Multimedia Design – Phase II

Project Summary

Problem
Field staff have access to Headquarter guidance but much of the knowledge is in hard-to-read operations manuals. This limits translating knowledge into practices that can be adopted and implemented in the field.

Proposed Solution
Transform medical learning content for frontline staff, empowering technical experts and learners to develop content that can be easily understood and implemented in the field. Democratizes learning by bringing referents’ experience and expertise to medical field staff through webinars, videos and podcasts. Phase II will increase educational outreach by targeting unrepresented staff and prepare the project for transition to Business-As-Usual.

Potential Impact
- Improves quality of care through best practice user guidance and services.
- Engages local staff in providing feedback on medical referent content.
- Promotes peer-to-peer learning.

Viability
- Uses agile test and learn “how-to” for videos, presentations, webinars, podcasts.
- Engages a strong stakeholder network, including field staff, frontline supervisors, technical advisors, regional hubs, Communities of Practice, TEMBO.

Risk Mitigation
- Builds on the learnings and networks from Phase I.
- Uses metrics to measure outputs and long-term impact.
- Focuses on identifying suitable long-term hosts to maintain assets and continue scale-up.

Scalability
- Takes an intersectional scale up approach through multiple working groups.

Area/Type: HR Learning and Development; Incubator
Sponsor/Support: MSF Germany
Length/Project Status: 24 months; ONGOING