

Referred maternal cases at Mahila chikitsalaya, Sanganeri gate, Jaipur: A Descriptive Study

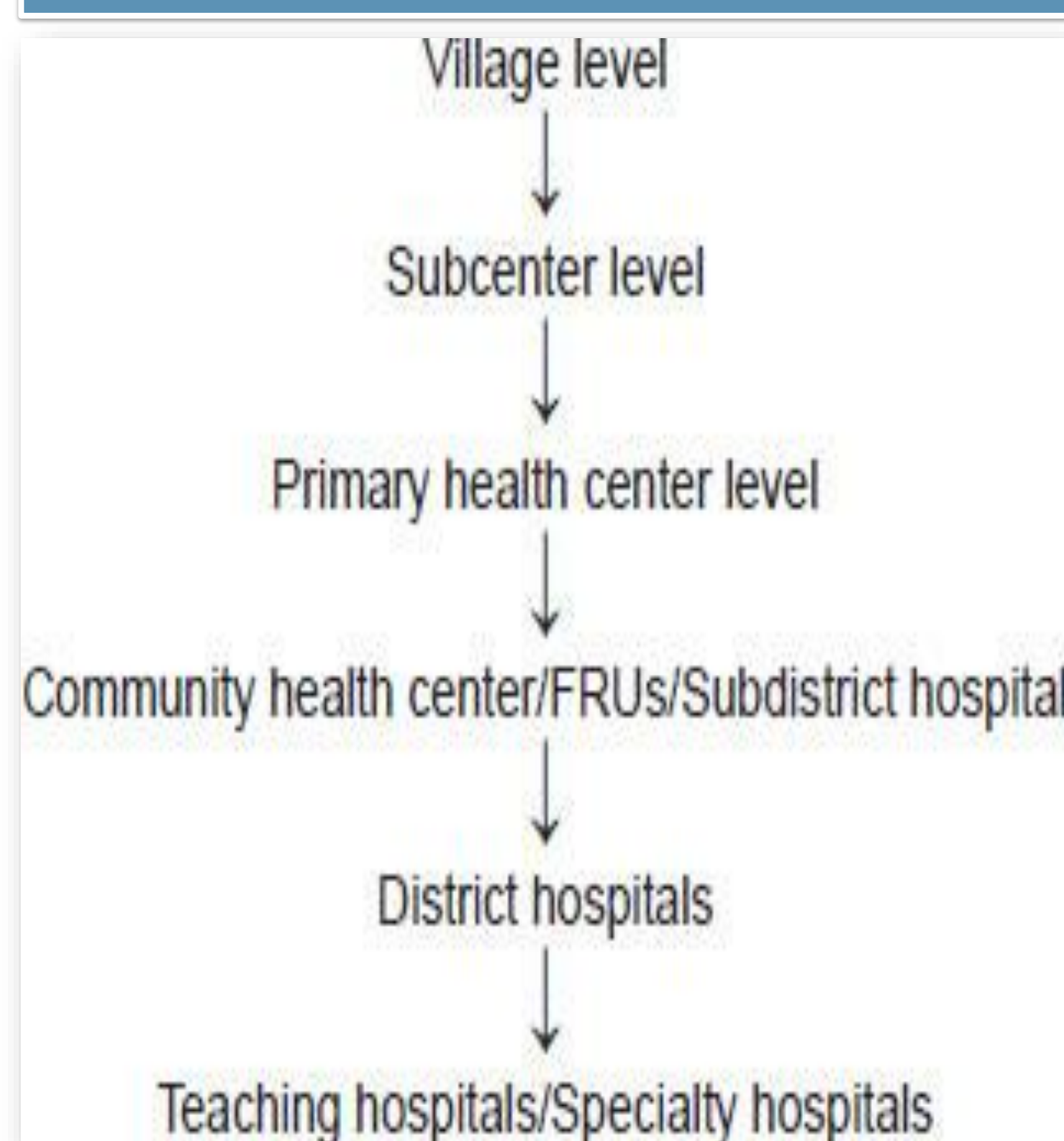
Background

- Maternal Mortality Ratio (MMR) continues to remain high in state with respect to National average. Current MMR of India is 97 per lakh live birth and current MMR of Rajasthan is 113 per lakh live births.
- National Health Mission (NHM) offers institutional mechanism and strategic options to reduce MMR and also to improve referral system.

