Highlights

MEDIC MOBILE 2017 YEAR IN REVIEW

- **18,826** Network of health workers supported by our tools at the end of the year
- **28,144** All-time trained health workers
- **4,273** Health workers receiving improved products
- **8,572** New health workers supported
- **1** Ministry of Health county deployment in Kenya
- **7** Ministry of Health district deployments in Nepal
- **12** Standard deployments (our no-cost offering for last-mile settings)
- **1,088,816** Under-5 assessments
- **224,150** Pregnancy registrations
- **14** Countries with active deployments
- **500,000** Home visits each month

**16 PRODUCT RELEASES**

- **65** Features & improvements
- **20** Performance improvements
- **185** Bugs fixed
- **27** New Medic teammates hired
- **Recipient of Global Citizen’s Accelerator Award**
- **Named a GAVI Vaccine Alliance INFUSE Pacesetter**
- **Laureate of The Tech for Global Good**

**65% Net growth rate**
We believe that health care should meet people where they are and serve as a compassionate instrument of justice.

In my own view, the multi-decade project of advancing global health equity – and the care delivered by health workers every day – is doing nothing less than laying a moral foundation for our world. It is within this context that we humbly and boldly serve our role. In reporting progress from our corners of the earth, we hope to provide one more view into the trajectory we are all on together.

First of all, we can celebrate a new level of scale. By the end of the year, our software was supporting half a million home visits per month in some of the hardest-to-reach communities. Each health worker we support is now equipped to do more for each person and each family they serve. Working alongside partners, we reached another 8,572 health workers this year and supported a network of 18,826 health workers on our latest software at the end of the year. Partners and health workers we support cared for more than a million children in 2017.

When we share this news of progress, we remind ourselves of the enormity and seriousness of the challenges faced by those who are most marginalized by the status quo. Half of people still cannot access the healthcare they need. We have more to do together.

Secondly, our technology tools are more accessible than ever. One of our early and persistent concerns at Medic Mobile is the risk of creating new access gaps through the introduction of helpful technologies – with some organizations, health workers, and communities getting access, and others getting locked out. We decided to design the Standard package and create a new way of deploying Medic Mobile to address this concern head-on. We did everything we could to lower cost, time, training, and deployment barriers. In 2017, we are proud to report that 12 organizations deployed the Standard package themselves, with remote support from our team.

In the past year, attention has turned to new strategies to advance community health. A handful of partners are building, testing, and refining new models – put simply, new ways of doing things – in order to achieve access, coverage, quality, and equity. These partners are also rigorously testing individual strategies, such as Muso’s proactive community case management workflow, in order to understand their effects. They are also publishing their learnings for the broader community to understand, adopt, and replicate their practices.

This was also the year we started working differently, and more closely, with our government partners. Where there is a vision and commitment to serve all citizens, we have found an abundance mentality, openness to new models and tools, and opportunity for long-term change within a system. We are witnessing remarkable progress in adoption, integration, and ownership in Nepal and Kenya, and we expect more governments to take similar approaches.

Finally, this was a year where we stepped into unforeseen responsibilities. New types and amounts of data allow us to put datasets to work for health workers and people, reinvigorating efforts focused on risk of unjust outcomes, speed of care, and local health equity. Importantly, our data science roadmap is being co-created with the communities we serve.

Complementing this annual report is our recent post outlining our goals for the year ahead. To reiterate, we have more to do together! Thank you, reader, for staying in or joining this fight however you can.

– Josh Nesbit, CEO
In 2017, the Medic Mobile team worked together with our partners to make our tools more powerful, more impactful, and easier to use for community health teams delivering care anywhere in the world.

Over the year, we made it easier than ever for health workers to deliver care in their communities with access to the right information at the right time. Patient profiles were enhanced with relevant and customizable condition cards, which display past and present health conditions, providing health workers with the most important information about a patient, at a glance. Health history and context can also be displayed at the start of any guided workflow, so that community health workers can complete protocols with past conditions in mind. For example, health workers performing a routine assessment of a child can know if that child was treated for malaria recently. All data submitted by health workers can now be tracked for specific criteria, which can trigger alerts to health officers when certain conditions are met and catch an outbreak before it spreads widely.

With these new and improved features, we were able to...
support more complex and robust health workflows, including community-based disease surveillance (CBDS), family planning, and malnutrition. This brings more services to a family’s doorstep, helping health workers provide reliable and high-quality wraparound care. With integrated assessments and contextual data now easily visible, a health worker is able to break out of disease silos and care for a family holistically.

Our Standard package was officially launched in 2017, making our antenatal care, postnatal care, and immunizations tools and workflows available to any community health program. The package can be deployed quickly, remotely, and is available at a low cost anywhere in the world. Standard package partners receive the software as well as implementation guides, remote training, and impact reporting for free, allowing the smallest clinics and community-based organizations to deploy powerful mobile technology for their communities. Through the Standard package, we continue to commit to innovation not only in technology but also in delivery, ensuring equitable access to our tools.

