supervision across eight internship sites. This project seeks to address these issues through the implementation of standardized educational curriculum modules at internship sites across Botswana.

**Structure/Method/Design:** Following a needs assessment using structured interviews of 14 medical interns, we developed a process of task-shifting antenatal care to community based health workers using the PIERS on the Move app on combined maternal and perinatal mortality or severe morbidity.

**Outcome & Evaluation:** From 2012 - present, this app has been evaluated for usability and feasibility for large-scale implementation at primary health care level in a large multicounty cluster RCT, the Community Level Interventions for Pre-eclampsia trial (NCT01911494). During the pilot trial phase 8370 women were cared for using the app and 302 triage or treatment decisions were made. The definitive trial phase is expected to conclude in December 2017 and will establish impact of task-shifting antenatal care to community based health workers using the PIERS on the Move app on combined maternal and perinatal mortality or severe morbidity.

**Going Forward:** As the CLIP trial concludes, significant additional work will be required to ensure sustainability of the program through integration into a health system. In order to transition from the context of a clinical trial to a sustainable scale-up, we have established an industry partner to design a commercial product based on our app. Through the CLIP trial process evaluation, we will identify the policy maker and end-user needs and requirements for designing a sustainable product. This will likely include expansion of the scope of the app beyond the HDP, depending on the local health system needs. A quick and effective method of iteratively testing and refining updates to the application in response to these policymaker and end-user needs will be required to maintain certainty of effectiveness as we transition from health services research to scale.

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