

Facility Based Quality Assessment of Designated FRU's in Aspirational District Vidisha

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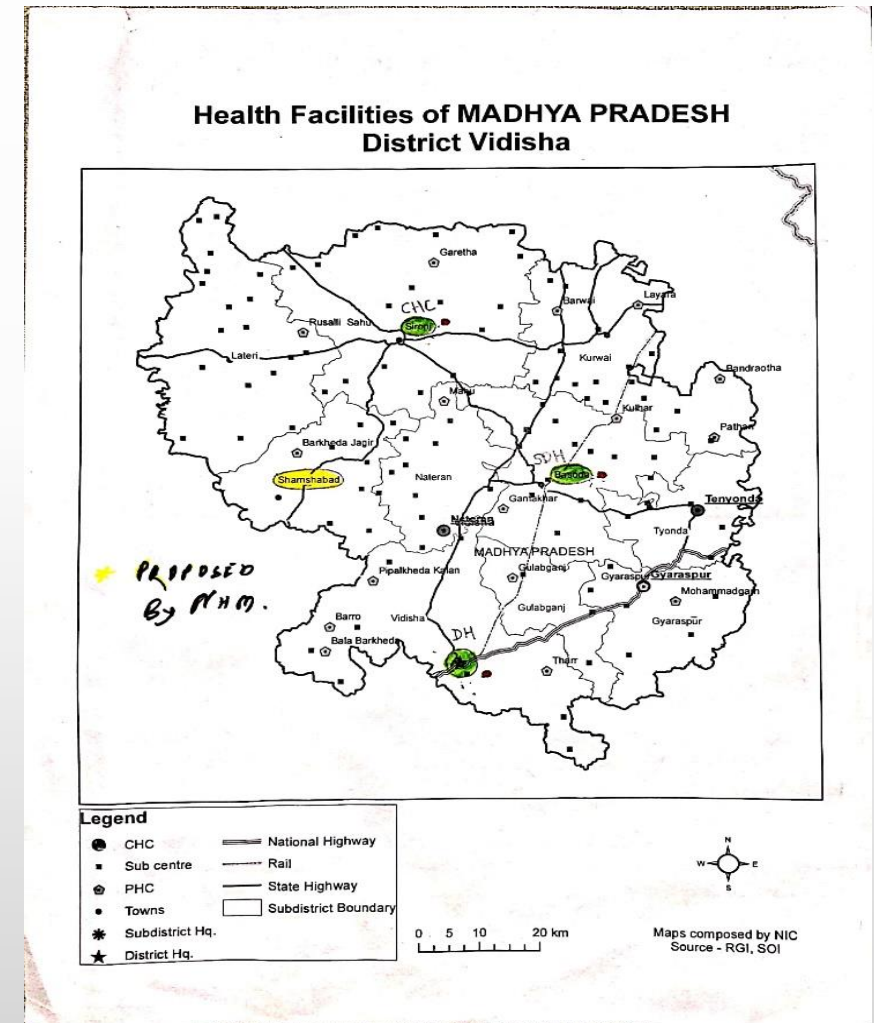
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INTRODUCTION

- For reducing maternal, new born and child mortality the focus has been on reaching higher coverage with key RMNCH interventions.
- With the launch of many new initiatives such as JSY and JSSK there has been sharp surge in institutional deliveries.
- Several steps have been undertaken to cope up with the case load on the public health facilities.



Services for functional FRU

- 24-Hour Delivery services including normal & assisted services
- Emergency Obstetric Care including surgical & medical interventions
- New Born Care
- Emergency Care of sick children
- Full range of family planning services including Laparoscopic Service
- Safe Abortion Services
- Treatment of STI / RTI
- Blood Storage Facility
- Essential Laboratory Services

RESEARCH QUESTION

- To evaluate the quality health care delivery system in FRU's of Vidisha District.

OBJECTIVES

- To assess the first referral unit's in Vidisha District Using ADT NITI Piramal Checklist [LaQshya + NQAS]
- To identify the gaps on various parameters in the existing practices in considering the LaQshya & NQAS standards.

METHODOLOGY

➤ **Study Area** - Vidisha District, Madhya Pradesh

1. DH Vidisha FRU
2. SDH Basoda FRU
3. SDH Sironj FRU

➤ **Study Design** - Descriptive cross-sectional study

➤ **Sampling technique-** Convenient Sample

➤ **Method of data collection-**

The type of the data collected

- ✓ Primary- Observations, staff interviews
- ✓ Secondary-Documents and records
- ✓ Source- assessment done using checklist developed by Piramal Foundation (as per LaQshya+NQAS guidelines)

METHODOLOGY

- **Study Duration** - Study was carried out from Feb-May'19
- **Respondents of study**- Doctor's & staff nurses
 - **Inclusion criteria**- Only the Staff posted in all the departments of FRU's
 - **Exclusion criteria**- Doctors especially M.O.I.C & Civil Surgeon
- **Study tool**- Checklist made by Piramal Foundation (in accordance with LaQshya& NQAS guidelines)

Data Collection Method

- Score was given as per Compliance, partial compliance and non-compliance and based on that, percentage was calculated for each parameter, to identify the gaps of the deficiencies and then suggestions were given on the identified gaps.

