



ANALYSIS OF PARAMETERS AND MONITORING FRAMEWORK TO ASSESS THE EFFECTIVENESS OF PRADHAN MANTRI SURAKSHIT MATRITVA ABHIYAN



Special antenatal care by a specialist/ medical officers at any government facility free of cost

Additional protection along with routine antenatal check up to detect high risk pregnancies, on fixed day

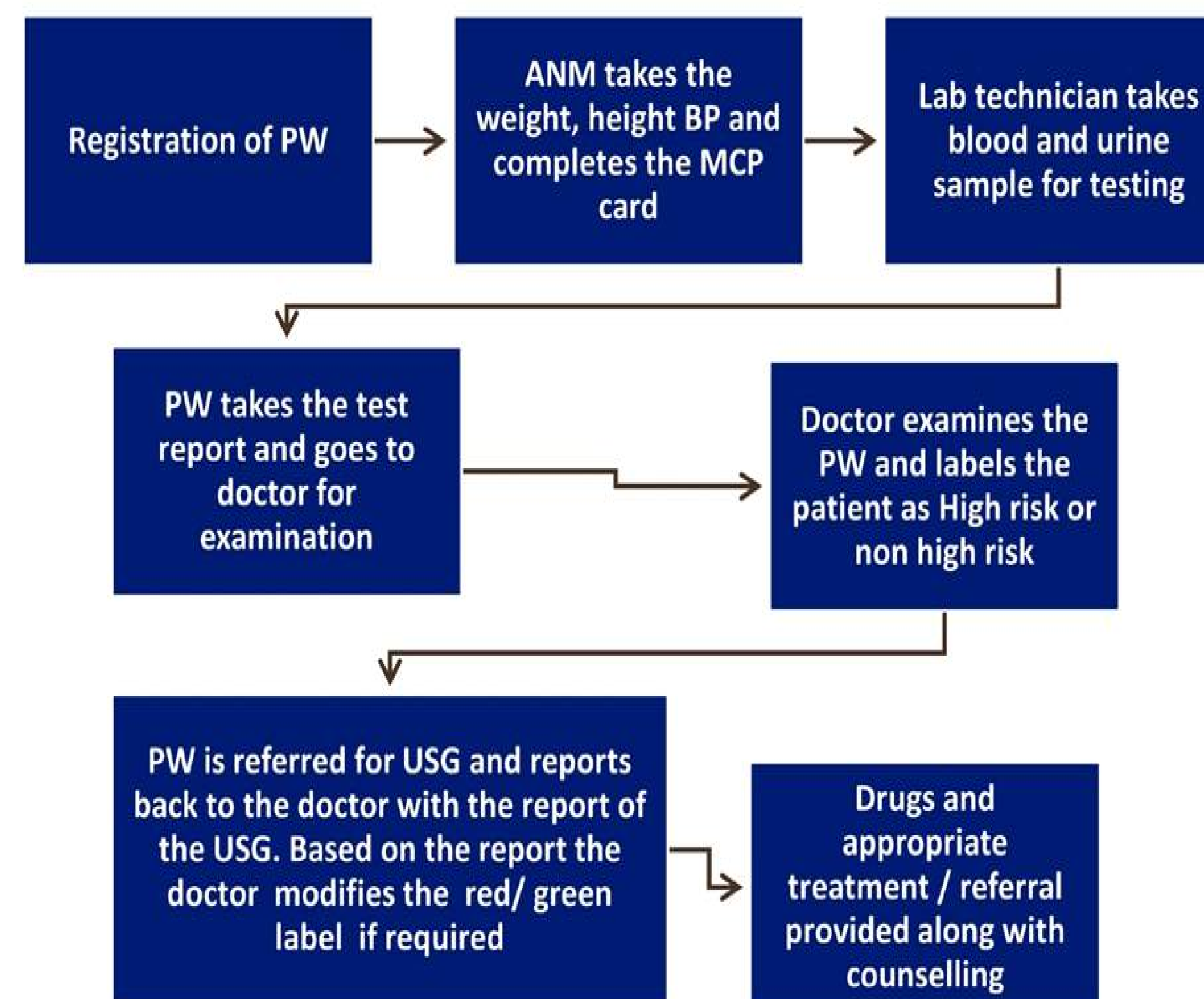
Focus on women in the 2nd and 3rd trimester of pregnancy



