



Coaching to increase availability of essential birth supplies for the WHO Safe Childbirth Checklist in Uttar Pradesh, India


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Acknowledgement: Amit Gosh, Mission Director- National Health Mission, Uttar Pradesh

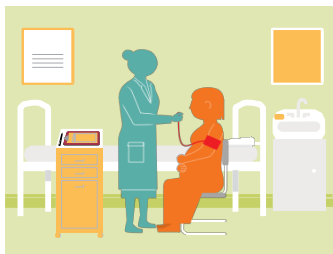


BetterBirth Program

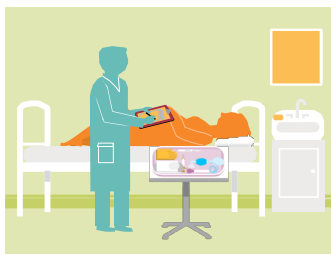
- Checklist-based intervention
 - Coaching
 - Data feedback
- 120 facilities
- Uttar Pradesh (UP)
- Community Health Center Level

SAFE CHILDBIRTH CHECKLIST		 World Health Organization	
Check 1		On Admission	
Instructions: 1. Put the tick <input checked="" type="checkbox"/> in appropriate box. 2. Follow the information given on right side for reference.			
		Mother's Temperature _____ Mother's Blood Pressure _____	Fetal Heart Rate _____
Does Mother need referral? <input type="checkbox"/> No <input type="checkbox"/> Yes, organized		Refer to FRU if any of the following danger signs are present and state reason on transfer note: <ul style="list-style-type: none">• Vaginal bleeding• High fever• Severe headache or blurred vision• Convulsions• Severe abdominal pain• History of heart disease or other major illnesses• Difficulty in breathing	
Partograph started? <input type="checkbox"/> No, will start at ≥ 4 cm <input type="checkbox"/> Yes		Start when cervix ≥ 4 cm. <ul style="list-style-type: none">• Every 30 min: plot contractions, FHS, and maternal pulse• Every 4 hours: plot temperature, blood pressure, and cervical dilation in cm (cervix dilates ≥ 1 cm/hr)	
Does Mother need: <i>Antibiotics?</i> <input type="checkbox"/> No <input type="checkbox"/> Yes, given		Give antibiotics to Mother if: <ul style="list-style-type: none">• Mother's temperature $>38^{\circ}\text{C}$ ($>100.4^{\circ}\text{F}$)• Foul-smelling vaginal discharge• Rupture of membranes >12 hrs without labor or >18 hrs with labor• Labor >24 hrs or obstructed labor• Rupture of membranes <37 wks gestation	
<i>Magnesium sulfate?</i> <input type="checkbox"/> No <input type="checkbox"/> Yes, given		Give first dose and then refer immediately to FRU if Mother has: <ul style="list-style-type: none">• If diastolic BP is ≥ 110 mm Hg and 3+ proteinuria• Convulsions	
What is HIV Status of Mother? <input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Status unknown, HIV test advised		If mother is HIV positive: <ul style="list-style-type: none">• Give Nevirapine• If not available, refer the patient immediately after birth	
Are soap, water and gloves available? <input type="checkbox"/> No <input type="checkbox"/> Yes, I will wash hands and wear gloves for each vaginal exam			
<input type="checkbox"/> Presence of Birth Companion at birth encouraged.			
<input type="checkbox"/> Confirmed that Mother or Companion will call for help during labor if needed		Call for help if any of: <ul style="list-style-type: none">• Bleeding• Severe abdominal pain• Difficulty in breathing• Severe headache or blurred vision• Urge to push• Cannot empty bladder frequently	
Patient Name _____ Registration No. _____		Completed by _____ Date _____ BB Checklist 25June2015 English	

WHO Safe Childbirth Checklist



On admission



Just before pushing



Within one hour
after birth



Before discharge

30 essential birth practices:

22 require supplies

Does Mother need referral?

- ☐ No
- ☐ Yes, organized

Are soap, water and gloves available?