Score	Level of Compliance
0	Non-compliance
1	Partial-compliance
2	Full-compliance

Data Collection Method

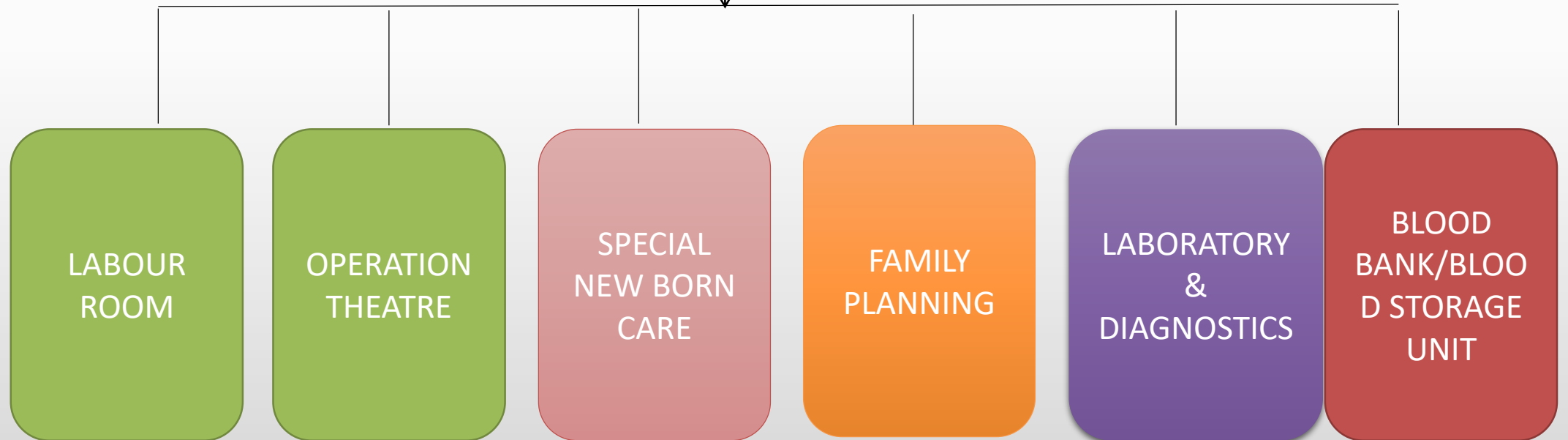
- **Full compliance** is to be scored as 2, when all the criteria in Quantifiable component are met (100%) and means of verifications are available as supporting evidence. If the services are Present/Sufficient/functional/being done/being used/ properly displayed/ properly updated will be scored as 2.
- **Partial compliance** is to be scored as 1 when 50%-99.99% of the criteria in Quantifiable component are met and means of verifications are partially available. If the services are present but not functional/not sufficient/not done/not being used/not displayed/not updated/not maintained/not proper will be scored as 1.
- **Non-compliance** is to be scored as 0 when the criteria in Quantifiable component are less than 50% (0%-49.99%) and there is no support available as means of verification. If the services are not Present completely will be scored as 0.

Data Analysis

- Compliance, partial compliance and non-compliance was checked, and the data was analyzed using Microsoft advanced Excel.



**QUALITY ASSESSMENT
CHECKLIST- FRU**



SCORE PERCENTAGE CALCULATION

Score in Percent = $\frac{\text{Sum of score in each checkpoint} * 100}{\text{Total Number of checkpoint} * 2}$

Labour Room Score Card

Infrastructure	72.86%
Services	75.00%
Manpower	50.00%
Trainings	77.50%
Equipment drugs and supplies	85.09%
Lab & Diagnostics	100.00%
IEC & Patient education	11.11%
Documentation	69.64%
Departmental Score	70.39%



Department	Score
Labour Room	70.39%
Operation Theatre	31.84%
New born Stabilization Unit (NBSU)	31.86%
Family Planning	29.60%
Diagnostics	24.15%
Blood Storage Unit (BSU)	20.09%

Area of concern	Score
Services	26.47%
Infrastructure	35.21%
Manpower	30.00%
Trainings	35.84%
Lab & Diagnostics	25.00%
Equipment drugs and supplies	46.28%
IEC & Patient education	9.30%
Documentation	39.58%
Overall Facility Score	35.95%

