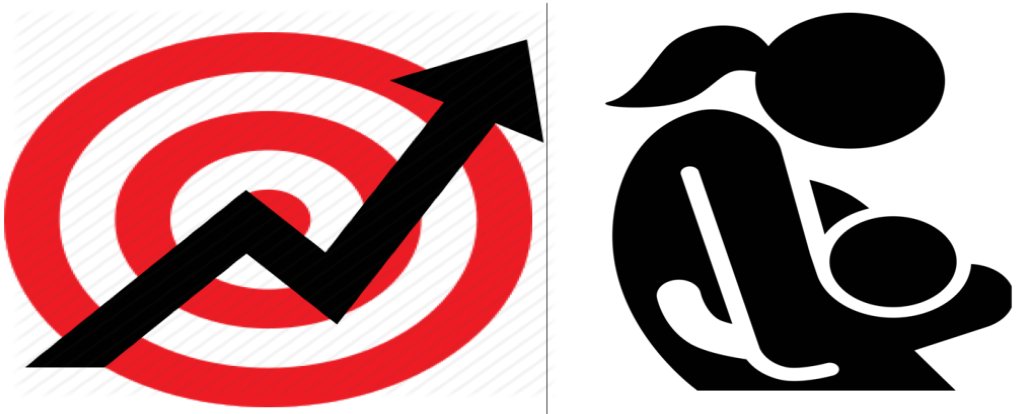
A STUDY ON IMPACT EVALUATION OF IMPLEMENTATION OF LAQSHYA INITIATIVE: TO IMPROVE THE QUALITY OF CARE IN LABOUR ROOM AT COMRADE JAGDISH CHANDER FREEDOM FIGHTER CIVIL HOSPITAL, SANGRUR.



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INTRODUCTION

- **The Ministry of Health and Family Welfare** launched **'LaQshya program'** aimed at improving quality of maternity care in Labour room.
- The program aims to improve quality of care for pregnant women in labour room. 'LaQshya' will reduce maternal and newborn morbidity and mortality, improve quality of care during delivery.
- Under the initiative, a multi-pronged strategy has been adopted such as improving infrastructure up-gradation, ensuring availability of essential equipment, providing adequate human resources, capacity building of health care workers and improving quality processes in the labour room.

Award Scheme and its Criterion

AWARD SCHEME

Silver Badge- Achieving more than 70% score

Gold Badge-Achieving More than 80%

Platinum Badge Achieving more than 90% score

Criterion to apply for the scheme

Criterion I- Overall Score > 70%

Criterion II- Score in Each Area of Concern > 70%

Criterion III- Score in three Core Standards > 70%

Criterion IV- Score in each Applicable Quality Standard >50%

Criterion V- Satisfaction > 80%

Core-Standards

Standard B 3 - "The facility maintains privacy, confidentiality & dignity of patient, and has a system for guarding patient related information."

Standard E 18 - "The facility has established procedures for Intranatal care as per guidelines."

Standard E 19 - "The facility has established procedures for Post-natal care as per guidelines."

Expected Outcomes

- **Labour Room Certification**
- **75% achievement of targets for quality**

Facility Level Incentives

- ***Medical Colleges*** — ***Rs. 6 lakhs***
- ***District Hospitals*** — ***Rs. 3 lakhs***
- ***SDH/ CHCs*** — ***Rs. 2 lakhs***

District Level

- **C**hief **M**edical **O**fficer - Overall in-charge of district performance of LaQshya
- District Coaching Team (DCT)–

  1. District Nodal officer for LaQshya - District Family Welfare Officer/DPO for Maternal health - Responsible for day to day coordination and progress of LaQshya activities in the district

  2. A Gynaecologist from the district as a technical resource for the DCT

  3. Coaching/mentoring members

  - A district level technical consultant for supportive supervision/mentoring on technical packages of QI
  - DQAU member or District Quality Consultant

- In LaQshya districts with medical colleges, a clinical coaching person from the medical college should also be identified

Responsibilities of District Coaching Team

- Minimum 2 visits per month to each LaQshya facility
- Identifying the training needs for LaQshya facilities
- Support for the campaign and its monitoring
- To provide on site training on resource packages for improvement cycles
- Sample verification of the indicators
- Monitoring, reporting and analysis of the indicators
- Peer assessment & support for the NQAS Certification

Facility Level

Quality Teams (QI teams) –

All district have a quality team constituted already.

