

The Santokba Durlabhji Trust was founded in 1958 with a vision to provide quality care to the common man – without favour or discrimination. He Santokba Durlabhji Memorial Hospital was established in 1971. Inaugurated by the then Prime Minister, Smt. Indira Gandhi, the hospital was dedicated to the Armed Forces as the nation was then in the throes of a war with Pakistan. DMH is a private, trust-managed, autonomous, fee-for-services and not-for-profit hospital. It is a multidisciplinary, 480-bed, tertiary care hospital. It houses several wards, operation theatres, ICUs, laboratories, utility services, specialties and super specialties, including one of the best blood banks in the country, catering to the entire state of Rajasthan.

Introduction

- NABH CEO Dr Atul Mohan Kochhar said improving the quality of maternal healthcare in the country is certainly the need of the hour as India has one of the highest numbers of maternal deaths in the world.
- The initiative is aimed towards reducing the maternal mortality rates in line with the sustainable development goals and strengthening health systems in the state.
- The evidence collected from certified facilities who opted these 16 guidelines under MANYATA certification shows a 70% improvement in the healthcare staff being able to manage life-threatening complications, such as obstructed labor, pre-eclampsia and/or eclampsia, and postpartum haemorrhage.

MISSION

SDMH is committed to provide quality health care at the most affordable rates to all sections of society, irrespective of caste, creed or color. Towards making this possible, we pledge to dedicate all our efforts and all our energies.

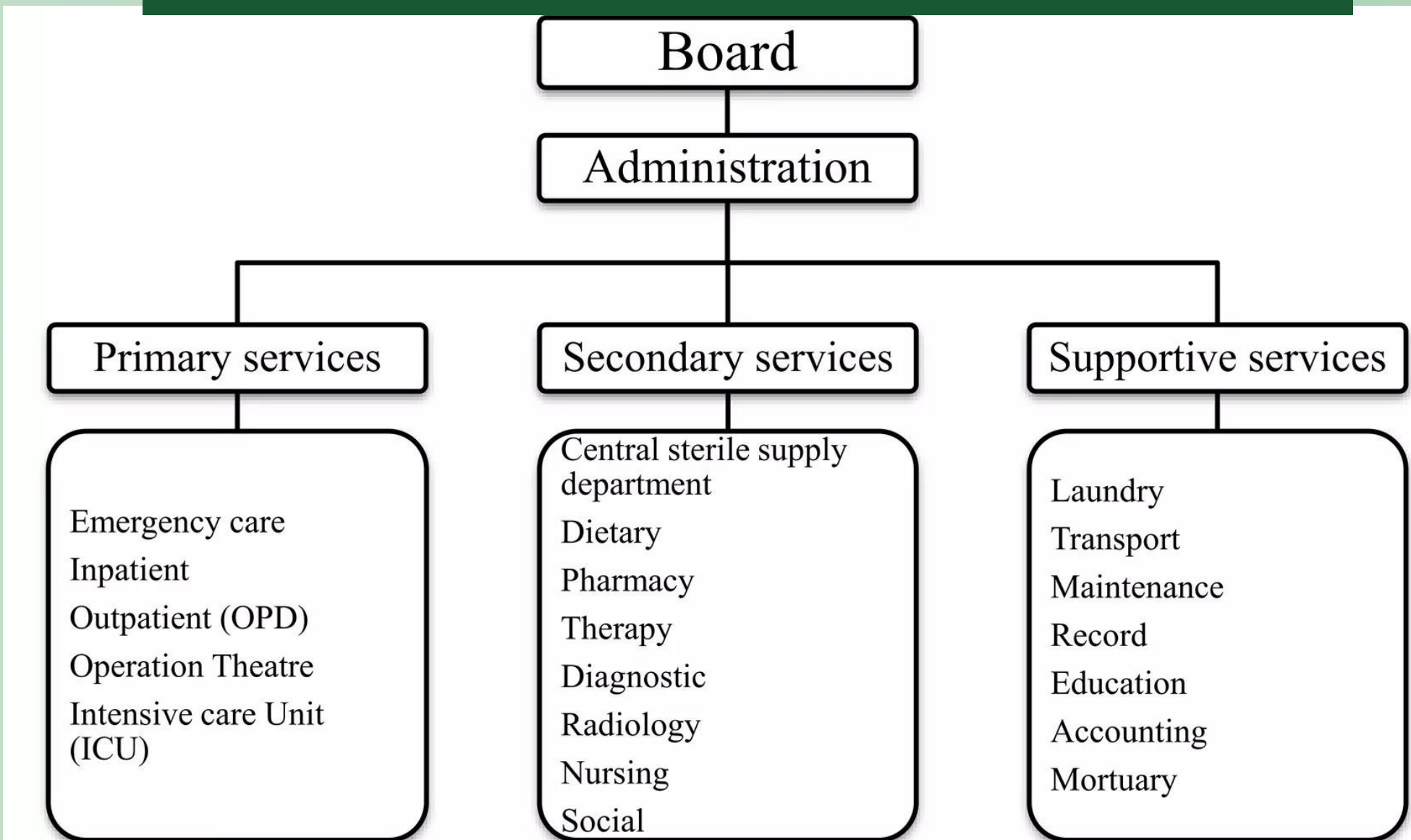
SDMH shall be an integrated quaternary healthcare hub for delivery of affordable quality medical care in an economically viable, regionally, nationally and internationally positioned institutional environment.