- ☐ No
- ☐ Yes, I will wash hands and wear gloves for each vaginal exam

Confirm essential supplies are at bedside:

For Mother

- ☐ Gloves
- ☐ Soap and clean water
- ☐ Oxytocin 10 units in syringe
- ☐ Pads for Mother

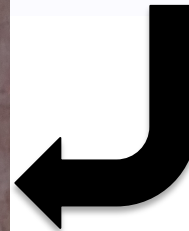
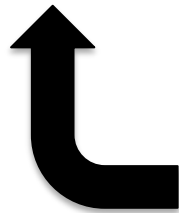
For Baby

- ☐ Clean towel
- ☐ Sterile scissors / blade to cut cord
- ☐ Cord ligature
- ☐ Mucus extractor
- ☐ Bag-and-mask

Does Baby need antibiotics?

- ☐ No
- ☐ Yes: Give antibiotics, delay discharge, and refer to FRU

BetterBirth Intervention: Birth Attendant Level

A collection of four 'SAFE CHILD BIRTH CHECKLIST' forms. The forms are organized into four sections: Check 1 (On Admission), Check 2 (Just Before Pushing (or Before Cesarean)), Check 3 (Soon After Birth (within 1 hour)), and Check 4 (Before Discharge). Each section contains a list of questions and checkboxes for various aspects of the birth process, such as maternal health, fetal status, and postnatal care. The forms are designed to be used by birth attendants to ensure a safe and healthy birth.

Supplies, Uttar Pradesh, and BetterBirth

- Supplies: equipment, drugs, consumables, infrastructure
- Uttar Pradesh: central procurement system
 - State; District; Community
- BetterBirth: provided no supplies



Methods

- Coaching staff record availability and source of supplies in 8 intervention facilities
- Collected between Nov 2014 and Sept 2015
- Analysis: comparison means & proportions, logistic regression

Supplies in the labor room:	Yes, from				No
Soap	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Clean Water	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Clean Gloves	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Clean Pads	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Clean towel	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Mucus extractor	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Cord tie/ clamp	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Sterilized blade/scissor	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____
Neonatal ambu bag & mask	<input type="checkbox"/> facility supplies	<input type="checkbox"/> facility purchased	<input type="checkbox"/> patient / family	<input type="checkbox"/> other: _____	<input type="checkbox"/> reason why: _____

Results - Baseline Availability of Supplies

Facility	Coach Baseline (26 supplies)
A	65%
B	73%
C	77%
D	65%
E	73%
F	100%
G	65%
H	85%
Avg. A-H	75.4%

Results - Increased Availability of Supplies

- Average of 6 additional supplies were available *at each facility*.
- Additional supplies included:
 - infrastructure (e.g. water)
 - equipment (e.g. thermometer)
 - medicines (e.g. oxytocin)
- Where did the supplies come from?
 - **Improving access to existing facility supplies**
 - **District supply** or purchased by **facility funds**
 - Provided by **patients and staff**

How did coaches motivate the increase in supplies?



Does Mother need:

Antibiotics?

- ☐ No
- ☐ Yes, given

Give antibiotics to Mother if:

- Mother's temperature $>38^{\circ}\text{C}$ ($>100.4^{\circ}\text{F}$)
- Foul-smelling vaginal discharge
- Rupture of membranes >12 hrs without labor
- Labor >24 hrs or obstructed labor
- Rupture of membranes <37 wks gestation

