#### **Section 2**

# Supervision of the Reproductive, Maternal, Newborn, Child, Adolescent and Youth Health [RMNCAYH] Services in a Hospital

#### Part - 1

Basic intormation
Date and Time of Inspection:
Name of the institution:
Type of hospital
Inspection team:
Catchment population/MOH areas:
Last Supervision done by:
Date:
Recommendations made:
1
2
3
Were they corrected? Yes / No
If not give reasons

#### **Human resources**

	Category	Cadre	Available	Available staff at the time of inspection	Remarks
i	VOG				
ii	Paediatrician / Neonatalogist				
iii	Anaesthetist				
iv	Consultant clinical nutrition physician				
V	Medical officers – - Senior Registrar - Registrar - SHO - RHO - HO/MO (Gyn/Obs done - MO (Gyn /Obs not done - MO Human Nutrition - MO Public Health - MO Health Education				
vi	Registered Medical Officers				
vii	Nursing Sister				
viii	Nursing Officers – - Midwifery trained - Ordinary				
ix	Midwives				
Х	Laborer				
xi	Other staff				

#### **Patient statistics**

	Previous month	Average/month
Total admission to the maternity unit		
Total deliveries		
Total live births		
Babies < 37 completed weeks		
Babies 34-36 completed weeks		
Babies 32-33 completed weeks		
Babies 28-31 completed weeks		
LBW (<2500g)		
NVD		
Vacuum/Forceps		
LSCS – Elective/Emergency		
Still Birth – Fresh/Macerated		
Manual removal of placenta		
Serious complications need intervention - APH - PPH - Rupture of uterus		
Transfer out – maternal cases		
Maternal Deaths		

Facilities for	patient	transfer
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Number of functioning ambulances	• • • •
f not available; reason	

#### Part - 2

## **Maternity Wards**

(i) Beds:- ANW
PNW
Overcrowding -
Bed occupancy
(ii) Obstetric BHT (H 1252) is used - Yes / No
If "No" reasons
(iii) Distance to the obstetric theatre
(iv) Distance to the Mother Baby Centre;
(v)Distance to the Neonatal unit;
(vi) Distance to LMC
(VI) Distance to Livic -
(vii) Building – ventilation, lighting etc
(1-1) 2 0-1-0-1-8

#### **Antenatal ward**

Arrangement of the antenatal ward	Satisfactory	Not satisfactory
General cleanliness		
Reception / Admission Area		
Examination Area		
Dining Area		
Changing Area (mothers)		
Toilets/Bath Rooms		
Staff Rooms		
Comment about the arrangement		
Hand washing facilities		
Availability of Hand Rub within easy access		
Breastfeeding Policy clearly displayed in common language/languages		
Contact numbers of area MOOH available		
Availability of Obstetric Guidelines		
Availability of Neonatal Guidelines		

Health promotion activities		
Organized and regular education activities –  - Breastfeeding  - Postpartum danger signs  - Care of the new-born  - Family planning		
Availability of useful reading material/display IEC material		
Counselling for needy mothers		
Procedures in the antenatal ward		
Availability of obstetric formats		
Examination of mothers on admission		
Assessment of mothers, including basic investigations		
Completeness of BHT		
Readiness for emergency (Ambu bag, Resuscitation tray)		
Knowledge of mothers in the antenatal ward		
Danger signs		
Breastfeeding		
New-born Care		
Risk conditions		
Family Planning		
	1	<u> </u>

#### Postnatal ward

Arrangement of the postnatal ward	Satisfactory	Not satisfactory
General cleanliness		
Reception / Admission Area		
Examination Area		
Dining Area		
Changing Area (mothers)		
Toilets/Bath Rooms		
Staff Rooms		
Comment about the arrangement		
Hand washing facilities		
Availability of Hand Rub within easy access		
Breastfeeding Policy clearly displayed in common language/languages		
Contact numbers of area MOOH available		
Availability of Obstetric Guidelines		
Availability of Neonatal Guidelines		

