

SURVIVE and THRIVE

Transforming care for every
small and sick newborn



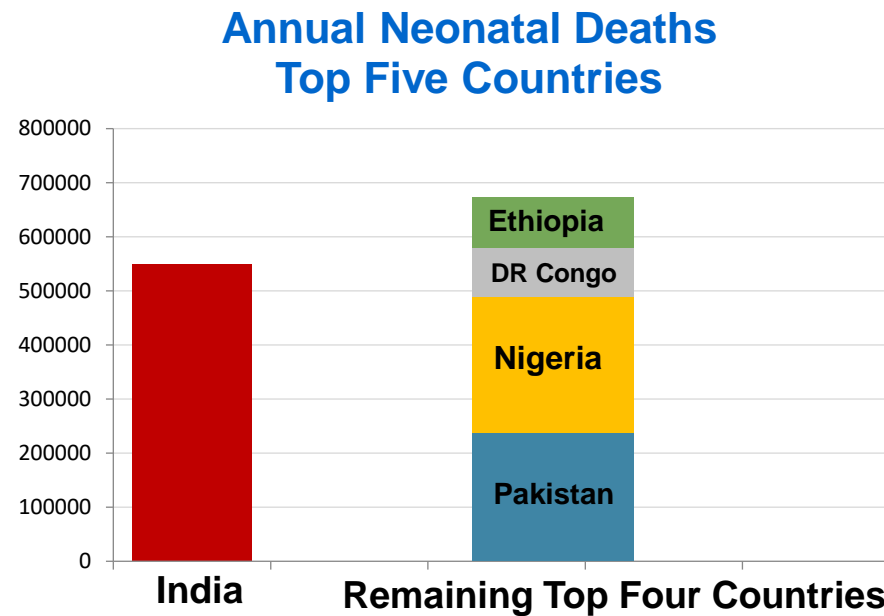
The SNCU Online Story of India

Using Data for Action

Dr. Gagan Gupta, UNICEF- HQ

India – Story of 25 Million Babies Born Each Year

- **549,000 die in first 28 days**
- **22% of global burden**
- **64% of Under 5 deaths**



India – Story Shifting from Home to Hospitals

- **2005** – Every second women delivering at home
- **2015-** Eight out of Ten women delivering in health facility
- **Urgency for Investing in care of small and sick newborns**
 - 850+ Special Newborn Care Units (SNCUs)
 - 1 million newborn treated annually
- **Challenge – No system to monitor outcomes**



Solution – Moving from SNCUs to SNCU online

Piloted in 2 SNCUs in 2012 – UNICEF, National Health Mission

Target : SNCU staff, program managers, policy makers

Focus of online monitoring –

- Real time analysis on 250 + parameters
- Using data to monitor performance

Scaled up by National Health Mission across India

- 800+ SNCUs online with 5 million admissions, 495,000 deaths
- One of the largest real time online data for small and sick newborn

Monitoring Solution for SNCUs

The image displays two forms from the Special New Born Care Unit (SNCU) District Hospital, developed by UNICEF for the National Health Mission (NHM). The top form is the 'NEONATAL CASE RECORD SHEET' (blue header), which includes fields for patient registration (SNCU Reg. No., MCTS No.), doctor information, and detailed clinical data such as birth weight, date of admission/discharge, and various medical indicators. The bottom form is the 'DISCHARGE CARD' (pink header), which contains fields for discharge registration, mother's information, and a section for 'PRESENTING COMPLAINTS'. Both forms feature checkboxes for specific clinical conditions and a 'Final Diagnosis' section with a list of potential ailments.