INTRODUCTION : Government of India launched the Pradhan Mantri Surakshit Matritva Abhiyan scheme in July 2016. The program aims to provide assured, comprehensive and quality antenatal care, free of cost, universally to all pregnant women on one day of every month across the country.



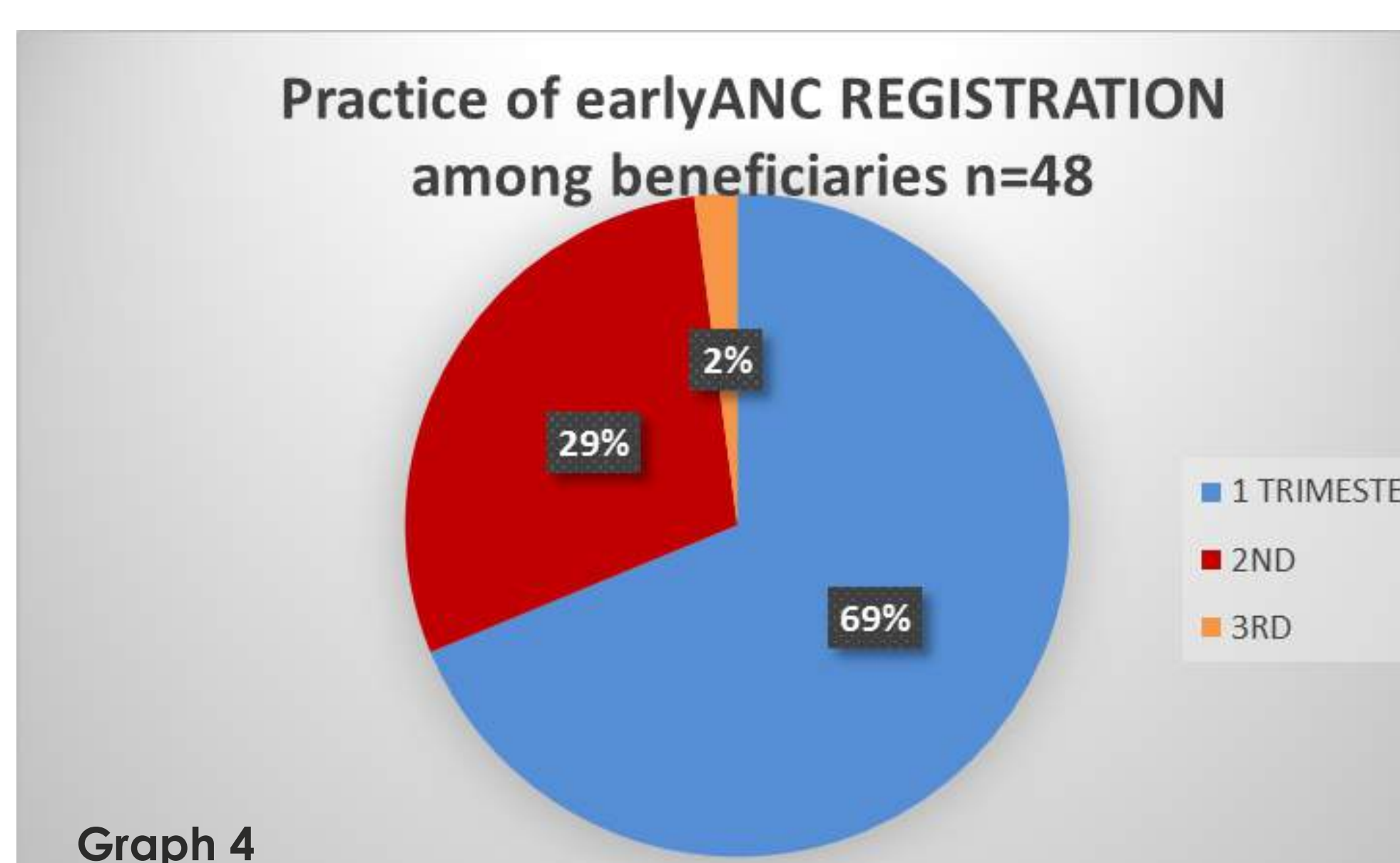
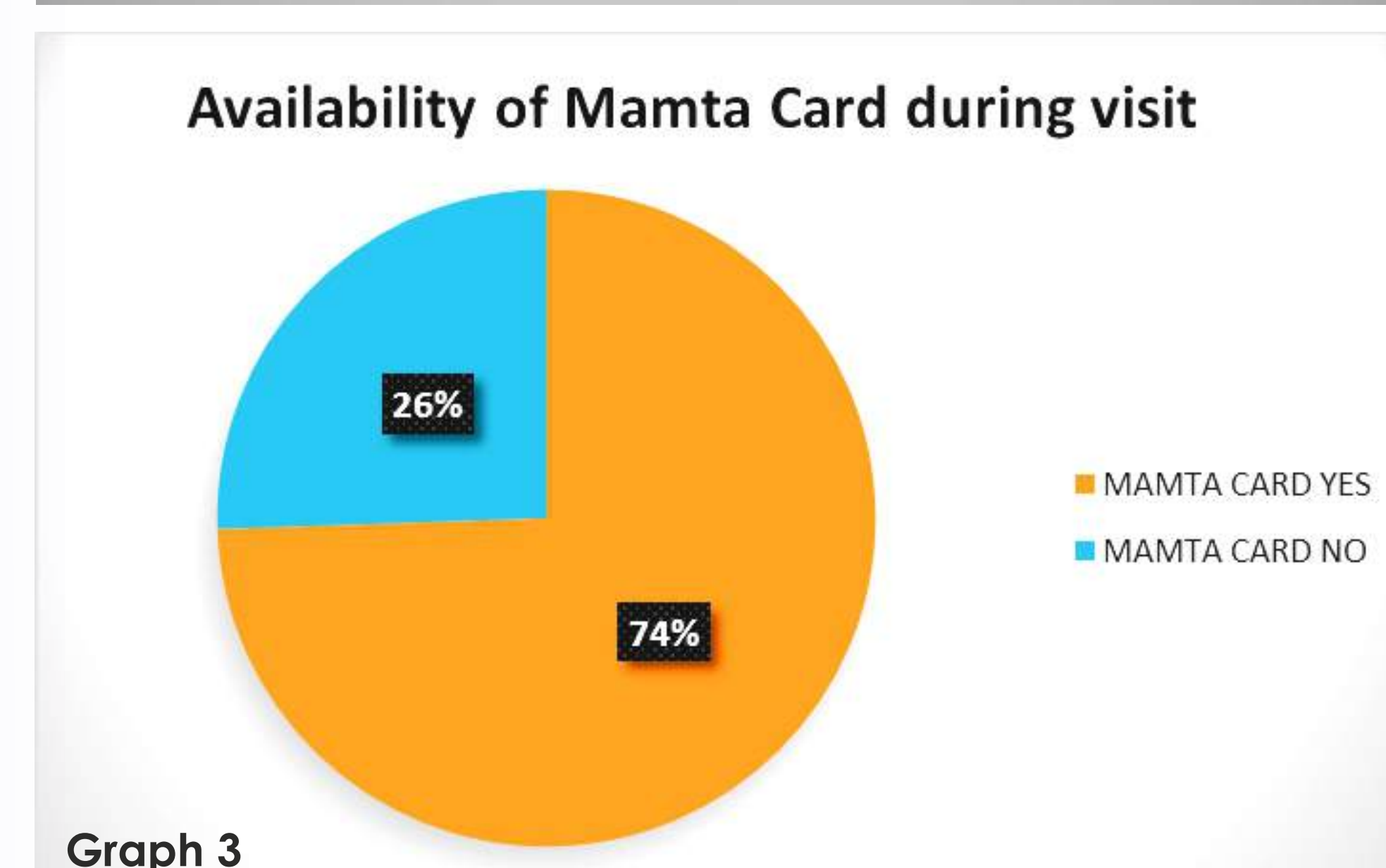