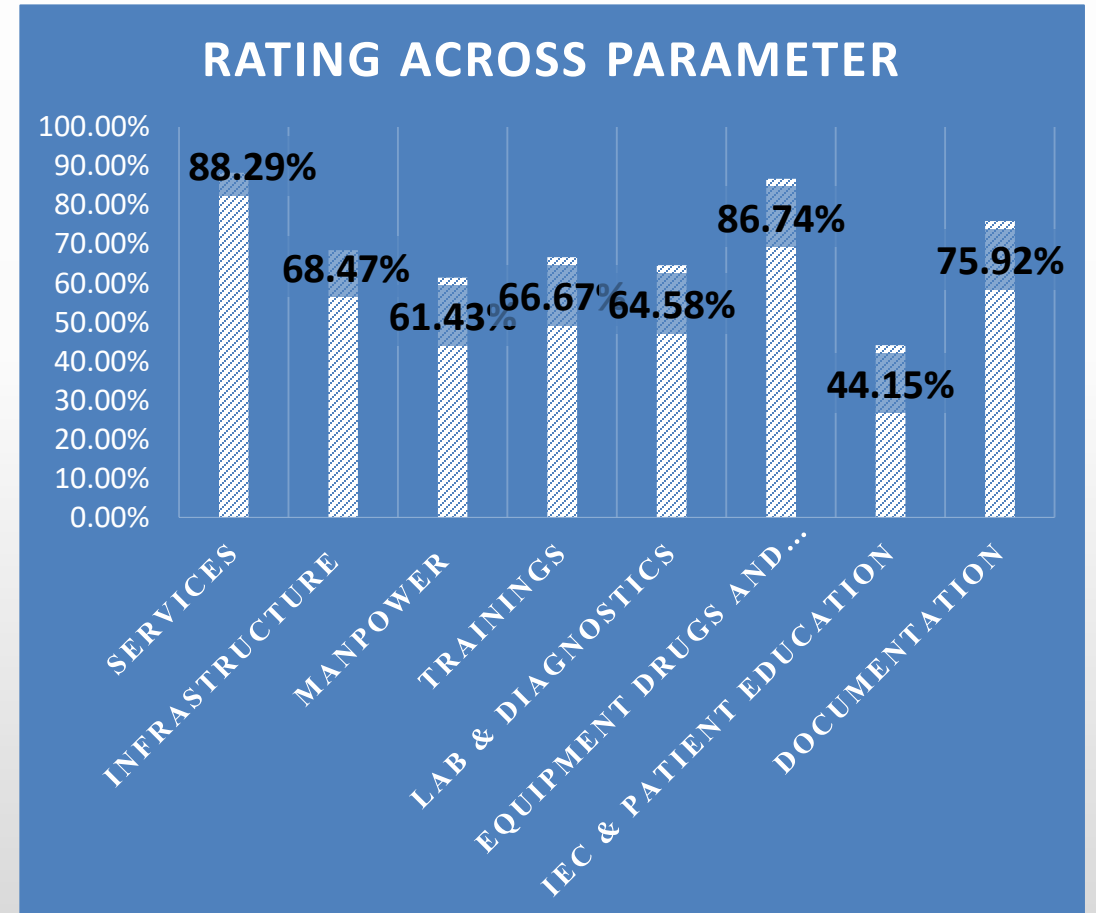
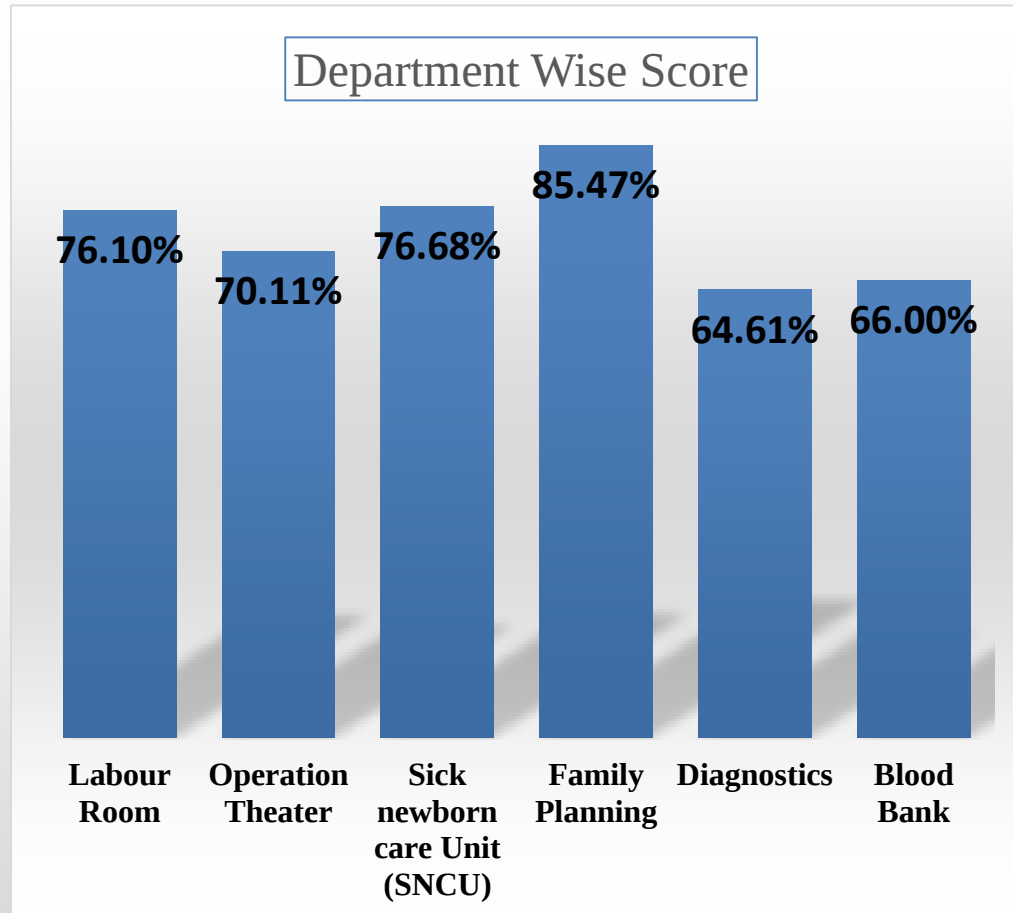
CHECKLIST