We also made a number of improvements to the user interface, taking special care to improve readability while in the field. We now bundle a new font ensuring a consistent experience across a large variety of devices. We updated the layout of all pages in app, improving spacing, contrast, and overall design. All of these changes make the information displayed in the app easier for health workers to read, interpret, and act on.

Throughout the year, we made the app faster and easier to configure, test, and use. We reduced the amount of data that is stored and transferred in the app, allowing for faster load times. When using the app, health workers can now see sync status for their reports as well loading progress at startup, both of which provide crucial feedback in low-bandwidth settings.

Our new Configurer tool provides a faster and hassle-free way to manage configurations. In addition, we added a framework to test critical parts of our configurations. This helps our teammates and partners to quickly and confidently build, update, and deploy to users.

We spent time as a team exploring integrations with other tools in the ecosystem. We made progress towards an integration with DHIS2, the leading open source health information management system (HMIS) software platform used in more than 60 countries around the world.

Last year was a landmark year for Medic’s product, with big strides in capabilities, supported workflows, delivery innovation, user interface, speed, and security. None of it could have been possible without our partners and health workers whose insights lay at the heart of our human-centered design process. We’re deeply grateful for the countless contributions by this global community to making our toolkit better each year.
Medic Mobile supports three types of partnerships with health delivery organizations and health systems. First, we provide access to the Standard package, an easy-to-deploy version of the software. In addition, we support scale-ups within national health systems, with a focus on government leadership and ownership. And finally, we advance research and development alongside model-building partners and research partners.

**Standard Package**
In 2017, we launched a Standard version of our platform, designed to improve ANC, PNC, and Immunization coordination in last-mile settings. In addition to the product offering, the package of services that we provide to the partners contains tools and resources designed for community-based care and can be implemented by even the smallest organizations and clinics in challenging settings. Accessing this product is completely free to our standard partners. We were able to reach 12 facilities in Africa and Asia with our Standard package in 2017.

One partner, Barefoot College, uses Medic Mobile’s Standard ANC platform to better communicate and coordinate care for pregnancies. As part of our partnership, Barefoot College community health workers use their low-cost basic phones and smartphones along with simple SMS to register pregnancies, receive automated reminders about upcoming ANC visits, report danger signs, and coordinate with government Accredited Social Health Activists (ASHAs) and Auxiliary Nurse Midwives (ANMs) to ensure deliveries in facilities. Program staff at the Barefoot campus use the web application to report on ANC visits or deliveries, message individual community health workers to better coordinate care, and view real-time program activity and impact. To read more about this partnership, see our joint blog post.

**Ministry of Health Partners**
Medic Mobile works alongside Ministries of Health who are harnessing technology to advance community health systems. We believe that government-led, government-owned systems are the path to scale and sustained impact for the toolkit and new models of care. In 2017, thanks to visionary leadership from government partners and supporting partners, Ministries of Health in Nepal and Kenya made significant progress to formalize, scale up, and integrate this approach.

In 2017, we entered a strategic partnership with the Ministry of Health in Nepal, formalizing a Memorandum of Understanding to work together on mobile health programs nationwide. At the end of 2017, Medic Mobile and our partners supported 4,000 health workers across 7 districts of Nepal.

In addition, we collaborated with Ministry of Health in Siaya County, Kenya to deploy our mobile application to support community health workers in improved care coordination and
case management. Our tools were deployed in two sub-counties in Siaya, Gem and Alego-Usonga, serving over 980 health workers at the community and facility level. The toolkit aims to increase antenatal and postnatal care amongst pregnant women, increase deliveries with skilled attendants for the catchment area, increase immunization rates and coverage, and increase treatments based on community-based assessments for children under five. We look forward to continuing our work alongside the Ministries of Health in Nepal and Kenya in 2018.

Model-Building Partners
2017 also brought continued growth and sustainability to our model building partners. We continued to scale with Living Goods in Kenya and in Uganda, adding complex workflows on community based disease surveillance, family planning, early childhood development, malnutrition and the equity lens. Since our initial work together in 2014, our partnership now reaches over 9,400 health workers across Uganda and Kenya and has demonstrated high levels of engagement from all health workers for over three years.

We were also honored to deploy with our partners Muso reaching all of their health workers in 2017, fully supporting their health system in rural and peri-urban Mali. In 2017, all of Muso’s community health workers received smartphones and Medic Mobile’s software to support the proactive care that they provide at the doorstep. The workflows focus on maternal and child health, malnutrition, and family planning. In addition to deploying technology together, we partner on research and completed a study to prototype, test and deploy a cutting-edge CHW Dashboard. Supervisors will use these dashboards to provide each CHW with individualized feedback on how to improve their performance, and ultimately save more lives. Results will be published in 2018.

In addition to the above work, we were able to support partners in three new geographies in 2017. We supported Catholic Relief Services in Ghana coordinate care for their antenatal care program, Village Health Works in Burundi on their maternal and child health initiative, and two new partners working in malnutrition and child health in Indonesia.
In 2017, Medic Mobile had a 65% growth rate in new health workers supported by our tools.