Procedures in the postnatal ward	Satisfactory	Not satisfactory
Pain relief to mother		
Newborn Examination by MO		
Newborn Screening –  - Congenital Hypothyroidism  - Congenital Deafness  - Pulse oximetry  - Eye examination for red reflex		
Rooming in /Bedding in of mother and baby		
Delayed bathing (After 24 hours)		
Rubella vaccination		
BCG		
Administration of Rhogam		
Issuing of CHDR		
Issuing of preterm growth charts as and when indicated		
Completing the relevant sections CHDR in the ward (sections on delivery details, newborn screening, hearing screening)		
Facilities provided for mothers to breastfeed		
Supporting mothers and babies to breastfeed		
Establishing breastfeeding before discharge		
Examination of mother before discharge		
Adhering to discharge check list in obstetric format (in Mothers record 512 A)		
Adhering to discharge check list in neonatal examination format		

Availability of drugs	Available		Not Available	
	Adequate	Not Adequate		
Antihypertensives – Hydralizine, Nifedipine				
Magnesium Sulphate				
Rhogam				
Prostaglandins				
Ergometrine				
Syntocinon				
IV fluids				
IV Cannula				
Customer satisfaction				
	•	•••••••	••••••	
			••••••	
	•••••		•••••	
	•••••••••			
Staff satisfaction				

#### Part - 3

# **Labour Room Supervision**

Name of the consultant/s in-charge:
No.of Staff - MOs
No.of Midwifery trained NOs -
Name of the officer available at the time of supervision

i. Basic facilities	Yes	No	Comments
Suitability of building			
Venilation is satisfactory			
24 hour supply of electricity			
Generator supply in an emergency			
Communication (telephone/ direct line)			
Water supply (24 hours)			
Availability of on call roster with contact numbers			
24 hour allocation of HO/MO to the labour room			
Display the name of mothers inside the labour room			
Availability of emergency protocols			
Availability of emergency trolley			
Adequate measures for the maintenance of privacy and dignity of mothers			
Practicing analgesics during labour			

ii.	Areas	Yes	No	Comments
	Reception area			
	Trolley-to-trolley transfer area			
	Delivery area			
	Staff changing rooms			
	New-born resuscitation area			
	Duty rooms for staff			
	Nurses duty station			
	utility room			
	Sterilized good store			
	Washing room			
	Cleaners room			

iii. Furniture/equipment	Yes	No	Comments
Labour room beds			
Spot lamps			
Delivery sets			
Episiotomy sets			
Suturing set			
ARM set			
Vacuum sets/ Forceps			
Doppler machines			
CTG machines			
USS machines			
Neonatal suckers			
Resuscitaries			
Baby warmers			
Mini autoclaves			
Weighing scales			
Infanto-meters			
Infusion pump			
Multipara monitor			
Syringe pump			

iv.Emergency items of drug trolley	Availability (Yes / No)	Remarks
For PPH – Oxytocin		
IV drips		
Prostaglandins		
Wide bore cannula (14 -16G)		
IV sets		
DT bottles		
Normal Saline		
20g folley catheter		
Condom		
Pressure cuffs		
For collapse patients – Hetastarch		
IV fluid		
Oxygen		
Ambu bag		
Wide bore cannula		
For PIH – Nifedepine		
Magnesium sulphate		
Hydralazine		
Analgesics		
Neonatal resuscitation - Naloxone		
Adrenaline		
Sodium bicarbonate		
Normal Saline		
10% Dextrose		

v. Linen	Availability	No. needed	Remarks
Gowns			
Washable aprons			
Sterile mackintosh (1.5 meters)			
Sterile vaginal packs			
Sterile sanitary pads			
Washable curtains			
GS towels			
Bed sheets			
Dressing/Cotton wool			
Gloves			

vi.Infection control in the labour room		No	Remarks
Hand washing facilities (elbow tap and wash basin)			
Availability of soap and water			
Autoclaved packeted system (Delivery sets/epis sets/baby sets)			
Cleanliness – Entrance – Changing shoes			
Hand drying			
Washing – wall			
Cleaning of floor			
Cleaning of Furniture			
Availability of unused furniture			
Regular monitoring of infection control in the labour room			

