A Study on FRU-Readiness Assessment in Indore Division, Madhya Pradesh

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ABOUT IHAT

India Health Action Trust (IHAT) works towards reducing inequities by developing comprehensive and sustainable programs to improve population health.
IHAT was instituted in 2003 as a Charitable Trust under the Indian Trust Act, 1882 and is registered with the Ministry of Home Affairs under the Foreign Contribution (Regulation) Act,1976, under section 12A(a) of the Income Tax Act, 1961 and with the Ministry of Corporate Affairs under the Companies (Corporate Social Responsibility Policy) Amendment Rules 2021.
We work closely with the Government of India and state governments to achieve public health goals. Our work is focused in areas of prevention and control of HIV and Tuberculosis, in achieving significant improvements in Reproductive, Maternal, Neonatal and Child Health, improved Nutrition among mothers and children, and strengthening health systems. Our work is aligned with the Sustainable Development Goals.

ABOUT RRTC

Regional Resource Training Centre (RRTC) is a facility mentoring program to strengthen and to operationalize First Referral Unit (FRUs) to improve CEmONC Services to reduce maternal & neonatal mortalities..

AIM AND OBJECTIVE

Project title: "Assessing the status of out-referrals of the maternal complication cases from the FRUs in Indore division and its association with the availability of Human Resource at the facility level".
Objective: To enlist the facilities having high number of out referrals in maternal complication cases.
To identify the probable causes of high number of referrals.
To Map the HR availability at these facilities.

DISTRICTS	FACILITIES VISITED
INDORE	DH Indore, SDH Indore, CH MHOW, CH Sanwer, CHC Depalpur, UCHC Banganga
BURHAPUR	DH Burhanpur
KHARGONE	DH Khargone, CH Sanavad, CHC Maheshwar
KHANDWA	DH Khandwa, CHC Mundi
DHAR	DH Dhar, CH Kukshi, CH Badnawar, CH Manawar, CH Sardarpur, CHC Dhamnod, CHC Pithampur
BARWANI	DH Barwani, CH Sendhwa
ALIRAJPUR	DH Alirajpur, CHC Jobat

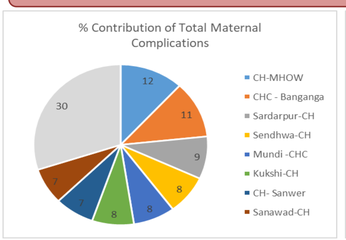
METHODOLOGY

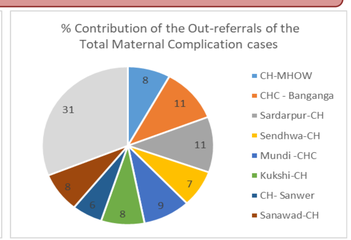
MAPPING OF FRUs — Mapping of FRUs which includes District, Sub-district Hospitals and Community Health Centers in 3 divisions i.e. Indore, Bhopal and Jabalpur, in the state of Madhya Pradesh.

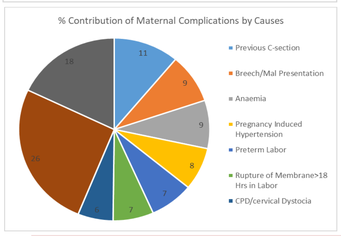
BASELINE ASSESSMENT — Primary data collection from the designated FRUs with regards to the infrastructure, availability of drugs and equipment and the service statistics of all departments related with maternal and child health through a detailed checklist derived from GOI guidelines.

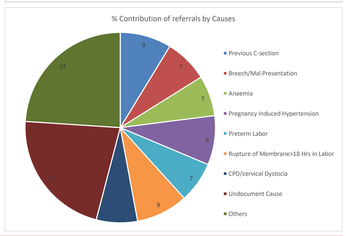
ANALYSIS OF DATA — Analysis of collected data to further proceed with cascading training model for strengthening the FRUs and up-skill to reduce the maternal as well as neonatal deaths.

PROJECT FINDINGS







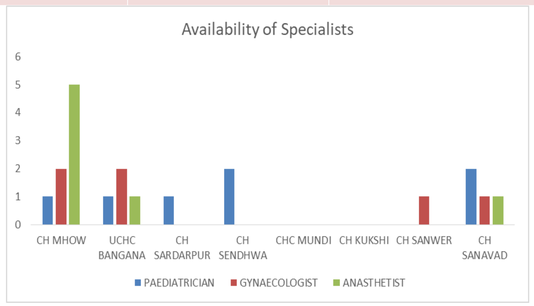


OBSERVATION: - Facilities with relatively higher number of maternal complication cases also had a higher number of out- referrals. The major maternal complications according to the number of cases.

Criterion	<100 deliveries/month	100-200 deliveries/month	200-500 deliveries/month
Human Resource (According to MNH toolkit by MoHFW)	MO: 1-2 Staff Nurse: 4	MO: 4 Staff Nurse: 4 ANM: 4	MO: 4 OBG:4 Anesth: 1 Peads: 1 Staff Nurse: 8

INTERPRETATION

One of the major reason for higher number of out-referrals can be linked with lack of adequate human resource with regards to the clinical staff.



CONCLUSION

In order to strengthen the First Referral Units to reduce the out-referrals of the maternal complication cases:

- Adequate HR is required at the Sub-District Hospitals and community Health Centers.
- Continuous training of the staff is to be ensured to enhance the knowledge and skills of the staff for assuring provision of quality services.

SWOT ANALYSIS

STRENGTHS

- ❖ The best place to work with people from diverse backgrounds and experiences.
- ❖ Has got a great hold in the public health sector of various regions of the country.
- ❖ Strong liaison with the government sector

WEAKNESSES

- ❖ Inadequate Human resources.
- ❖ Gaps in collaboration at the team level
- ❖ Funding issues.

OPPORTUNITIES

- ❖ Support from donor agencies and other sectorial organizations.
- ❖ Good community response.
- ❖ Clearly defined and transparent policies.

THREATS

- ❖ Restrictions/delays in the implementation of the project from the government sector.
- ❖ Sustainability problems due to lack of funding.

CHALLENGES

- Additional pressure to complete the assigned target on given time.
- Competitive environment which tests your technical as well as social skills.
- Discrepancies and/or missing data during primary data collection.

DIFFERENCE BETWEEN PRACTICLE EXPOSURE AND THEORETICAL WORK

- Got a prospect to improvise and polish the theoretical knowledge gained about public health in the university during studies.
- Also got to enhance my social skills through industry exposure.

USEFULNESS OF INTERNSHIP

- Interaction with industry veterans giving exposure and insights.
- Got to amalgamate my medical as well as managerial knowledge to work for the project.
- Enhancement in coordination, time-management and teamwork skills.

LEARNINGS AND VALUE ADDITIONS

- Learned about the technical aspects of MNH Toolkit.
- Got familiar with primary data collection and basics of data assessment.
- Real-time exposure to Public Health sector.

SUGGESTIONS

- Proper training for data recording at the facility level is required.
- Review meetings to be organized regularly to assess the shortcomings.
- Vigorous working on implementation of the project.