To overall facilitate and support the quality improvement work in the facility

Quality Circle/Quality Improvement team –

- Informal groups of the staff in Labour Room that works in coordination with Quality teams

Quality circle or improvement teams

- Gynaecologist
- Medical Officer
- Matron/Nursing In-charge for Labor room
- OT In-charge
- Support Staff like Aya, LR Attendant, Housekeeping or security staff.
- Pharmacy / Store keeper

Internal Assessment Activities

PRE ASSESSMENT

- Training of Internal Assessors (State can use existing NQAS assessors)
- Preparing Assessment Plan
- Selecting Assessment team
- Work allocation
- Logistics and Communication

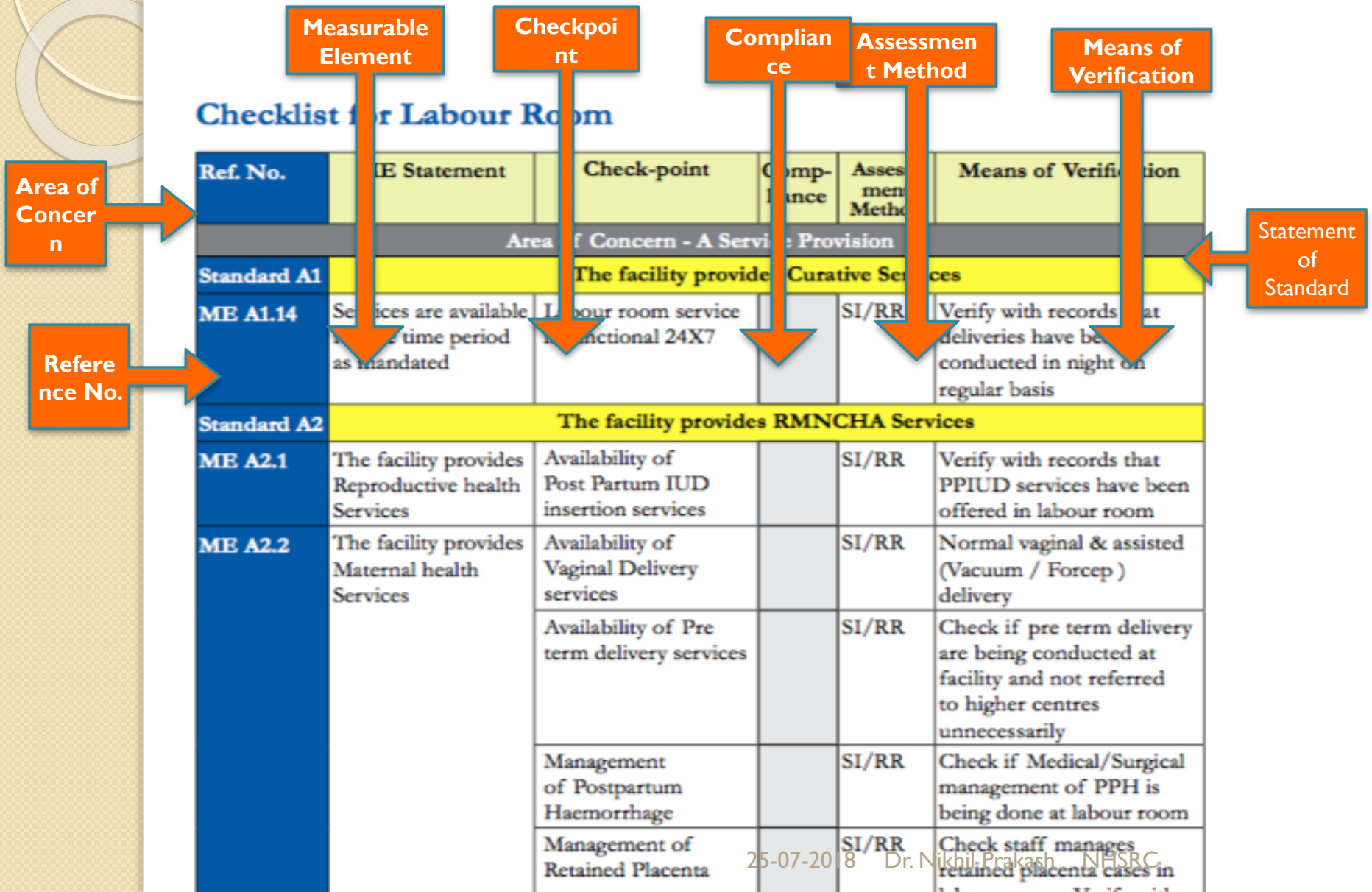
ASSESSMENT ACTIVITIES

- Conducting opening meeting
- Assessment as per NQAS protocols
- Collecting verifying baseline Indicators
- Assessment conclusion
- Conducting closing meeting

POST ASSESSMENT

- Generating scores
- Gap analysis
- Preparation of Assessment report
- Dissemination of report
- Hand holding for action plan
- Follow up for gap closure
- Maintaining Records

Anatomy of Checklist



Checklist for Labour Room

Ref. No.	ME Statement	Check-point	Comp-liance	Assessment Method	Means of Verification
Area of Concern - A Service Provision					
Standard A1	The facility provides Curative Services				
ME A1.14	Services are available in the time period as mandated	Labour room service functional 24X7		SI/RR	Verify with records that deliveries have been conducted in night on regular basis
Standard A2	The facility provides RMNCHA Services				
ME A2.1	The facility provides Reproductive health Services	Availability of Post Partum IUD insertion services		SI/RR	Verify with records that PPIUD services have been offered in labour room
ME A2.2	The facility provides Maternal health Services	Availability of Vaginal Delivery services		SI/RR	Normal vaginal & assisted (Vacuum / Forcep) delivery
		Availability of Pre term delivery services		SI/RR	Check if pre term delivery are being conducted at facility and not referred to higher centres unnecessarily
		Management of Postpartum Haemorrhage		SI/RR	Check if Medical/Surgical management of PPH is being done at labour room