This growth exemplifies contributions from every team member at Medic Mobile, working to design, build, and deliver stable, appropriate, and impactful tools to health workers.

This impact is representative of the immense efforts of our implementing partners in Africa, Asia, and Latin America in equipping and supporting health workers with new tools that improve care in their communities.

18,826: Total health workers supported by the end of 2017
8,572: New health workers supported by the end of 2017
4,273: Health workers receiving improved Medic Mobile products
65%: Net Growth Rate

This year, we started tracking more granular impact data for some of our most deployed use cases.

In 2017, across 24 health systems, health workers used Medic Mobile to register a total of 224,150 pregnant women. These health workers supported 92,321 women delivering in local health facilities.

ANC (Antenatal Care) activities in 2017

- Pregnancies registered
- Facility deliveries

2017 totals
224,150 registrations
92,321 facility deliveries
14,496 health workers
Also in 2017, across 5 health systems, 10,758 health workers assessed 1,088,816 patients at their doorstep and diagnosed 823,929 cases of malaria, pneumonia, and/or diarrhea. 296,970 referrals were made to health facilities.

**ICCM (children under 5) activities in 2017**

- **2017 totals**
  - 1,088,816 assessments
  - 823,929 diagnoses
  - 296,970 referrals
  - 10,758 health workers

In 2018, we are committed to tracking activity and impact metrics for more of the priority use cases deployed by our partners. Below, find a breakdown of use case deployments within the Medic Mobile network.

**Percent of Users By Use Case**

- Antenatal care: 29%
- Postnatal care: 26%
- ICCM: 14%
- Malnutrition: 8%
- Immunization: 3%
- Other: 20%
In 2017, we added twenty-seven talented new staff members across our teams to support design, development, delivery, monitoring, and management.

As we continue to sustainably scale our work, we are more invested than ever in growing and supporting staff in our regional offices in Nairobi and Kathmandu.

See a complete team list: medicmobile.org/team
## Financial Summary

### Profit and Loss Statement*

<table>
<thead>
<tr>
<th>Revenue (USD)</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundations, Corporate Grants</td>
<td>3,435,292</td>
<td>2,512,277</td>
</tr>
<tr>
<td>Contracts</td>
<td>1,380,484</td>
<td>762,004</td>
</tr>
<tr>
<td>Other Income</td>
<td>46,280</td>
<td>33,329</td>
</tr>
<tr>
<td>Contributions In-Kind</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Interest</td>
<td>0</td>
<td>258</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,862,056</strong></td>
<td><strong>3,307,868</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>3,719,123</td>
<td>2,692,644</td>
</tr>
<tr>
<td>Management and General Support</td>
<td>608,184</td>
<td>462,766</td>
</tr>
<tr>
<td>Fundraising Support</td>
<td>48,114</td>
<td>19,636</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,375,421</strong></td>
<td><strong>3,170,429</strong></td>
</tr>
</tbody>
</table>

### Balance Sheet*

<table>
<thead>
<tr>
<th>Assets</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Assets</td>
<td>2,142,373</td>
<td>1,678,295</td>
</tr>
<tr>
<td>Other Assets</td>
<td>59,985</td>
<td>127,114</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>2,202,358</strong></td>
<td><strong>1,705,409</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Liabilities</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liabilities</td>
<td>404,481</td>
<td>352,600</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>1,413,763</td>
<td>1,104,686</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>384,114</td>
<td>248,123</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td><strong>1,797,877</strong></td>
<td><strong>1,352,809</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total liabilities and net assets</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2,202,358</td>
<td>1,452,086</td>
</tr>
</tbody>
</table>

### Financial Summary for 2017

- **2017 Revenue (%):**
  - 71% Foundations, Corporate Grants
  - 28% Contracts
  - 1% Other Income

- **2017 Expenses (%):**
  - 85% Program Services
  - 14% Management and General Support
  - 1% Fundraising Support

*2017 financials are unaudited*
Medic Mobile is a nonprofit organization and US 501(c)(3) public charity. Our nonprofit status allows us to stay focused on serving health workers and advancing global health equity, building and delivering software tools in the hardest-to-reach communities.

We are immensely grateful to the funders, donors, volunteers, advisors, and individuals who support this work and mission. Grants and donations to Medic Mobile provide critical funding for product development alongside health workers, research and rapid learning, and testing of new delivery strategies. To our implementation partners and the health workers we serve: we are honored to do this work alongside all of you. On behalf of all of us here at Medic Mobile, thank you!

Photos featured in this report were taken by the Medic Mobile team and feature the health workers and staff of our partners. We are grateful for their permission to highlight this work. See a complete list of our partners.

Our partners: medicmobile.org/partners
Anyone can contribute their time, skills, and resources to help more people get access to healthcare. We are all health workers. If you can write code, give essential funding, or provide unique expertise, you will stand in solidarity with health workers delivering care to their hardest-to-reach neighbors.

Visit our website at: medicmobile.org