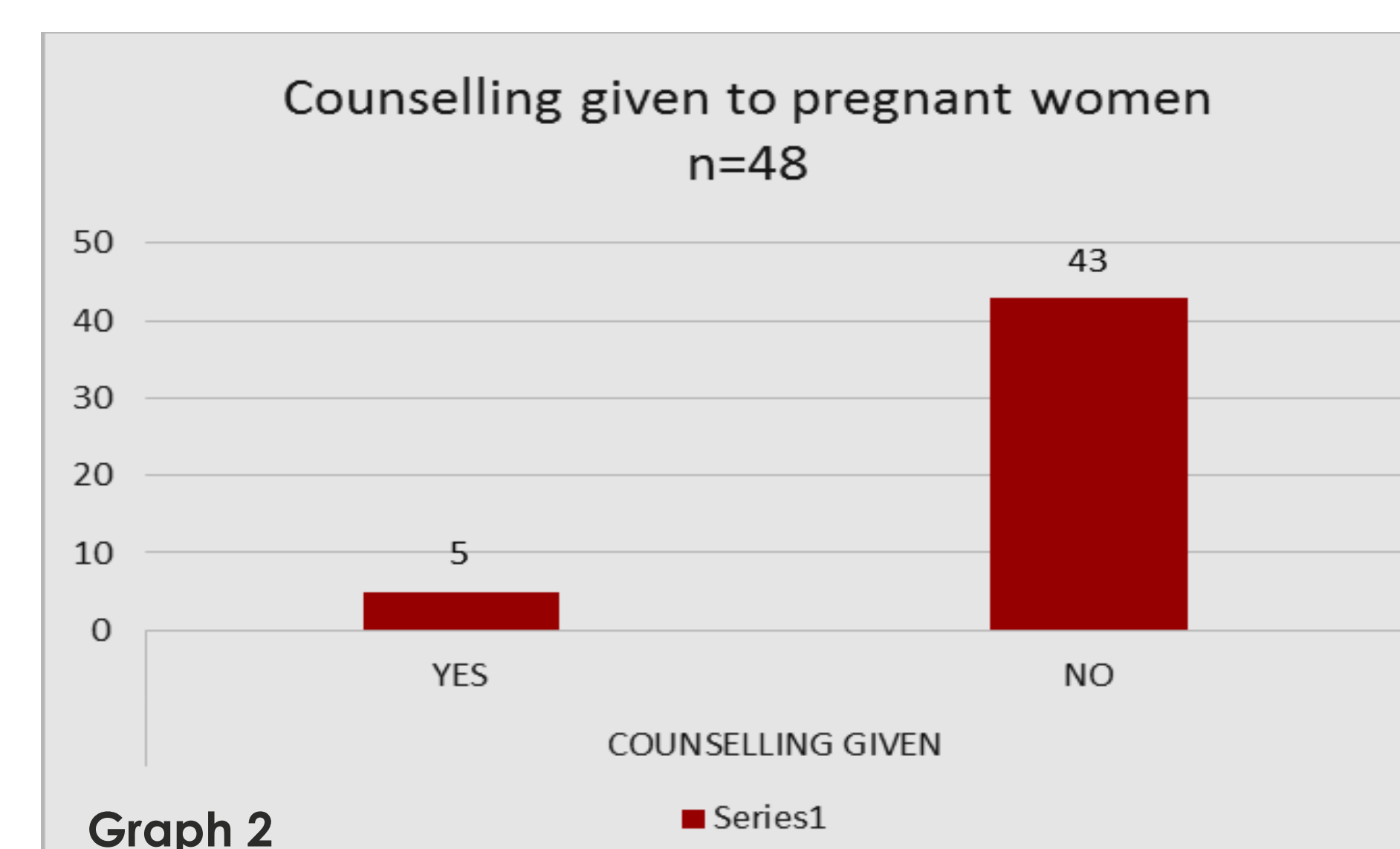
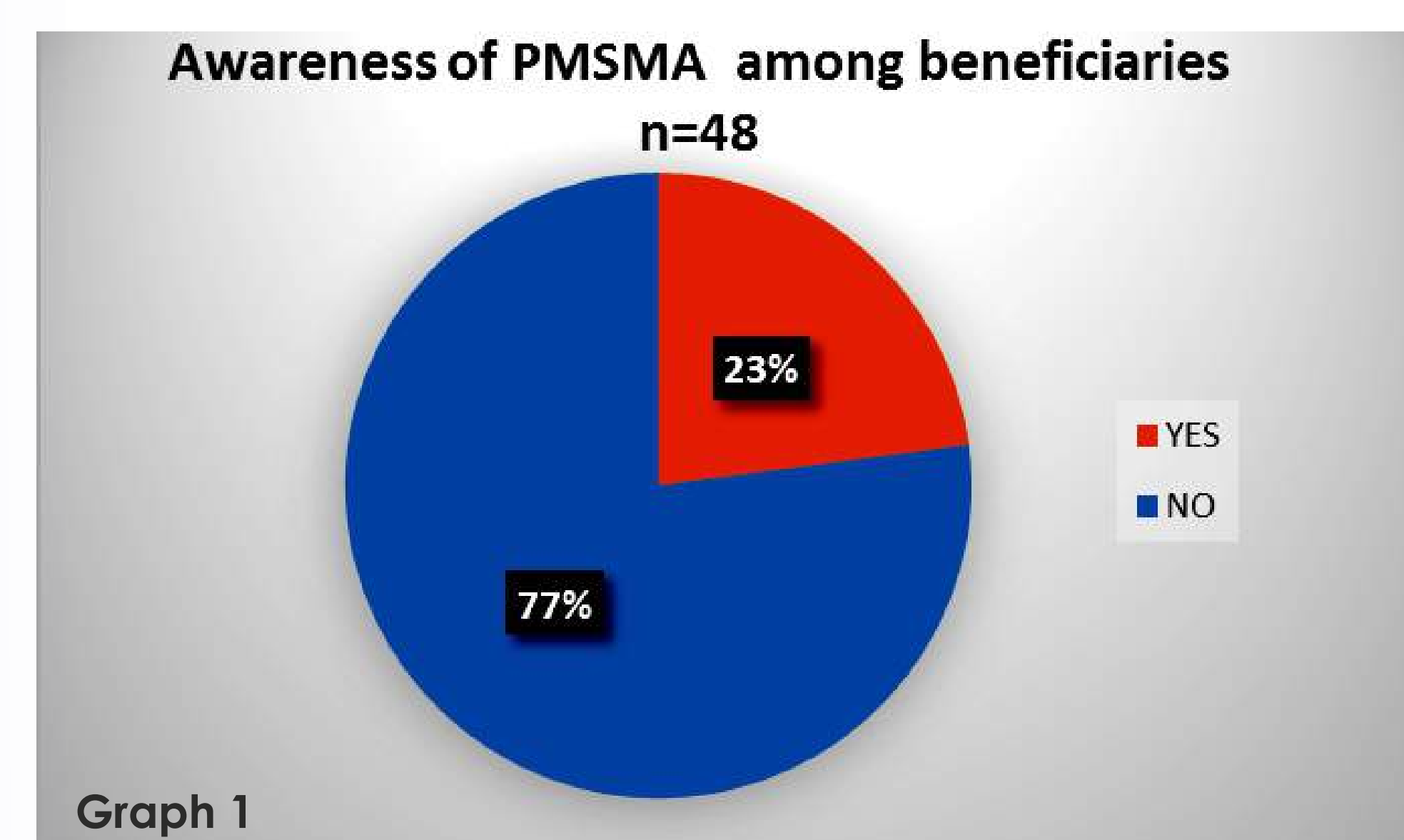
PROCEDURE, Source: PMSMA guidelines



