November 2013— November 2014

Baseline and Endline Survey on Quality of Care in Obstretic and Neonatal Emergencies



Comprehensive study on service, infrastructure, drug availability and human resource management

Project Objectives:

- To establish a baseline for new phase of HSSP by measuring output and outcome indicators, particularly in the areas of maternal and neonatal health, health facility quality improvement system and local governance.
- To outline basic interventions: inputs and process of establishing quality of maternal and neonatal care in CEONC/BEONC and strategically selected BC of programme districts.

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Project Summary

In line with the principal aim of Nepal Health Support Programme (NHSP) II to improve the health of Nepali people, particularly focusing on poor and disadvantaged groups, the Health Sector Support Programme (HSSP) is executed by Deutsche Gesellschaft fur Internationale Zusammenarbeit (GIZ) with the support of Ministry of Health and Population (MoHP). As the next phase of HSSP (2014-2016) focuses on maternal and neonate health with attention to all three aspects of service delivery: structure, process (at the point of service delivery) and outcome with maternal and neonatal mortality as one of the major proposed outputs of the new phase, the main intervention areas under this output will be to support services in CEONC, Basic Emergency Obstetric and Neonatal Care (BEONC) and strategically selected Birthing Centres (BC). Given that broad objectives of the HSSP, it is expected that the new phase will maintain and strengthen focus on increased and equitable access to essential quality health care services; improved service delivery to reduce maternal and neonatal mortality, improved referral system, and reduced cultural barriers to access health care services.

Study Design: The nature of the study was a cross-sectional study, with questionnaires and various other qualitative approaches applied to assess information on obstetric and neonatal services from the health facilities and exit interviews. The duration of the study was of six months, from November, 2013 to April, 2014. The baseline survey was conducted in intervention sites (CEmONC, BEmONC and strategically selected birthing centres) of ten districts namely Dhading, Jumla, Bardiya, Surkhet, Dailekh, Accham, Doti, Dadeldhura, Baitadi, Kailali. Ten districts were selected for the study as they represented the districts where HSSP is being implemented with the support of GIZ. The districts were selected in consultation with FHD.

The study encompassed both the quantitative and qualitative tools and techniques. The various tools and techniques applied for data collection were:

Quantitative tools

- Health facility questionnaire for record review of statistical data
- 2. Questionnaire for exit client interview with RDW
- Questionnaire for interview with service providers (SBAs)
- 4. Questionnaires for interview with PHNs

Qualitative tools

FGDs were conducted with FCHVs, adolescents and Mother's Groups. FGD Guides were used as a reference for field researchers to discuss on issues relevant to the study.

Training: A 5-day training programme was conducted for 20 field researchers. The field researchers were familiarised with questionnaire and data collection procedures. All tools were pre-tested and finalised accordingly. The field data collection was completed in 52 days, between December 26, 2013 and February 6, 2013. The central support team visited each district to ensure quality of field implementation and provided support to the field researchers. All quantitative data from the questionnaire was double entered by a team of trained data clerks using statistical software *Census and Survey Processing System*, known as 'CSPro', while qualitative data were managed by the use of Atlas.ti software.

Key Findings:

- Most of the maternal direct obstretic complication were complications of abortion
- There was no level of readiness for EONC service delivery
- There was low level of acceptable performance of signal functions as per WHO standard
- Breastfeeding practices of mother and bathing of newborn has improved
- Most common newborn complications were low birth weight and asphyxia

Final Report

The final report of this study has been submitted to GIZ in the third week of October, 2014 for final review and publication.