PIRAMAL NITI ADT

S. No.	Quantifiable component	Score	Means of verification	Key Note
INFRASTRUCTURE				
1	Labour room (LR) is located at ground floor	2	If not located on the ground floor availability of the ramp / lift with person for shifting	
2	Availability of screen/ partition between delivery tables	2	Screens / Partition has been provided from three side of the delivery table.	
3	Curtains / frosted glass at windows	2	Check all the windows are fitted with frosted glass or curtains have been provided	
4	Adequate number of Delivery Table	1	Less than 20 Deliveries/ Month -1 20-99 Deliveries/ Month - 2 100- 199 Deliveries/Month -4 200- 499 Deliveries/Month -6 More than 500 Deliveries- Conventional Labour Room - Monthly Delivery Cases X 0.014	5 LT

QUALITY SCORE CARD VIDISHA DISTRICT HOSPITAL

FINDINGS– DH VIDISHA



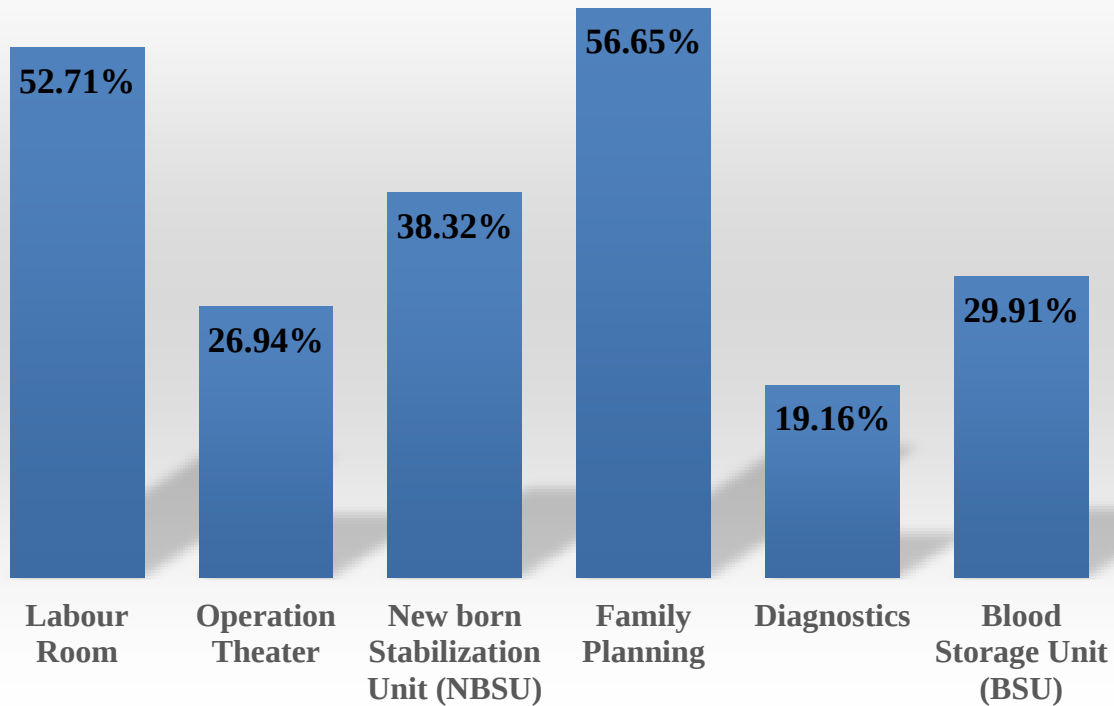
Overall Facility Score

73.62%

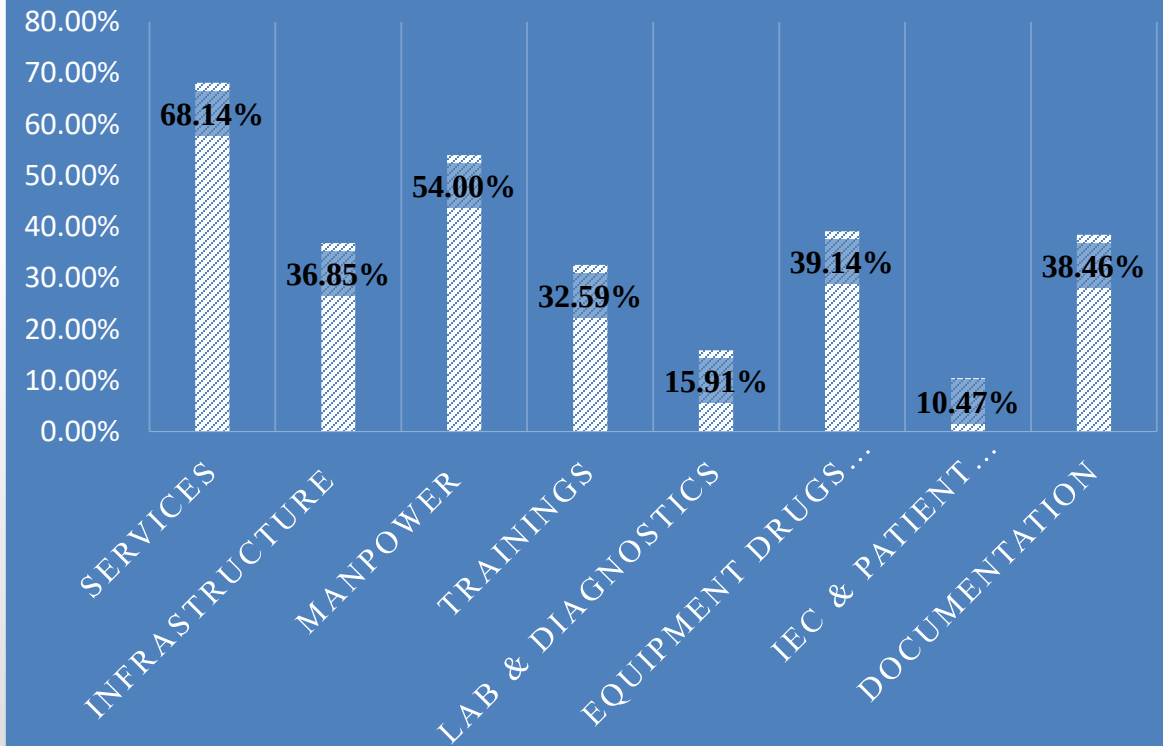
QUALITY SCORE CARD SDH GANJ BASODA HOSPITAL