PROBLEM STATEMENT-

1. A study to evaluate the patterns and outcomes of referral-in cases from primary and secondary healthcare facilities in maternal and child hospital , Sanganeri gate, Jaipur .
2. This study intends to shed light on the process of receiving referrals from basic and secondary healthcare providers. The research will contribute to understanding regarding referral patterns, motives, patient outcomes, and elements affecting the referral process. The study's findings can help policy maker, healthcare professionals, and administrators improve the effectiveness and efficiency of referral systems, which will eventually result in better patient care.

Referral system



Objective

- To find out the status of referral in patients of maternal and child hospital with respect to
- Cause of referral
- District wise referral
- Transportation used
- To find out the referral in patients w.r.t to different level of health care facility
- Time of referral from primary and secondary healthcare facilities

Key learning during internship

- learned Skills needed for making questionnaires .
- Learned how to collect primary data using questionnaires and interview.
- Learned skills to clean and analysis of data using MS-Excel
- Learned how to write report of the survey

Methodology

Research design- Descriptive research

Sample –purposive sampling

Sample size -102(all referred cases in maternal and child hospital Sanganeri gate, Jaipur)

Duration -20 days

Method of data collection – primary through a self-designed questionnaire

Primary data: - collection of data by asking questions from referral in patient who enrolled in medical institution