		Management of Retained Placenta		SI/RR	Check staff manages retained placenta cases in

Conducting Assessment

- Familiarise with Measurable element and Checkpoint
- Understand the Assesment method and Means of verification
- Gather the information & Evidence
- Compare with checkpoint and means of verification
- Arrive at a conclusion for compliance
- Assign Scores

Ref. No.	ME Statement	Check-point	Comp-liance	Assess-ment Method	Means of Verification
Standard B2	**Services are delivered in a manner that is sensitive to gender, religious and cultural needs, and there are no barrier on account of physical economic, cultural or social reasons.**				
ME B2.1	Services are provided in manner that are sensitive to gender	Only on duty staff is allowed in the labour room when it is occupied		OB	Pregnant woman, her birth companion, doctor, nurse/ ANM on duty and other support staff only, are allowed in the labour room
ME B2.3	Access to facility is provided without any physical barrier & friendly to people with disabilities	Availability of Wheel chair or stretcher for easy Access to the labour room		OB	
		Availability of ramps and railing & Labour room is located at ground floor		OB	If not located on the ground floor availability of the ramp / lift with person for shifting
ME B2.4	There is no discrimination on basis of social and economic status of the patients	Check care to pregnant women is not denied or differed due to discrimination		OB/PI	Discrimination may happen because of religion, caste, ethnicity, cast, language, paying capacity and educational level.
Standard B3	**The facility maintains privacy, confidentiality & dignity of patient, and has a system for guarding patient related information.**				
ME B3.1	Adequate visual privacy is provided at every point of care	Availability of screen/ partition at delivery tables		OB	Screens/Partition has been provided from three side of the delivery table or Cubicle for ensuring visual privacy
		Curtains / frosted glass have been provided at windows		OB	Check all the windows are fitted with frosted glass or curtains have been provided

OBSERVATION (**OB**)