FINDINGS- SDH BASODA

Department Wise Score



RATING ACROSS PARAMETER

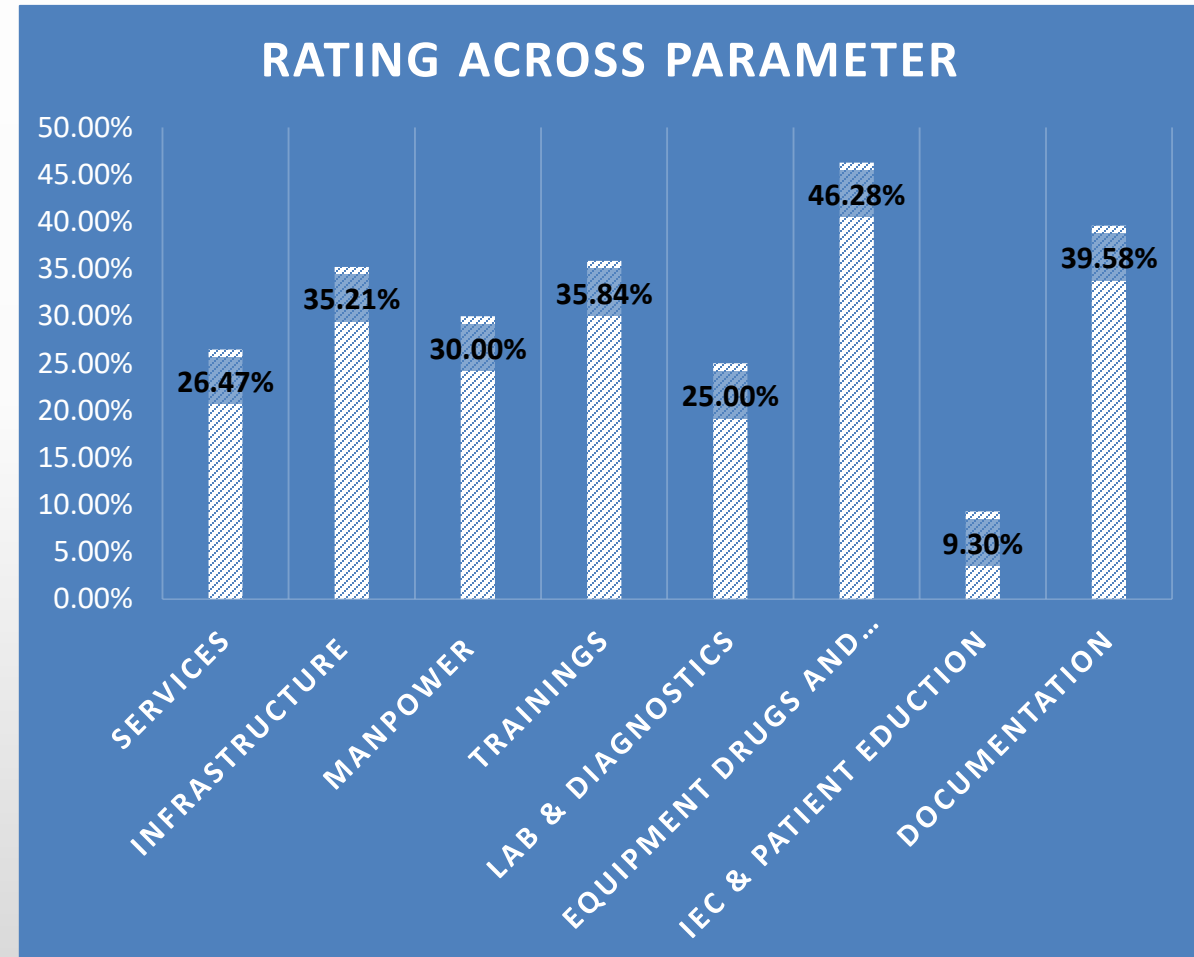
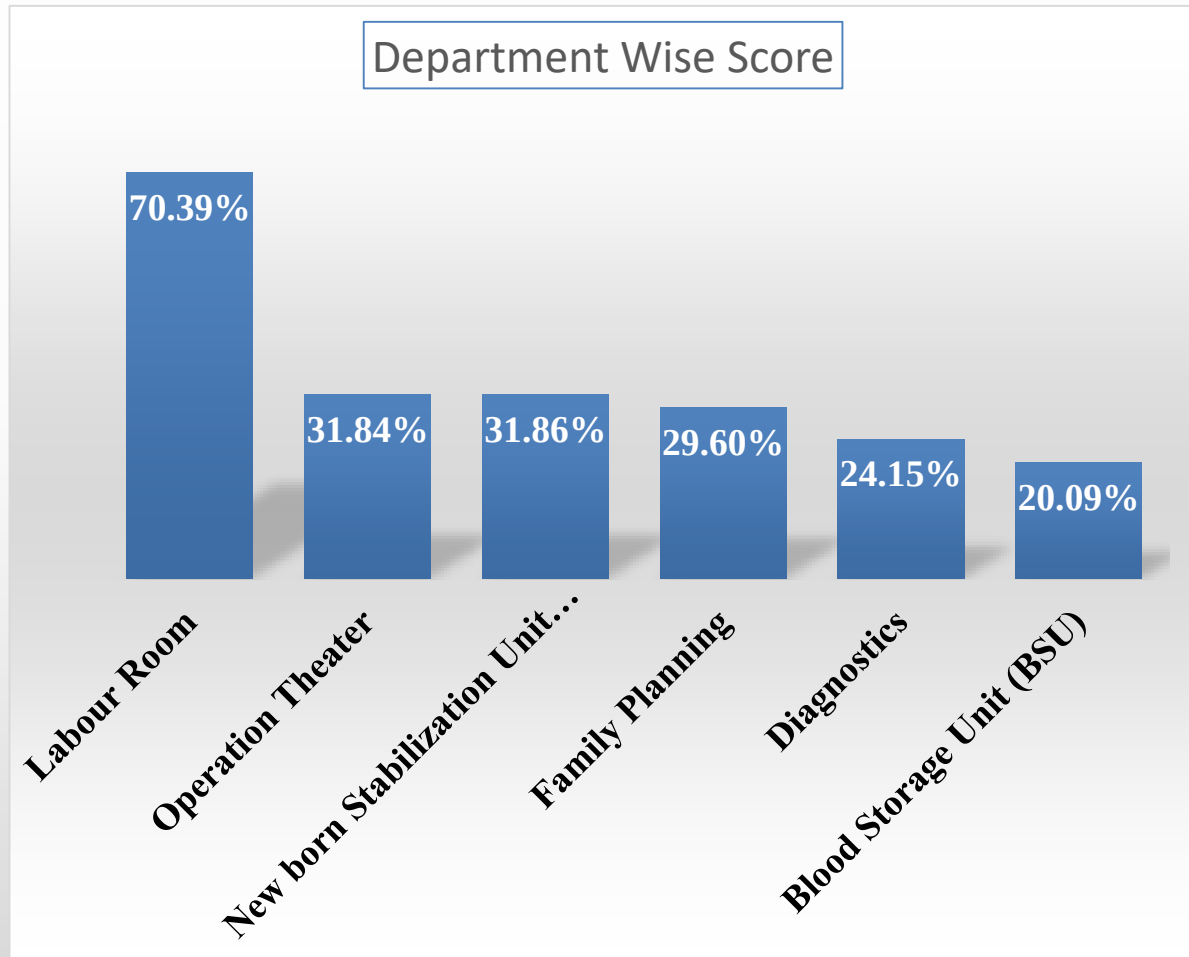