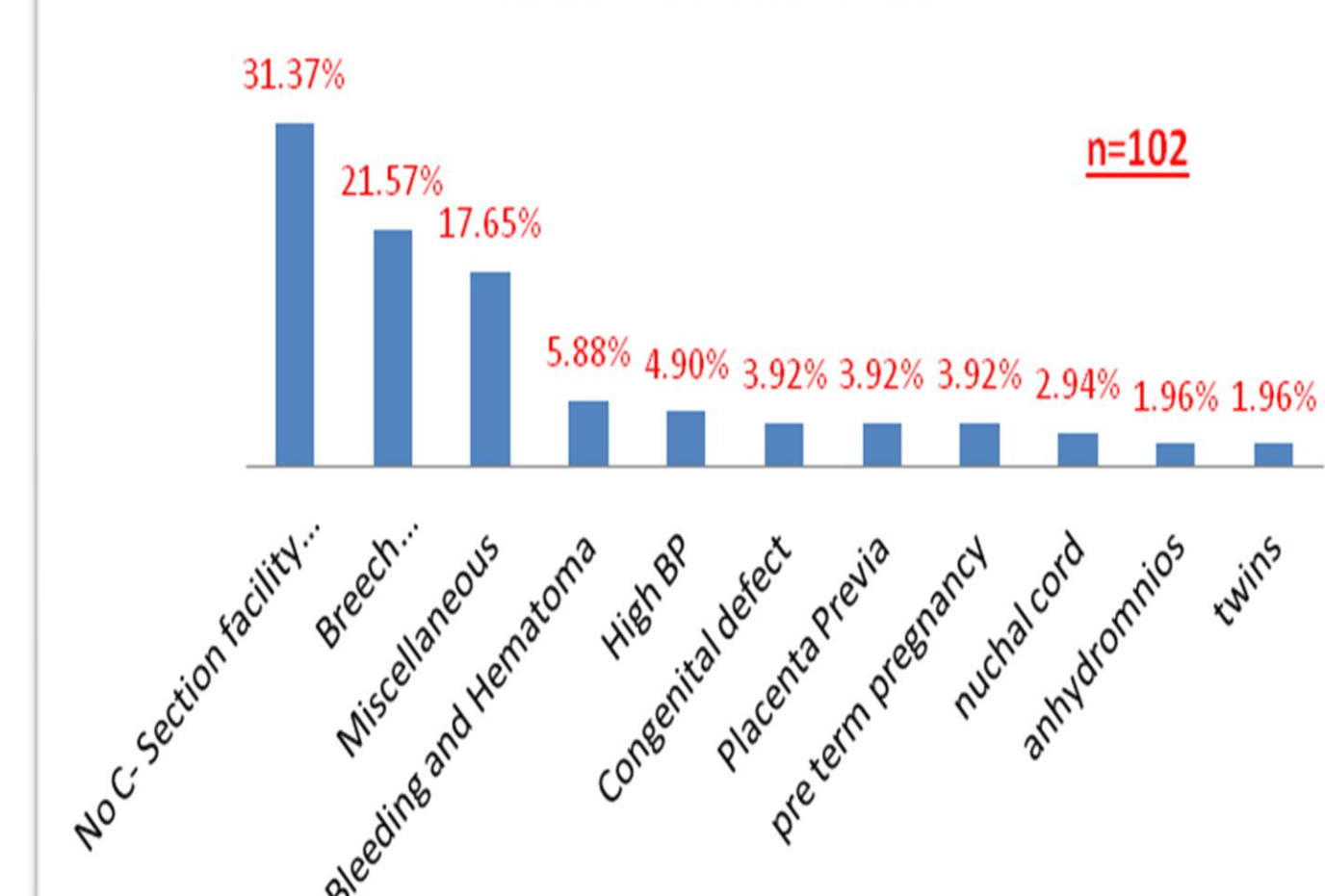
Limitations of data collection -

Problems identified during the collection of primary data is the Ineffective communication, Delayed referrals, Limited resources, Lack of coordination, Follow-up and feedback, hidden high risk pregnancy, ANC services

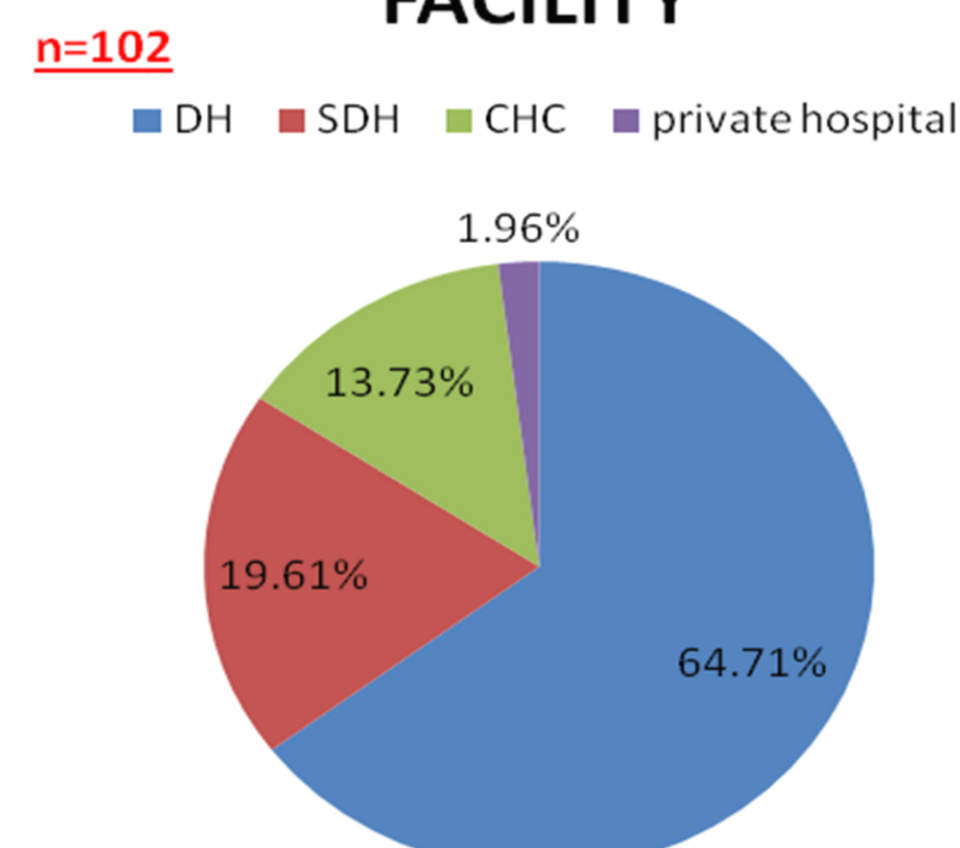
Data Analysis – through frequency and percentage