STAFF INTERVIEW (**SI**)

RECORD REVIEW (**RR**)

PATIENT INTERVIEW (**PI**)

Compliance & Scoring Rules

Full Compliance	2	➢ All Requirements in Checkpoint are Meeting ➢ All Tracers given in Means of verification are available ➢ Intent of Measurable Element is meeting
Partial Compliance	1	➢ Some of the requirements in checkpoints are meeting ➢ All Least 50% of tracers in Means of verification are available ➢ Intent of Measurable Element is partially meeting
Non Compliance	0	➢ Most of the requirements are not meeting ➢ Less than 50% of tracers in Means of verification are available ➢ Intent of Measurable Element is not meeting

Score Card

Labour room Score Card			
Area of Concern wise Score			Labour Room Score
A	Service Provision	50%	50%
B	Patient Rights	50%	
C	Inputs	50%	
D	Support Services	50%	
E	Clinical Services	50%	
F	Infection Control	50%	
G	Quality Management	50%	
H	Outcome	50%	
	Major Gaps Observed		

Assessment Checklist

OBJECTIVES

Broad Objective

- To reduce preventable maternal and newborn mortality, morbidity and stillbirths associated with the care around delivery in Labour room and ensure respectful maternity care.

Specific objective

- To improve Quality of care during the delivery and immediate post-partum care, stabilization of complications and ensure timely referrals.
- To enhance satisfaction of beneficiaries visiting the health facilities and provide Respectful Maternity Care (RMC) to all pregnant women attending the public health facility.

STUDY METHODOLOGY

- The study was carried at Comrade Jagdish Chander Freedom Fighter Civil Hospital, Sangrur from February 1, 2018 to April 30, 2018.
- District Hospital Sangrur caters to around 21000 Outpatient load, 2000 Inpatient load and 500 deliveries a month. Labour Room was a major concern in the hospital due to huge delivery rush. Thus LaQshya was implemented with the aim of improving the Quality of Labour Room.

- Study area –.Comrade Jagdish Chander Freedom Fighter Civil Hospital, Sangrur

- Study design – Observational Study

- Data Collection– Direct Observation, Record Review and Interview(Staff, patient and patient attendants)

- Data analysis – Using Microsoft Excel.
- Duration of Study: 3 months

PARAMETERS ASSESSED

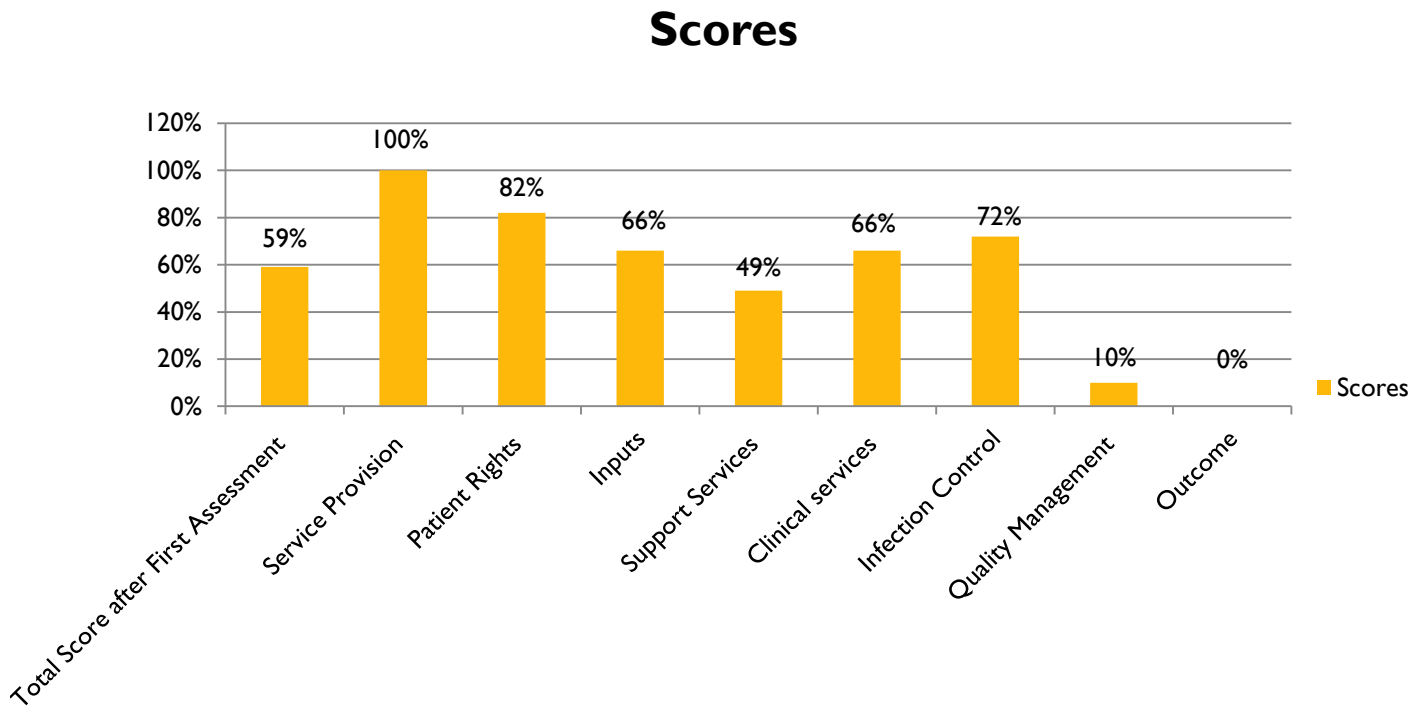
- The parameters on which the performance of the facility would be judged are as follows:
- Service Provision
- Patient Rights
- Inputs
- Support Services
- Clinical Services
- Infection Control
- Quality Management
- Outcome