Overall Facility Score

37.11%

QUALITY SCORE CARD SDH SIRONJ HOSPITAL

FINDINGS – SDH SIRONJ



SCORE CARD RESULTS

DEPARTMENT'S	DH VIDISHA ACHIEVED SCORE	SDH BASODA ACHIEVED SCORE	SDH SIRONJ ACHIEVED SCORE	MINIMUM REQUIRED SCORE
LABOUR ROOM	76.10%	52.71%	70.39%	70%
OT	70.11%	26.94%	31.84%	70%
SNCU/NBSU	76.68%	38.32%	31.86%	70%
FAMILY PLANNING	85.47%	56.65%	29.60%	70%
LABORATORY	64.61%	19.16%	24.15%	70%
BLOOD BANK/BSU	66.00%	29.91%	20.09%	70%
ALL DEPARTMENTS	73.62%	37.11%	35.95%	70%

SCORE CARD RESULTS

AREA OF CONCERN- PARA METERS	DH VIDISHA ACHIEVED SCORE	SDH BASODA ACHIEVED SCORE	SDH SIRONJ ACHIEVED SCORE	MINIMUM REQUIRED SCORE
INFRASTRUCTURE	68.47%	36.85%	35.21%	70%
SERVICES	88.29%	68.14%	26.47%	70%
MANPOWER	61.43%	54.00%	30.00%	70%
TRAININGS	66.67%	32.59%	35.84%	70%
DRUGS,SUPPLIES& EQUIPMENTS	86.74%	39.14%	46.28%	70%
LAB & DIAGNOSTICS	64.58%	15.91%	25.00%	70%
IEC & PROTOCOLS	44.15%	10.47%	9.30%	70%
DOCUMENTATIONS	75.92	38.46%	39.58%	70%

SCORE CARD RESULTS- GAPS IDENTIFIED

DEPARTMENT'S	DH VIDISHA DIFFERENCE	SDH BASODA DIFFERENCE	SDH SIRONJ DEIIERENCE	MINIMUM REQUIRED SCORE
LABOUR ROOM	Achieved	17%	Achieved	70%
OT	Achieved	43%	38%	70%
SNCU/NBSU	Achieved	32%	38%	70%
FAMILY PLANNING	Achieved	13%	40%	70%
LABORATORY	5%	51%	46%	70%
BLOOD BANK/BSU	4%	40%	50%	70%
ALL DEPARTMENTS	Achieved	33%	34%	70%



LABOR ROOM



OT shadow less light installation



Handwashing area and bleaching powder preparation area



Emergency drug tray



Handwashing area outside OT



Un-utilized autoclave, drugs etc



Continuous water leakage in store room



Drugs and consumables inside examination area

Proposed Action Plan for District Hospital, Vidisha

LABOR ROOM DEPARTMENT		
S.No.	Current Status	Action Plan/Suggestions
INFRASTRUCTURE	As per the labour room standardization guidelines, LR conducting 500 average deliveries in a month should have 6 labour table. It was observed that the DH LR has 5 Labour tables	Adequate number of cupboards and storage area for record keeping. Records should not share with anybody without permission of Chart Area Administration
	The LR records were found lying in open and there is no designated space for keeping records with limited access	Adequate space to accommodate the labour tables as per delivery load- Labour tables should be placed in a way that there is a distance of at least 3 feet from the sidewall, at least 2 feet from head end wall, and at least 6' from the second table
	Due to unavailability of space in the LR, the LT were not placed in a way that there is a distance of at least 3 feet from the sidewall, at least 2 feet from head end wall, and at least 6' from the second table	Availability of Staff Room & Doctor's Duty Room-Dedicated rooms for Nursing staff and Doctors provide with beds, storage furniture and attached toilets
	As per MNH toolkit Dedicated Triage & Examination room with two examination beds for segregation of High & Low Risk patients is required. The facility doesn't have triage room for LR patients	Unrestricted Corridors-Corridor should be wide enough that 2 stretchers can pass simultaneously without any hassle

		the labour room should not be direct.
Manpower & Services	- At least 4 general duty doctors are required for general duty in LR as per guideline but only one MO is posted in LR 12 Nursing Staff/ANM 04 Security Guard 08 House Keeping Staff - No Gynec & Obs Specialist <u>only</u> One Obs Resident + 2 CeMOC M.O - All Services of delivery provided by district hospital.	- Manpower 200 - 500 Deliveries - 1 OBG (Mandatory + 4 (OBG/EMOC) & if >500 3 OBG + 4 EMOC M.O - Availability of General duty doctor -At least 4 Medical Officers - Availability of Nursing staff /ANM, Deliveries per month 200-500 -12, & if > 500 - 16 - Housekeeping Staff as per delivery load 200-500 - 8 - Security Guards as per Delivery Load 200-500 - 6
Trainings	Trainings on FNBC, IMNCI, MVA/EVA, NSSK, disaster management is not given to all cadre of staff.	All training should be planned with civil surgeon and intimated to NDRF team.
Supplies & Equipment	- Labor room was equipped with almost all the necessary equipment and consumables. - Labor room 7 trays equipped with almost all necessary items Except mentioned in action plan.	- Drugs: Inj. Xylocaine 2%, Inj. Hydralazine, Inj. Promethazine, Inj. Betamethasone, Inj. Hydralazine - Supplies: Urinary Catheter, Glutaraldehyde, Carbolic Acid - Equipment: Baby forehead

