 IMPROVING THE QUALITY OF PRIVATE MATERNITY CARE IN INDIA IN A SCALABLE AND SUSTAINABLE WAY

IMPACT BY THE NUMBERS

<table>
<thead>
<tr>
<th>PLACE</th>
<th>Uttar Pradesh and Jharkhand</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCALE</td>
<td>144 private health facilities in 11 cities and peri-urban areas</td>
</tr>
<tr>
<td>TIMEFRAME</td>
<td>June 2013 – September 2016</td>
</tr>
<tr>
<td>PARTNERS</td>
<td>Jhpiego, Federation of Obstetricians and Gynaecological Societies of India (FOGSI)</td>
</tr>
</tbody>
</table>

OVERVIEW

India has the second highest number of maternal deaths in the world. Despite an increase in the number of women giving birth in health facilities, maternal deaths are not declining as much as they should, largely due to insufficient care quality. Among private maternity providers, the quality of care is inconsistent, there is no clear consensus on quality standards and there is no national system to assure quality.

With support from Merck for Mothers, Jhpiego partnered with FOGSI to develop a new, scalable model to assure the quality of care that private maternity care providers offer to women during labor and delivery.

SUCESSES

- **New quality assurance system**
  - Developed and tested a quality certification for maternity care providers to recognize private providers who meet both quality and safety standards set by FOGSI

- **A scalable quality improvement model**
  - Developed a set of streamlined quality standards and a scalable quality improvement model that helped 85% of target facilities meet most of the quality standards after only two years, compared to only 3% when the project started

- **More streamlined quality measurement**
  - Developed standardized birth registers and patient records to help busy private maternity providers measure the quality of their care

This program is supported by funding from Merck, through Merck for Mothers, the company’s 10-year, $500 million initiative to help create a world where no woman dies giving life. Merck for Mothers is known as MSD for Mothers outside the United States and Canada.
LESSONS LEARNED

✔ Physician-led private practices are willing to measure and report the quality of their care. In fact, only 3.5% of providers dropped out of the program over three years.

✔ Nurses are essential in driving quality improvement, including motivating obstetricians to take it on.

✔ Professional associations play an influential role in measuring, improving and assuring the quality of private care.

✔ Peer assessment — coupled with public recognition of providers who achieve quality standards — is a reliable and effective way to assure the quality of private maternity care.

WHAT’S NEXT

Merck for Mothers will collaborate with partners to bring this scalable model to new states and hundreds more providers. To bolster the model’s sustainability, partners will develop a business model for the new quality assurance model. Partners will also institutionalize Jhpiego’s practical Private Maternity Care Quality Toolkit, which includes streamlined quality standards and measurement tools designed for private maternity provider in developing countries.

The toolkit and case sheets can be found here: http://pmcqt.org/.

STORY FROM THE FIELD

Dr. Anita, an obstetrician at K K Hospital in Lucknow, Uttar Pradesh, says that the training and mentoring she and her staff received in managing labor and delivery services were transformative.

“My staff has had a tremendous change from giving up old and mythical practices to adopting more logical, clean and best practices,” says Dr. Anita. “They learned basic skills where they can manage things even if I am not present. I used to have sleepless nights when a woman was admitted, but now I trust them to handle a complication.”

Not only are Dr. Anita and her staff better able to care for the women who come to their hospital, “Our mindset about motherhood has completely changed,” she says. “If we can assist in the miraculous experience of giving life by providing quality care, what is better than that?”