OBSERVATIONS FROM VISITING THE FACILITY AND FINDINGS

S NO	PARAMETERS	AVALIABILITY		FUNCTIONALITY	
		YES	NO	YES	NO
1.	TT INJECTION	☒	☐	☒	☐
2.	IRON FOLIC ACID TABLETS	☒	☐	☒	☐
3.	IV IRON SUCROSE	☒	☐	☒	☐
4.	HIV KIT	☒	☐	☒	☐
5.	SYPHILLIS TEST KIT	☒	☐	☒	☐
6.	B.P. MACHINE	☒	☐	☒	☐
7.	WEIGHING SCALE MACHINE	☒	☐	☒	☐
8.	TAB ALBENDAZOLE	☒	☐	☐	☒
9.	USG MACHINE	☐	☒	☐	☒
10.	THERMOMETER	☒	☐	☐	☒
11.	FETOSCOPE	☒	☐	☒	☐
12.	SUGAR TEST	☒	☐	☒	☐
13.	SITTING FACILITY	☐	☒	☐	☒
14.	DRINKING WATER AVAIL- ABILITY	☒	☐	☒	☐
15.	IEC AT FACILITY	☒	☐	☐	☒
16.	HRP STICKERS	☐	☒	☐	☒

DATA ANALYSIS



CONCLUSION

We can say that the effectiveness of the camp is low in the community and we need to focus on resolving the gaps of program because:

- People don't have knowledge of these camps so it hinders the success of these camps to some extent.
- There is no proper counselling of the pregnant women which affects the antenatal and postnatal care .
- Absence of Availability of Mamta card and HRP stickers prevents marking of the High risk pregnancies .
- Early registrations are not on priority.

SUGGESTION

- Ensuring availability of USG and HRP stickers and conducting regular annual audits for the materials at the facility.
- Placement of IEC material at commonly visited public places and health facilities along with use of inter- personal communication to increase the reach.
- Irrespective of the antenatal camps attended previously, focus should be on beneficiaries should attend at least one additional ante-natal care clinic conducted as a part of PMSMA, during their second or third trimester.
- Utilization of the waiting time for counselling of pregnant women.
- ANM/ASHA should be trained to measure blood pressure, hemoglobin so that they can identify the HRPs at a very early stage as they are the frontline health workers.
- Encourage ASHAs to improve the practices of counselling, early registration, informing mothers about the importance of bringing mamta card.

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RATIONALE

If pregnant women are examined by a physician , investigated and followed up during the PMSMA — the process can result in reduced number of maternal and neonatal deaths in the country.

This study was done to find the gaps in the effectiveness and functioning of PMSMA and for gaining knowledge and skills .

OBJECTIVE

1. To carry out a rapid situational analysis to assess the effectiveness of PMSMA camp in the community through observational study.
2. To assess the awareness of beneficiaries in the PMSMA camp .
3. To assess the practice level off ASHAs regarding the ANC serives.

METHODOLOGY

Study Design: The study is Cross-sectional analytic in nature

Sample size- 48 pregnant women, 10 ASHAs.

Study duration: one month

Study tool: The survey comprised semi-structured questionnaires for pregnant women and ASHAs in the sampled district and observation checklists.

Study location: CHC Sanganer, Sanganer block, district Jaipur, Rajasthan

Study respondents: Mothers pregnant 1-9 months who came for ANC checkup.

Sampling method: Purposive sampling. The study is confined to one CHC only.