VISION

Objective

- The purpose of this study was the investigation that seeks to delve into the intricacies of the hospital's practices, policies, and protocols, critically evaluating their alignment with the prevailing standards in obstetrics and gynaecology. Through an assessment of existing processes and procedures, aim was to identify potential gaps or deficiencies that may hinder the attainment of optimal quality care
- By conducting an in-depth analysis, we endeavour to identify specific areas for improvement within the hospital's obstetrics and gynaecology department. These identified areas will serve as critical focal points for strategic enhancements, enabling the hospital to refine its practices and procedures, thereby raising the overall quality of care provided.

ORGANISATION STRUCTURE



Methodology

- The study design – The study design was secondary research and tool used for this research is “retrospective medical chart review” by the process of reading the files of In-patient records of pregnant females who have been admitted for giving birth or pregnant females who have given birth given birth in the facility of obstetrics and gynaecology department of the hospital
- Selection method – Randomised selection method was used for selecting files in the facility of obstetrics and gynaecology department of the hospital.
- Audit files – Closed file audit
- Audited files quantity – the audit was done on around 100 files which concluded in 15 days.

INPUTS



EXCLUSIVE BREASTFEEDING

- Put your baby to your breast immediately after birth, definitely within 1 hour. This helps in establishing lactation and bonding
- Mother's first yellow milk protects the baby
- Breast milk provides all nutrients and contains sufficient water. Do not give your baby anything else to eat or drink, not even honey or water in the first 6 months.
- Breastfeeding improves intelligence.
- Keep your baby in close contact with your skin. While breastfeeding, smile, talk and look into your baby's eyes, but don't rock him/her while feeding.

MOTHER CARE AFTER BIRTH

- Avoid strenuous activities in the early postpartum period and take plenty of rest for the first 2-3 weeks and slowly start with non-impact activities such as walking and a gradual return to previous activities is recommended.
- Women may experience full, firm, and tender breasts after the delivery. Frequent breastfeeding on both breasts is recommended to avoid engorgement, use warm washcloths or warm showers or place cold washcloths between feedings to relieve the pain.
- Take a variety of healthy balanced diets and resume normal dietary habits. All breast-feeding mothers need to take extra 500 calories per day.

SPACING

- Maintaining spacing of 3 years between two children has a healthy impact on both the mother and baby's health. You can avail any spacing method from the wide basket of choices: such as IUCD, Condoms, Progesterone-only pill, Combined Oral contraceptive pills, Injectable MPA

Challenges

- Incomplete Cross-Checking: Due to the extensive nature of the study and the limited resources available, it was not feasible to cross-check every single point, Although efforts were made to ensure a comprehensive analysis, there may be some aspects that were not thoroughly examined.
- Lack of Physical Witnessing: Another limitation was the absence of physical observation or direct witnessing of certain factors mentioned in the medical files

Learnings

- To have a better understanding of an organization working on large scale projects
- Practical exposure of working in cooperate environment
- To establish communication and improvement of soft skills

Usefulness of internship

- Clarity
- Interactions
- Decision making
- New skills
- Hands-on experience

SWOT Analysis

STRENGTHS

In the research findings, it was evident that the clinical protocols of the department are commendable, adhering to standard guidelines and prioritizing the physical health of both the mother and child. This commitment to consistency and strictness sets the services of SDMH hospital apart from others, making them of superior quality. The hospital has familiar work culture and is more economical as compared to other 500 bedded hospitals

WEAKNESS

- When considering the mental and emotional wellbeing of the mother and her family, certain gaps have been identified through the study like :
- Absence of a protocol allowing birth companions in the labor room.
 - No proper counselling of mothers t importance breastfeeding within 1 hour of birth.
 - Absence of counsellor specifically assigned to address maternal mental well being before and after birth.
 - Less importance to postpartum depression

OPPORTUNITIES

- Experienced and well trained staff
- Enthusiastic work environment which makes it easy for them to learn new skills and adapt new technologies.
- Affiliative managing styles helps keep work environment focused and healthy
- Trust of patients in the hospital for its services.

THREATS

- Awareness amongst people towards importance of mental well being
- Other hospitals who have already taken steps towards the importance of mother's mental well being and are focusing more on quality care.

Conclusion & Suggestions

In conclusion, the assessment of the pre-natal, antenatal, and post-natal care provided to mothers and children at SDMH Hospitals, based on the FOGSI 16 clinical standards, revealed commendable adherence to many of the guidelines. The hospital demonstrated strengths in comprehensive screening, provider preparation for safe delivery, proper assessment of pregnant women, infection prevention practices, progress monitoring, safe and clean birth practices, immediate newborn care, active management of the third stage of labor, and postpartum haemorrhage management.

However, the assessment also identified areas for improvement and potential gaps in current practices. These include the need for screening records for syphilis and malaria, encouraging the presence of birth companions during labor, recording kangaroo care for low-birth-weight infants, ensuring proper documentation of early initiation of breastfeeding, enhancing mother's counseling on breastfeeding, incorporating evidence-based procedures for diagnosing postpartum depression, and providing counseling on danger signs and postpartum family planning.

Addressing these areas of improvement and implementing the recommended changes will further enhance the quality of care provided to mothers and children at SDMH Hospital