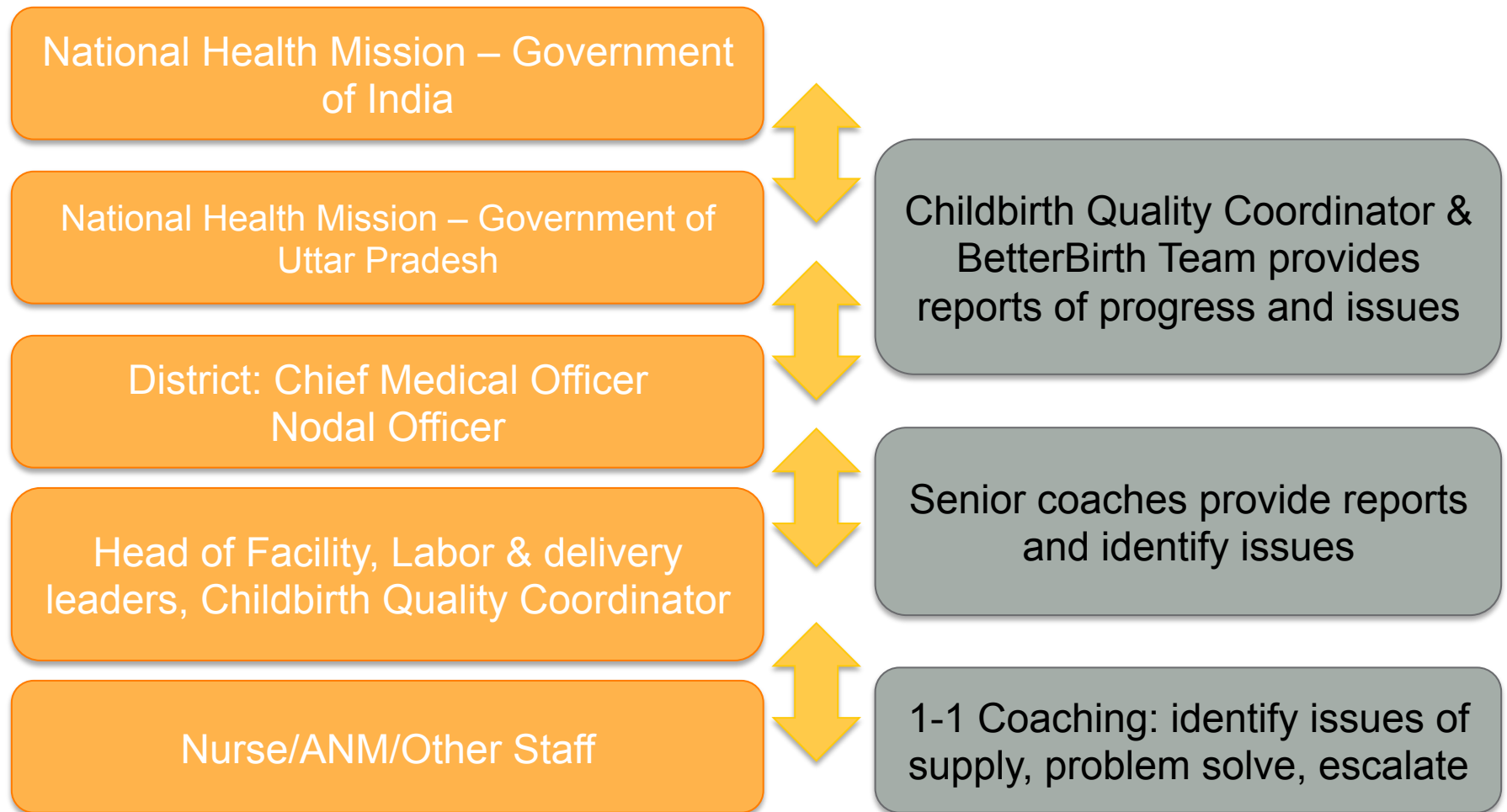
Broken, expired,
or missing
supplies?

Can we improve
access to facility
supply?

Could we
request it from
district or
purchase from
facility funds?

How else could
we obtain a it?