Report

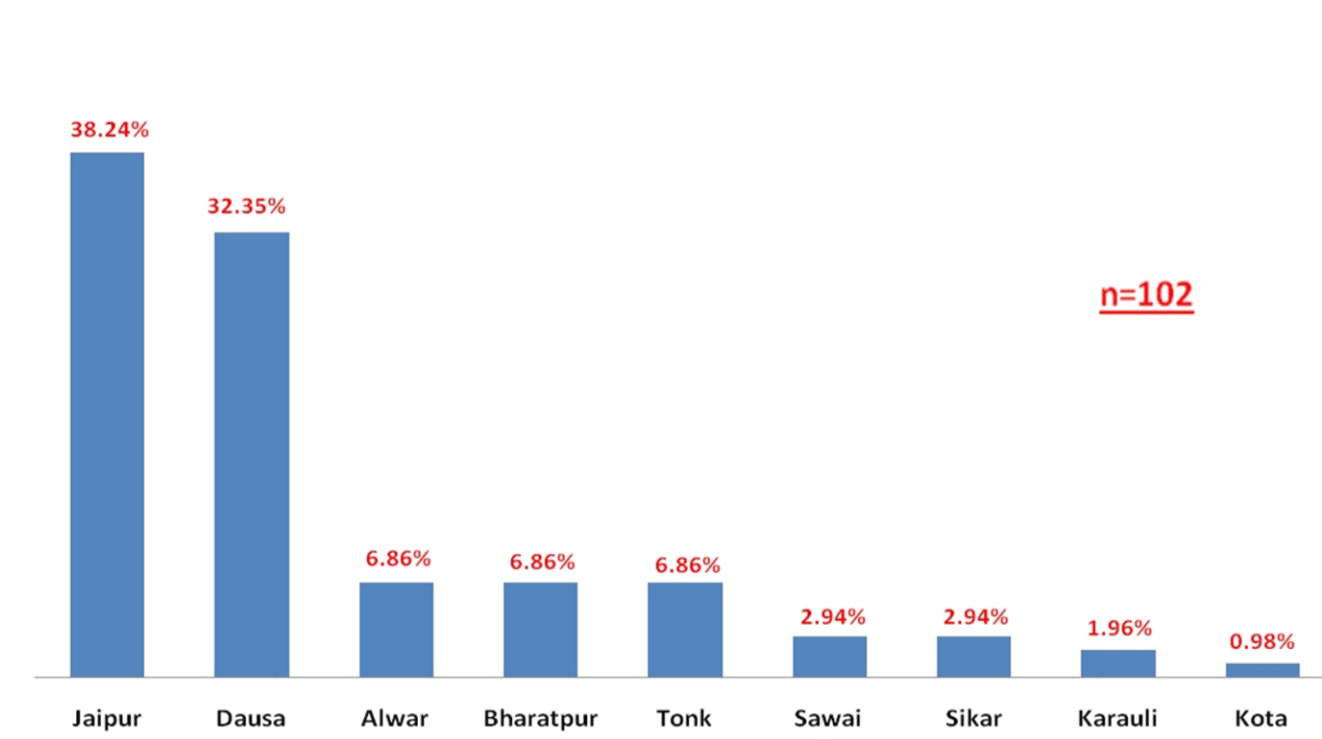
Cause of referral



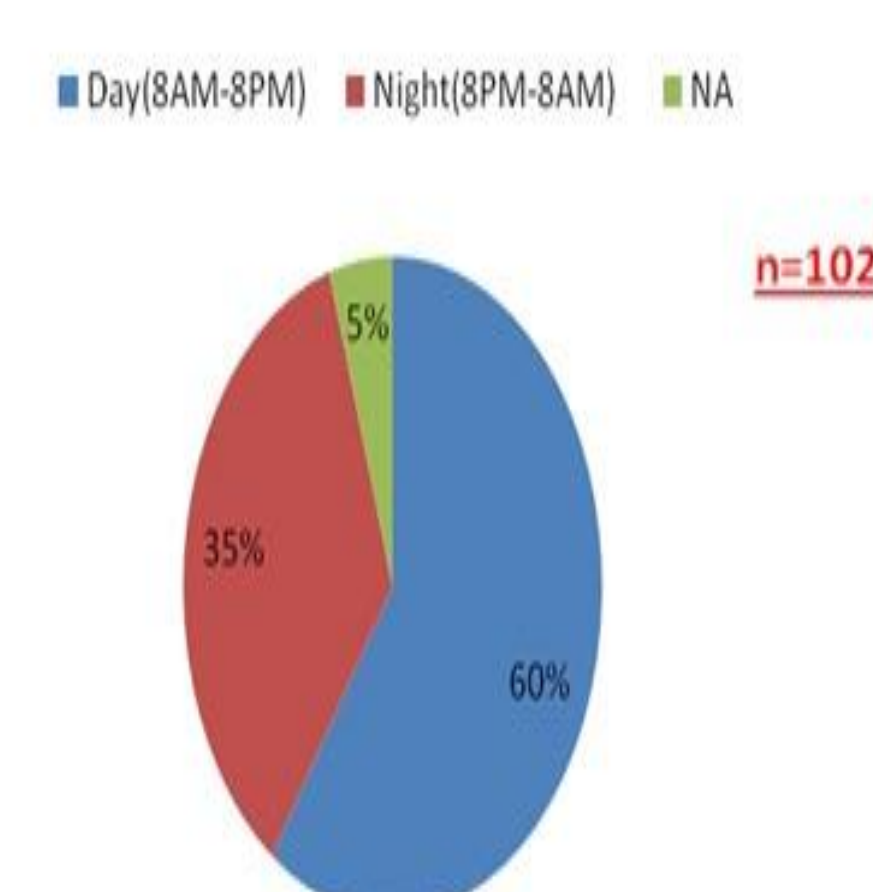
LEVEL OF HEALTHCARE FACILITY



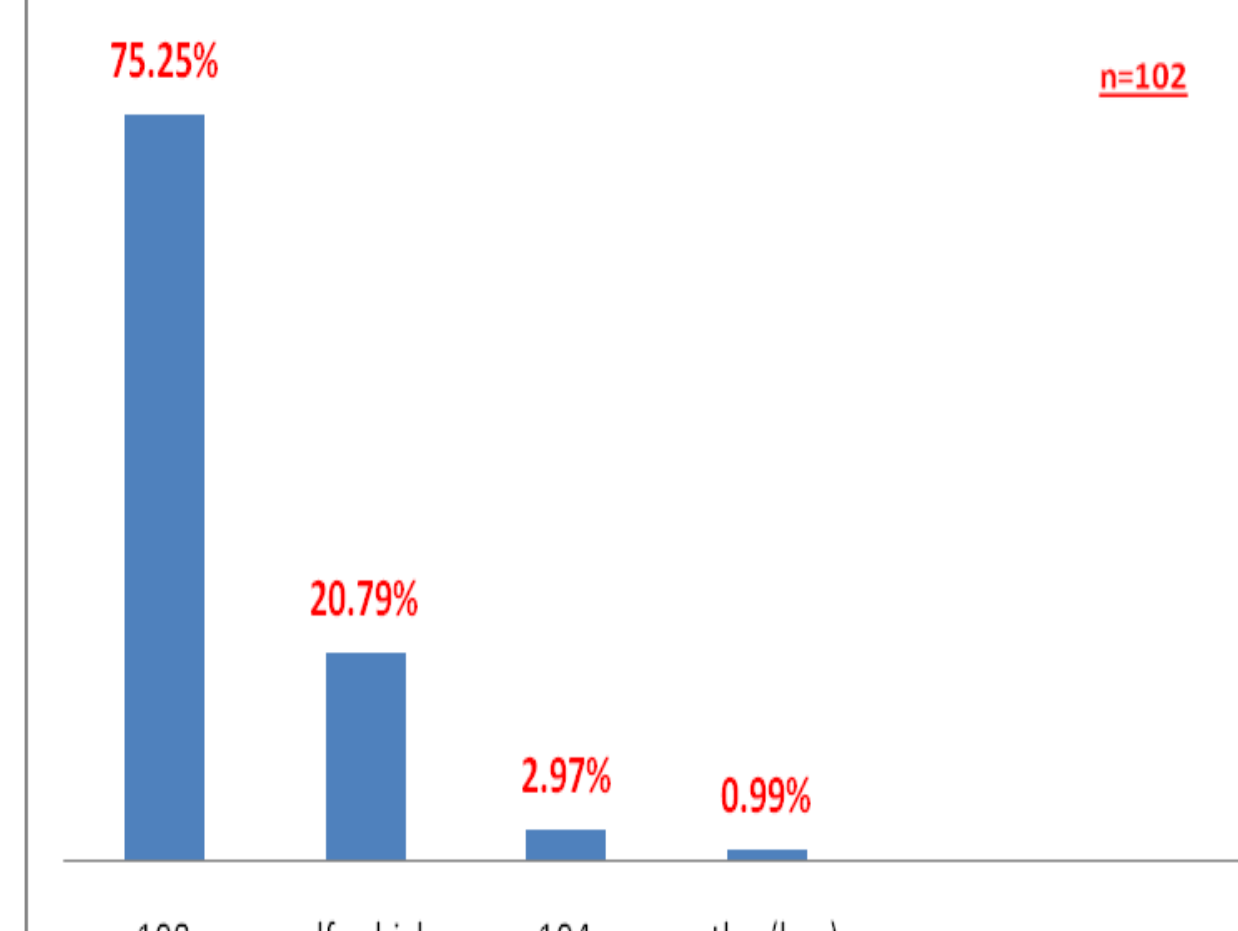
District wise referral



Time of referral



mode of transport used



Key finding for referral in cases

- ❑Most of the women 92% had registered their pregnancies using MAMTA card and the average ANC visits was 3.
- ❑With highest number of referrals out cases from district Jaipur 38% (n=39) followed by Dausa 32% (n=33) and others are namely Alwar and Bharatpur 6% (n=7).
- ❑Districts having the majority of referrals 38% (n = 39), 32% (n = 33) and 6% (n = 7) were referred by a doctor.
- ❑One-thirds (21%, n = 29) travelled more than 200 km from the referral centres travelling for more than 2 h to arrive at maternal and child hospital Jaipur.
- ❑Around 75% referral-out patient used government provided vehicle to reach out to the maternal and child hospital.