Data Collection Method

- _Qualitative& Quantitative data collected through , record and personal interview of the staff, patients as well attendents.
- Collection through direct observations.
- Interacting with the patients or the attendants of the patients of this hospital.
- Interacting with the staff of this hospital
- Information obtained through Hospital records.
- Information gathered through internet

PRELIMINARY INTERNAL ASSESSMENT

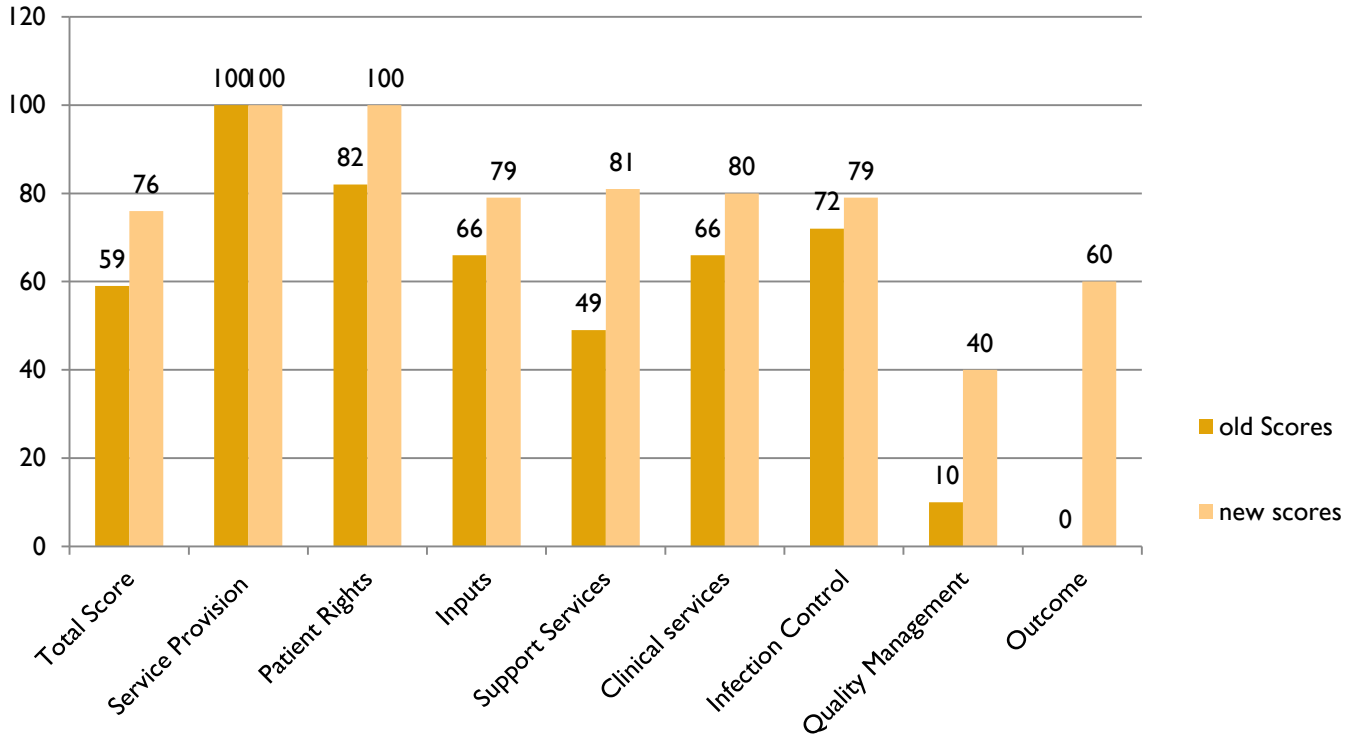
- This was the first assessment done from February 5,2018 to February 28, 2018