Communicating and escalating issues of supplies



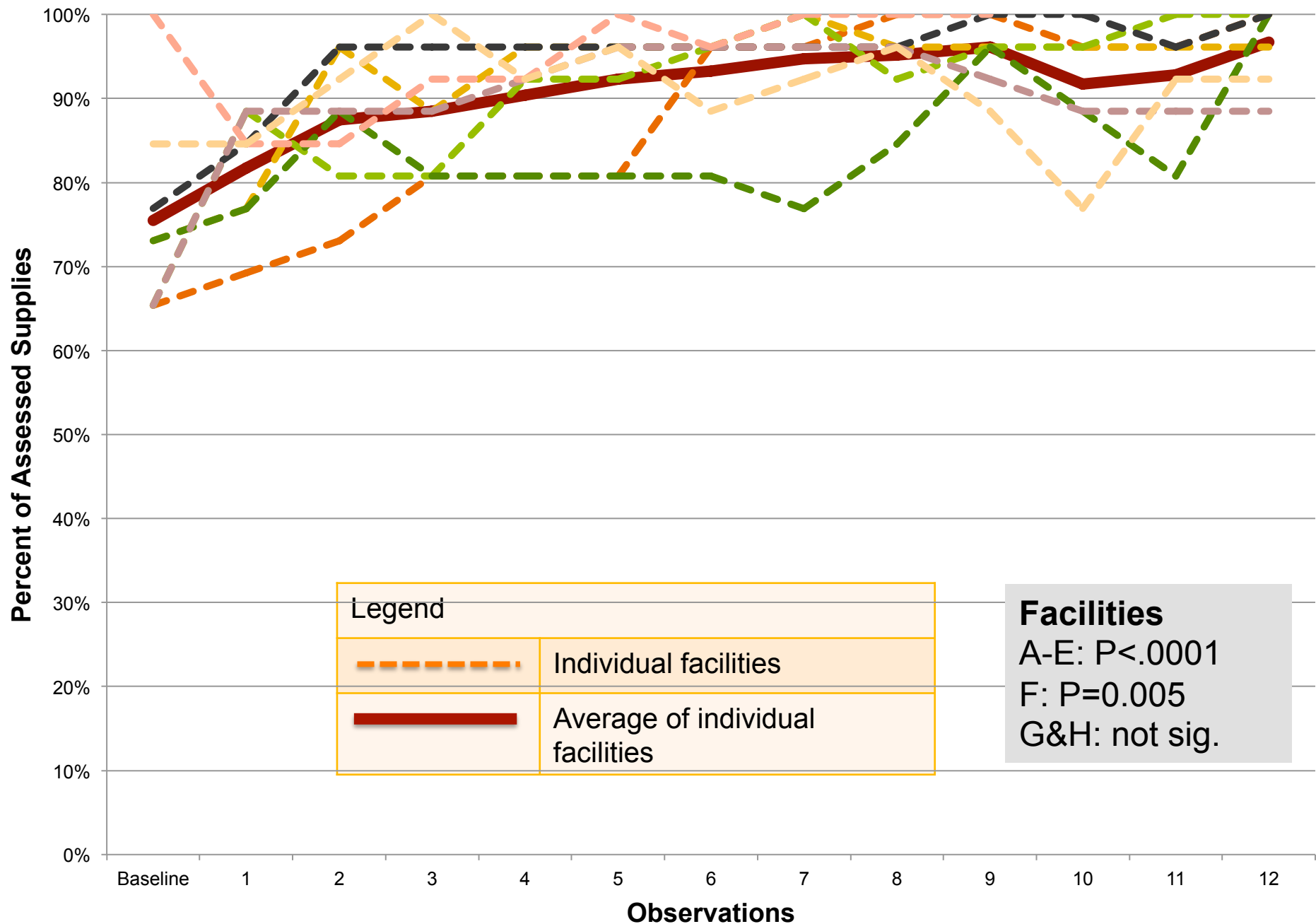
Heat map Intervention: Facility D

Observation	1	2	3	4	5	6	7	8
Baby scale								
Needle/syringe								
Urine dip sticks								
Antibiotics Mother								
Antibiotics Baby								
Inj Oxytocin								
Inj Magnesium Sulfate								
Vitamin K								
BCG Vaccine								
Polio Vaccine								