CHALLENGES FACED

- Ineffective communication.
- Lack of training.
- Emotional and Sensitive Situations.
- Limited resources.
- Lack of coordination.

SUGGESTIONS

- Needs training before conduction of survey.
- Needed to do more research on different aspect of referral-in cases and study in large population group in different districts.
- Community mobilization and awareness camp for rural areas regarding the importance of Maternal health.
- Continuous evaluation of intervention to improve referral-in cases and motivating the healthcare professionals in primary and secondary level.

Practical Exposure

- Helped me with hands-on experience in survey and collection of primary data and analysis of the same.
- Helped me understand the gap in the referral system.
- Helped me understand problems in grass root level and take corrective actions against them.

Theoretical Understanding

- It focuses on developing a comprehensive understanding of the underlying theories, concepts, and best practices in healthcare management.
- It helped me with the necessary knowledge and frameworks to analyze and propose solutions to complex healthcare management problems.

Usefulness of Internship

- Helped gaining practical exposure to the different department of NHM(Quality and Maternal health)
- By working closely with tertiary healthcare facilities helped me understanding how referral system works.
- Gave me knowledge about collection of primary data and analysis of the data for the same.

SWOT Analysis

S

Strong government support.
Extensive network.
Dedicated workforce.
Emphasis on Maternal and Child Health.
Community Participation.

O

Technological Advancements
Public-Private Partnerships
Health Education and Awareness

W

Infrastructure Challenges
Shortage of Healthcare Professionals
Health Disparities

T

Inadequate Funding
Health Emergencies and Epidemics
Socioeconomic Factors