CONCLUSION

- It has identified that there is huge gap between standard set by Piramal Checklist [LaQshya + NQAS] & actual service delivery gaps of first referral unit's in Sironj SDH [34%] & Basoda SDH [33%].
- DH Vidisha overall facility score is 73.62% which is achievable score for LaQshya certification
- It is seen from the graphs that all the parameters are inter-related and responsible for the shortfall of the facility.
- C- Section's are the current challenges for Sironj & Basoda SDH due to unavailability of insufficient parameters gaps identified.

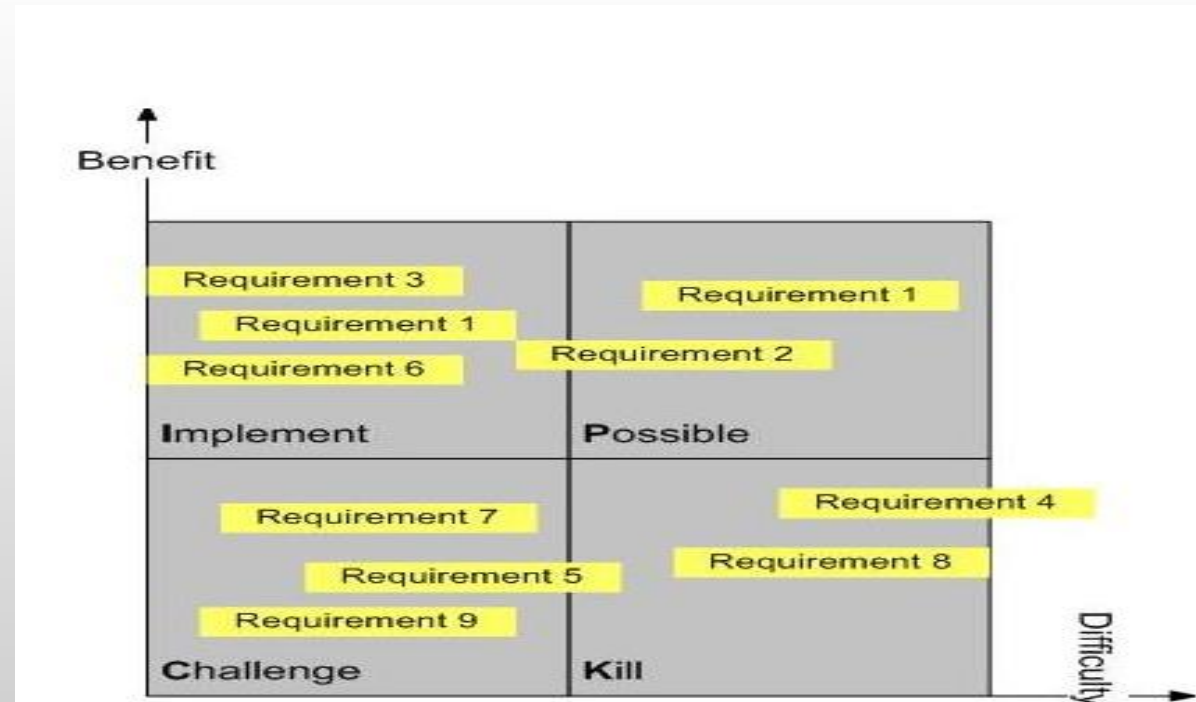
SUGGESTIONS

HIGH PRIORITIES

- Proposal for a new MCH wing for Sironj[37.11%] & Basoda[35.95] designated FRU's with sufficient Manpower.
- District Hospital Vidisha Labour Room & OT, with overall facility Quality score is >70%, Civil Surgeon can apply for the accreditation for LaQshya certification, Appoint at least one Quality Officer in each FRU's for improvement in the quality care delivery system
- Facility Based Quality Assessment must be follow by every three month to improve quality concern areas, facilities at SDH Sironj & Basoda.
- Increasing the number of training centres for Medical & Para Medical Staff & Manpower requirement for the Blood storage unit to be fulfilled with training
- Action plan is to be prepared for structural as well as process improvements by enabling FRU's standardization, Human resource strengthening, quality circles and rapid improvement cycles to improve the maternal and new-born health indicators.

SUGGESTIONS

- **Quality tool pick chart** can be use by facility management to identify the low hanging fruits and can improve them by making an action plan for them , it will help the hospital to improve the score in any assessment and the hospital will come closer to certificate achievable score



THANK YOU