vii. Cleaning procedure	Method of cleaning
Linen	
Equipment	
Blood stain/blood stained equipment - cleaning procedure	
Delivery set	
Epis set	
Suturing sets	
Vaginal Examination sets	
Gloves	

viii. Waste Disposal	Available	Not available
Colour code system		
Placental disposal system		
Sharp disposal system		
	Satisfactory	Not satisfactory
Use of safety measures by the staff		
Removal of bodies of stillborn babies		

ix. Procedures in Labour Room	Satisfactory	Unsatisfactory	Remarks
Takeover of mothers to labour room from antenatal ward			
Changing clothes when entering the LR			
Maintaining of partogram (Standard format)			
Display Emergency protocols			
Active management of 3rd stage			
Inspection of placenta – by whom?			
Suturing of an episiotomy – time, by whom			
PP monitoring of mothers			
Respecting mothers inside the LR			
Handing over mothers to Post Natal Ward – Procedure			

x. Care of the baby - neonatal care	Satisfactory	Not Satisfactory
Deliver baby onto the abdomen/sterile towel		
Drying/cleaning the baby		
Sets for cleaning of baby		
Keeping the baby warm (cover with a dry towel, head cap, booties)		
Temperature of the labour room		
Changing gloves before cutting the cord		
Delayed cord clamping		
Skin to skin care		
Initiation of breastfeeding within one hour		
Keeping mother and baby together at least for one hour		
Resuscitation if needed		
Birth weight measurement (delaying measurements)		
Birth length measurement		
Neonatal examination (weight, length, anus, gross malformation)		
Measures taken to control infection of the baby		
Issuing neonatal examination format		
Availability of services of PHM when necessary		

xi. Equipment	Availa	Condition	
An Equipment	Yes	No	Condition
Weighing scale (Beam/Digital)			
Other weighing scale			
Length board			
Neonatal suckers			
Infant Magill's laryngoscope (straight blade)			
Neonatal resuscitate			
Neonatal cots			
Low tech incubator			
Neonatal ambu bag			
Rectal thermometer			

xii. Training needs	Nu	Number trained		Number need to train		
and Truming Recus	МО	NO	PHM	МО	NO	PHM
Infection Control						
Provision of EmOC						
Neonatal Advanced Life Support						
Essential Newborn Care						
Lactation Management						
Baby Friendly Hospital Initiative						

xiii. Surgical consumable	Availa	Condition	
	Yes	No	
Cord clamps			
Naso gastric tubes			
Endotracheal tubes			
Flexible Stiletto (for stiffening endotracheal tube)			

xiv. Record Keeping	Satisfactory	Not Satisfactory	Comments
Antenatal Card: Available /Not available			
BHT entries			
Birth information			
Postpartum monitoring			
Birth Register			
Neonatal Examination Format			
Maternal Statistics (H 830)			

## Part - 4

## Inspection of the Neonatal Unit

Date and Time of Inspection;	• • • • • • • • • • • • • • • • • • • •	
Name of the institution;		
Level of the unit; Level III+ /Level III / Lev	rel II / Level I	
Inspection team;		
Last Supervision done by;		Date;
Recommendations made;		
1		
2		
3		
Were they corrected? Yes / No		
If not, give reasons		

i. Human Resources				
Category	Cadre	Available	Available staff at the time of inspection	Remarks
Consultant Neonatologist/ Paediatrician				
Medical officers – - SR - Registrar - Medical Officers				
Nursing Sister				
Nursing Officers – - NICU trained - Ordinary				
Labourer				
Other staff				

ii.	Patient statistics	Previous month	Average/month
	Total admission to the neonatal unit		
	Total deliveries in the hospital		
	Total admissions from the Labour Room		
	Total admissions from the Operation Theatre		
	Total admissions from the postnatal ward		
	Admissions according to POA in completed weeks		
	Total admissions of neonates > 42 weeks		
	Total admissions of neonates 37-41 weeks		
	Total admissions of neonates 34-36 weeks		
	Total admissions of neonates 31-33 weeks		
	Total admissions of neonates 28-30 weeks		
	Total admissions of neonates < 28 weeks		
	Total transfers in		
	Total transfers out		
	Neonatal deaths 1 -7 days		
	Neonatal deaths 8 – 28 days		