Major Gaps found

- Name of each department and directional signage from entry to the facility was not displayed
- Family planning Pictoral chart and High risk pregnancy Poster in the Post natal ward and Labour Room was not available
- No security Guards
- Shortage of Delivery table and space as per the workload.
- Radiant warmer is placed in both the corner due to which free space from three sides is not available.
- Dedicated Room for Doctors and Nursing Staff is not available.
- Intercom services were not there.
- Duty Roaster of Specialists were not there.
- Baby towels were not available
- Filled and empty cylinders were not labelled
- KMC room was not maintained
- Medicine Tray was not Labelled.
- Outcome Indicators were not noted.

Comparison of Graph Before and After Analysis



Conclusion

- Implementation of LaQshya guidelines helped in improving the overall improvement in the hospital but due to constraints of Structural issues, finances and manpower, the gaps will be fullfiled afer the construction of new MCH wing which is under process.
- The areas which showed major improvements after the implementation of LaQshya are Outcome (score increased by 60 %) , Quality Management (score increased by 30%), Support Services (score increased by 32%)
- The improvements were at particular with the priority areas decided after Preliminary internal assessment i.e.
- Outcome which needed major improvements, showed major improvements The Quality Management, Infection Control areas which needed moderate amount of improvements , underwent good percentage of improvement.
- The Service Provision, Patient Rights areas which didn't require any interventions, underwent minimal improvements
- The only area which did not improve as per the Priority decided is Quality Management

RECOMMENDATIONS

(Activities to be undertaken by the hospital authorities for further improvement of LaQshya Score)

- Security guards to be deployed outside the Labour room
- 3 Labour tables yet to be purchased (Demand has been sent to State)
- New MCH wing is under construction, the same has to be built in LDR concept
- Area Near the Ramp to be utilized as waiting area
- And the waiting area to be utilized as ASHA corner
- Dedicated room for doctors and clean utility to be constructed
- Intercom services to be made available
- To prepare fire exit plans for Labour room
- Demand for staff nurses sent to state
- KMC room to be utilized as Aseptic OT as that room has OT light also and A room near to SNCU to be utilized as KMC room