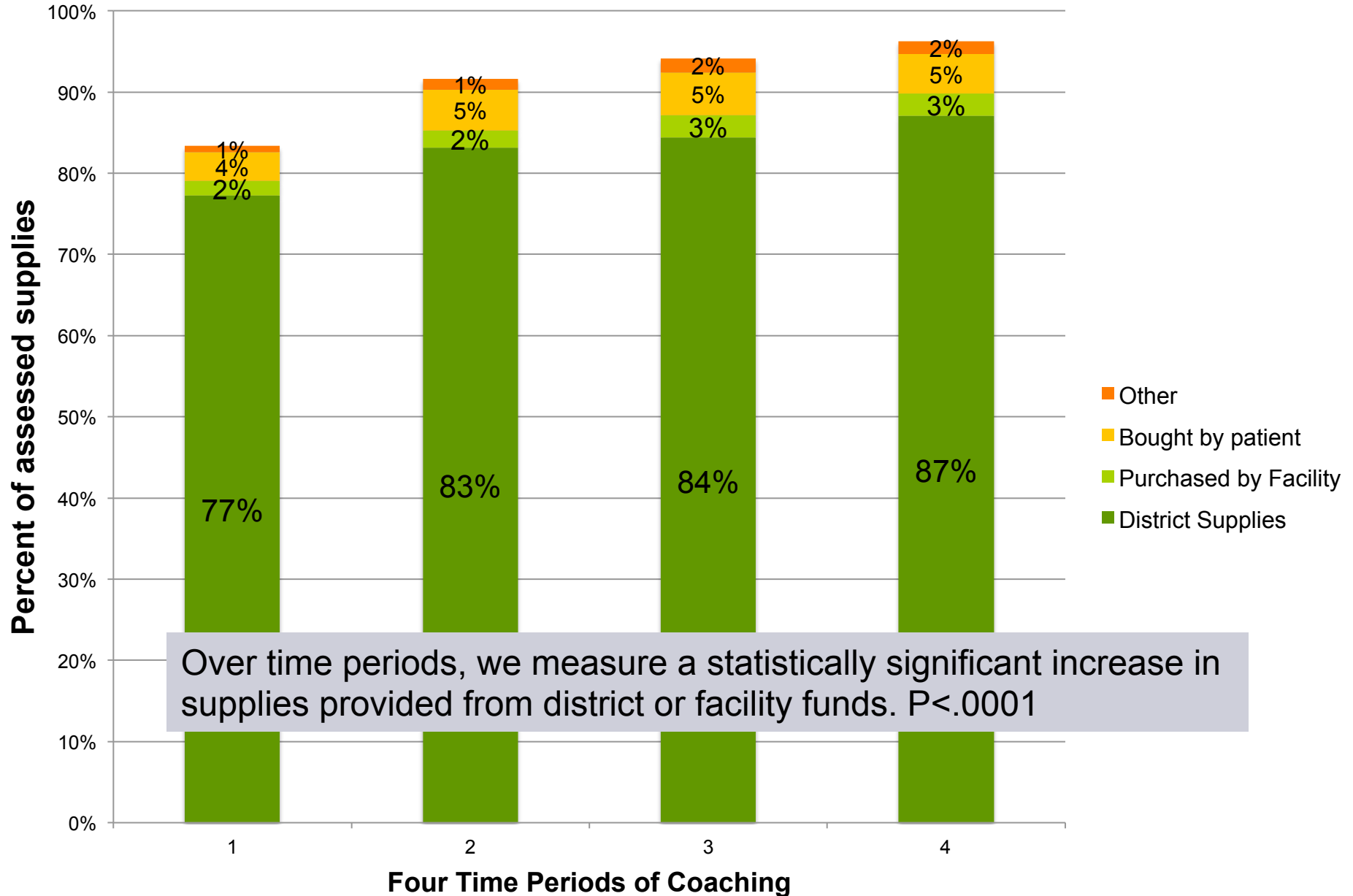


	Yes, Facility supplies
	Yes, Facility purchased
	Yes, Patient / family
	Yes, Other: __ (free text) __
	No, with reason why

Availability of Supplies Over Time at Each Facility and Overall



Availability and Sources of Supplies Over Time



Coaching to increase supplies

Four copies of a 'SAFE CHILD BIRTH CHECKLIST' form are shown. The forms are arranged in a 2x2 grid. Each form has a header with the title 'SAFE CHILD BIRTH CHECKLIST' and a sub-header 'Checklist for the health worker'. The forms contain various sections for recording information, including 'Check 1: Antenatal care', 'Check 2: Intrapartum care', 'Check 3: Postnatal care', and 'Check 4: Newborn care'. Each section has a list of items to be checked, with checkboxes for 'Yes', 'No', and 'Not applicable'. The forms are designed to be used by health workers to ensure that all necessary care is provided to the mother and newborn.

Increased
availability
of supplies



Thank you!