Building
Ventilation –
Lighting -
Distance from the Labour Room –
Distance from the obstetric theatre -
Distance from the Mother baby unit

iii. Facilities & Services	Yes	No	Remarks
24 hr supply of electricity			
Generator supply in an emergency			
Communication (telephone/direct line)			
Computer			
Internet facility (wifi/dongle)			
Water supply (24 hrs)			
Availability of on call roster with contact number			
24 hr allocation of MO to the neonatal unit			
Availability of emergency protocols			
Availability of neonatal guidelines			
Availability of NICU/SCBU/MBC guideline (FHB, 2012)			
Availability of emergency trolley			
Provision for the mothers to visit babies in the neonatal unit			
Provision for the fathers to visit babies in the neonatal unit			
Restroom for the mother near the neonatal unit			
Practice of Kangaroo Mother Care			
ROP screening in the neonatal unit			

iv.	Areas suggested in the NICU/SCBU	Yes	No	Remarks
	Stabilization room			
	High Dependency Area			
	Low Dependency Area			
	Isolation Area			
	Mother Baby Unit			
	Procedure Room			
	Sterilization area			
	Sterilized goods store			
	Duty station			
	Drugs store room			
	Incubator washing and drying area			
	Cleaner's area			
	Dirty utility area			
	Gas room and unloading bay			

v.	Furniture/Equipment	Availability (Yes / No)	No. need	Remarks
	Multipara monitors			
	Incubators			
	Ventilators			
	CPAP machines			
	Transport Incubators			
	Pulse oximeters with neonatal probes			
	Open resuscitation table with an overhead warmer			
	Neonatal resuscitation trolley			
	Syringe pumps			
	Infusion pumps			
	Nebulizer			
	Electronic weighing scale (digital)			
	Portable suckers			
	Cold light for IV cannulation			
	Spot lamp			
	Computer			
	UPS			
	Central suction			
	Umbilical probes			
	Phototherapy units			
	Perspex shields			
	Neonatal stethoscopes			
	Steel drums			
	X ray illuminator			
	Digital thermometers			
	Head boxes			
	Portable USS			

vi.	Neonatal resuscitation trolley	Availability (Yes / No)	Remarks
	Overhead radiant warmer with a stop clock		
	Low-pressure sucker		
	Oxygen cylinder with functioning flow meter		
	Neonatal - ambu bag (250 ml) - Term face mask - Pre term face mask		
	Laryngoscope		
	ET tubes		
	ET tube with introducer		
	Emergency tray; syringes 2ml Syringes 5 ml Syringes 10 ml Cannula 23G/Cannula 25G Umbilical catheterization pack		
	Emergency tray drugs; Adrenaline Nalaxone 0.9% saline 8.4% NaHCO3 10% Dextrose Distilled water		
	Blood sample bottles, culture bottles		

## Part 05

# **Baby Friendly Initiative Practices**

Total number of babies in the unit on the day of supervision:
No. of babies on exclusive breastfeeding:
No. of babies on mixed feeding:
No. of babies on formula feeds:
No. of formula packs were used in the previous month in the unit;

Infection control in the neonatal unit	Yes	No
24 hour water supply		
Hand washing facilities (elbow tap and wash basin) at the entrance		
Availability of soap and water		
Change of clothes		
Change of shoes		
Availability of sinks in all sub-sections of the unit		
Pictorial hand washing poster		

Use of formats and registers	Yes	No
NICU/SCBU register is used		
NICU/SCBU history record sheet is used		
NICU/SCBU history record sheet complete		
Neonatal Examination Format complete		
Neonatal Transfer forms available		