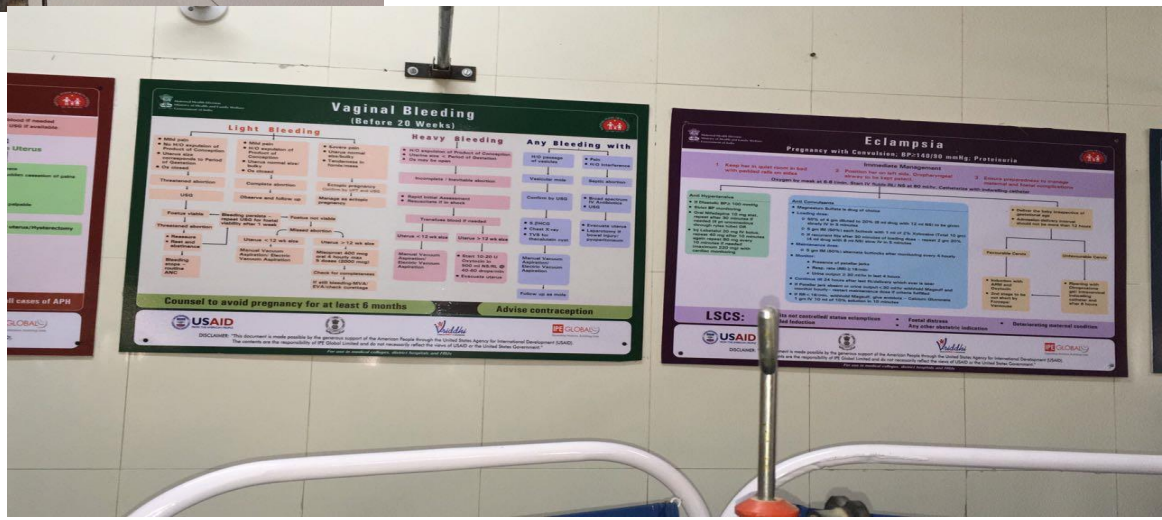
Directional Signage Board

Name of Department mentioned in Local Language

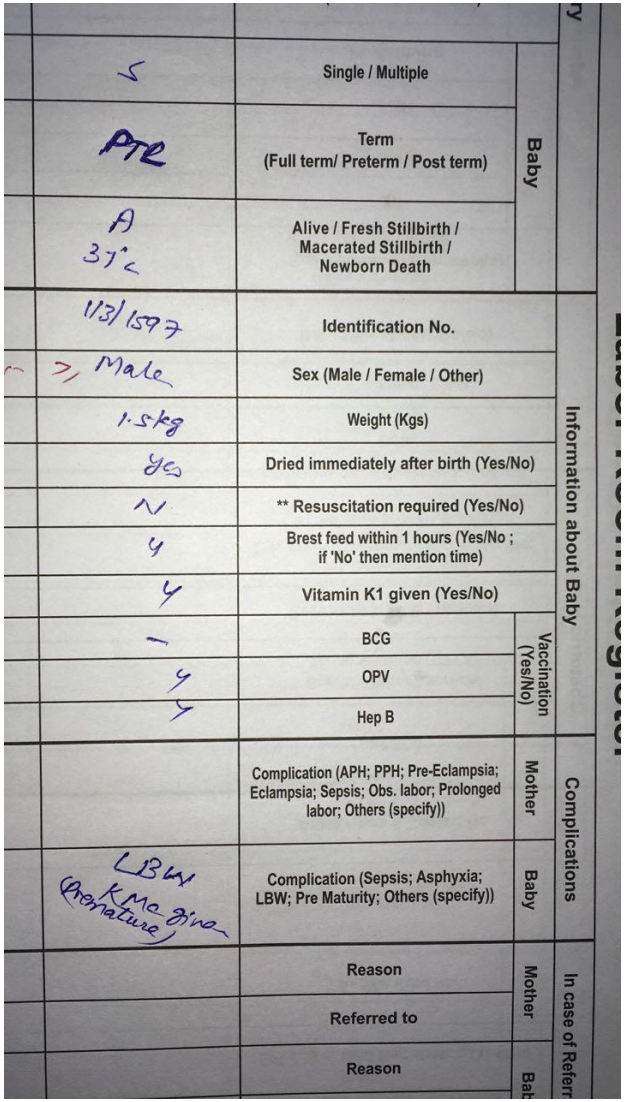
Radiant Warmer can be used from 3 directions and Medicine Tray is labelled

Daily Duty Roaster Board

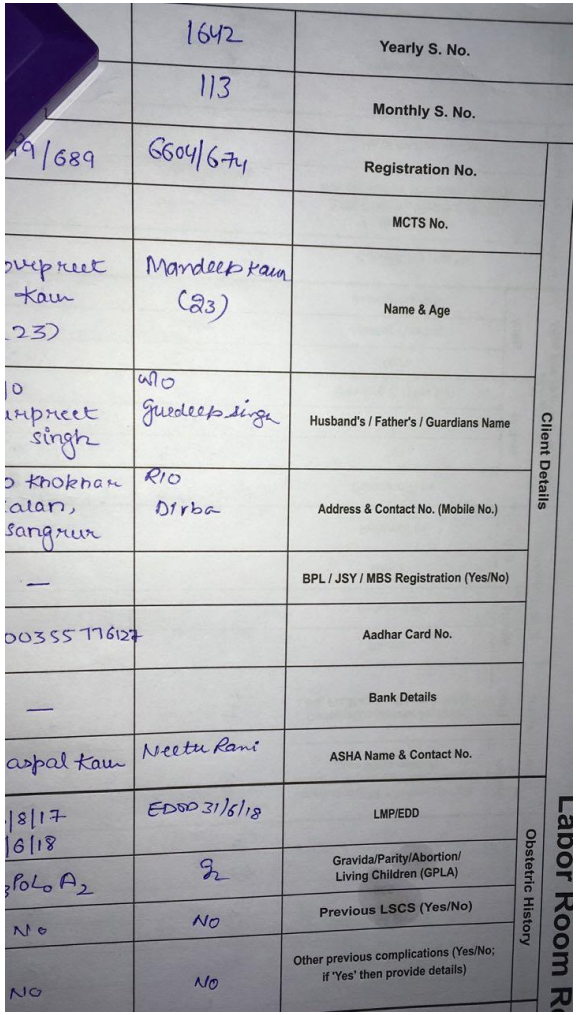
Cylinders are labelled and IEC material is Displayed



CARE AROUND BIRTH REGISTER TO CALCULATE OUTCOME INDICATORS



		Single / Multiple	Baby
	PTL	Term (Full term/ Preterm / Post term)	Baby
	A 37°c	Alive / Fresh Stillbirth / Macerated Stillbirth / Newborn Death	Baby
	1/3/1597	Identification No.	Information about Baby
	Male	Sex (Male / Female / Other)	Information about Baby
	1.5kg	Weight (Kgs)	Information about Baby
	Yes	Dried immediately after birth (Yes/No)	Information about Baby
	N	** Resuscitation required (Yes/No)	Information about Baby
	Y	Brest feed within 1 hours (Yes/No ; if 'No' then mention time)	Information about Baby
	Y	Vitamin K1 given (Yes/No)	Information about Baby
	—	BCG	Vaccination (Yes/No)
	Y	OPV	Vaccination (Yes/No)
	Y	Hep B	Vaccination (Yes/No)
		Complication (APH; PPH; Pre-Eclampsia; Eclampsia; Sepsis; Obs. labor; Prolonged labor; Others (specify))	Mother
	LBW KMC given (Premature)	Complication (Sepsis; Asphyxia; LBW; Pre Maturity; Others (specify))	Baby
		Reason	Mother
		Referred to	Mother
		Reason	Baby



1642	Yearly S. No.	
113	Monthly S. No.	
G604/674	Registration No.	Client Details
	MCTS No.	Client Details
Mandeep Kaur (23)	Name & Age	Client Details
W/O Gurdeep Singh	Husband's / Father's / Guardians Name	Client Details
R/O Dirba	Address & Contact No. (Mobile No.)	Client Details
—	BPL / JSY / MBS Registration (Yes/No)	Client Details
	Aadhar Card No.	Client Details
—	Bank Details	Client Details
Neetu Rani	ASHA Name & Contact No.	Client Details
EDD 31/6/18	LMP/EDD	Obsteric History
2	Gravida/Parity/Abortion/ Living Children (GPLA)	Obsteric History
NO	Previous LSCS (Yes/No)	Obsteric History
NO	Other previous complications (Yes/No; if 'Yes' then provide details)	Obsteric History

Thank You.