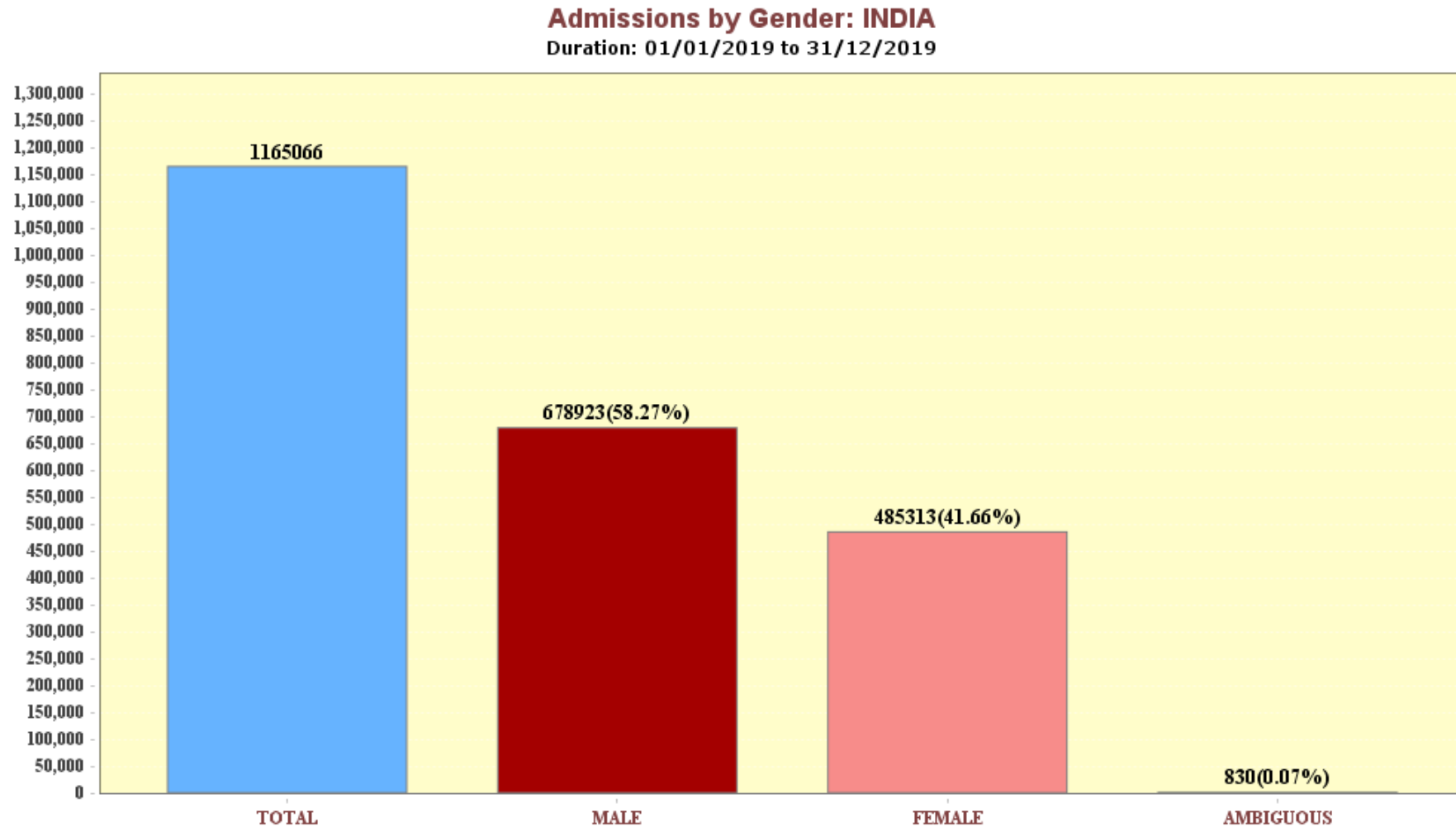


Uniform Data Recording

Simultaneous Online Entry
Dedicated data operator

Using Evidence for Advocacy and Action

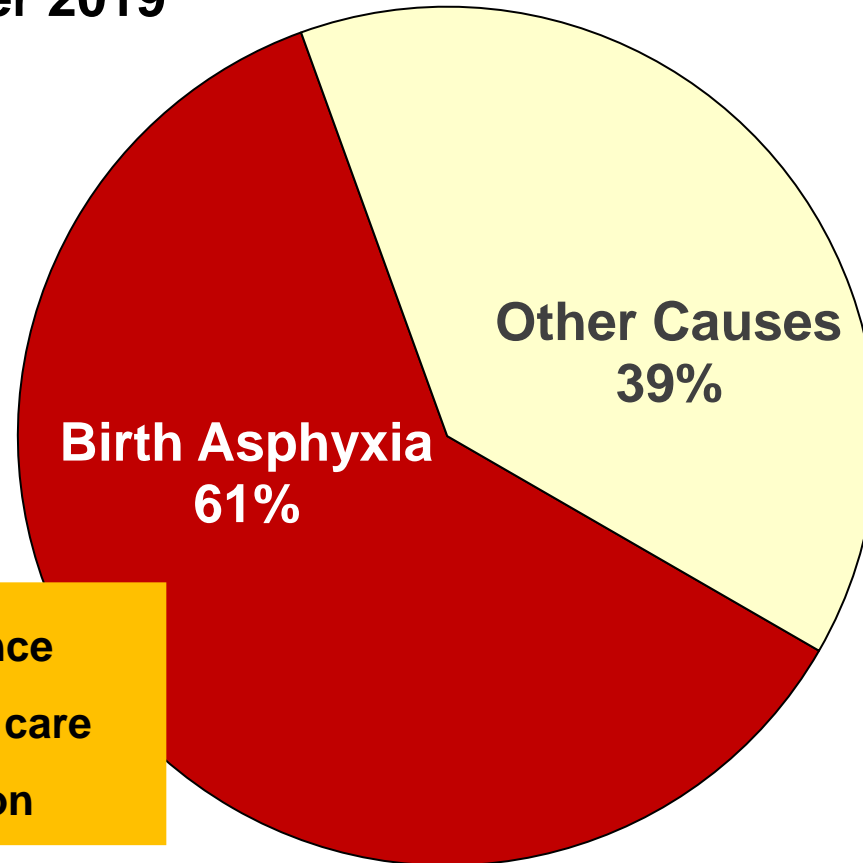
Gaps in Care Seeking for Girl Child



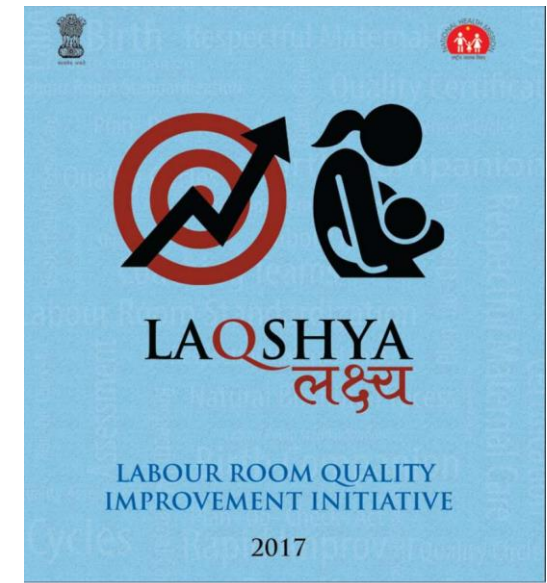
194,000 Fewer Female SNCU Admissions in 2019, in spite of free care

Preventable Asphyxia Deaths in SNCUs – Care in Delivery room ?

**SNCU mortality in > 2.5 kg weight : 117,500 deaths
January 2013 till December 2019**



- Skilled Birth Attendance
- Emergency Obstetric care
- Neonatal Resuscitation



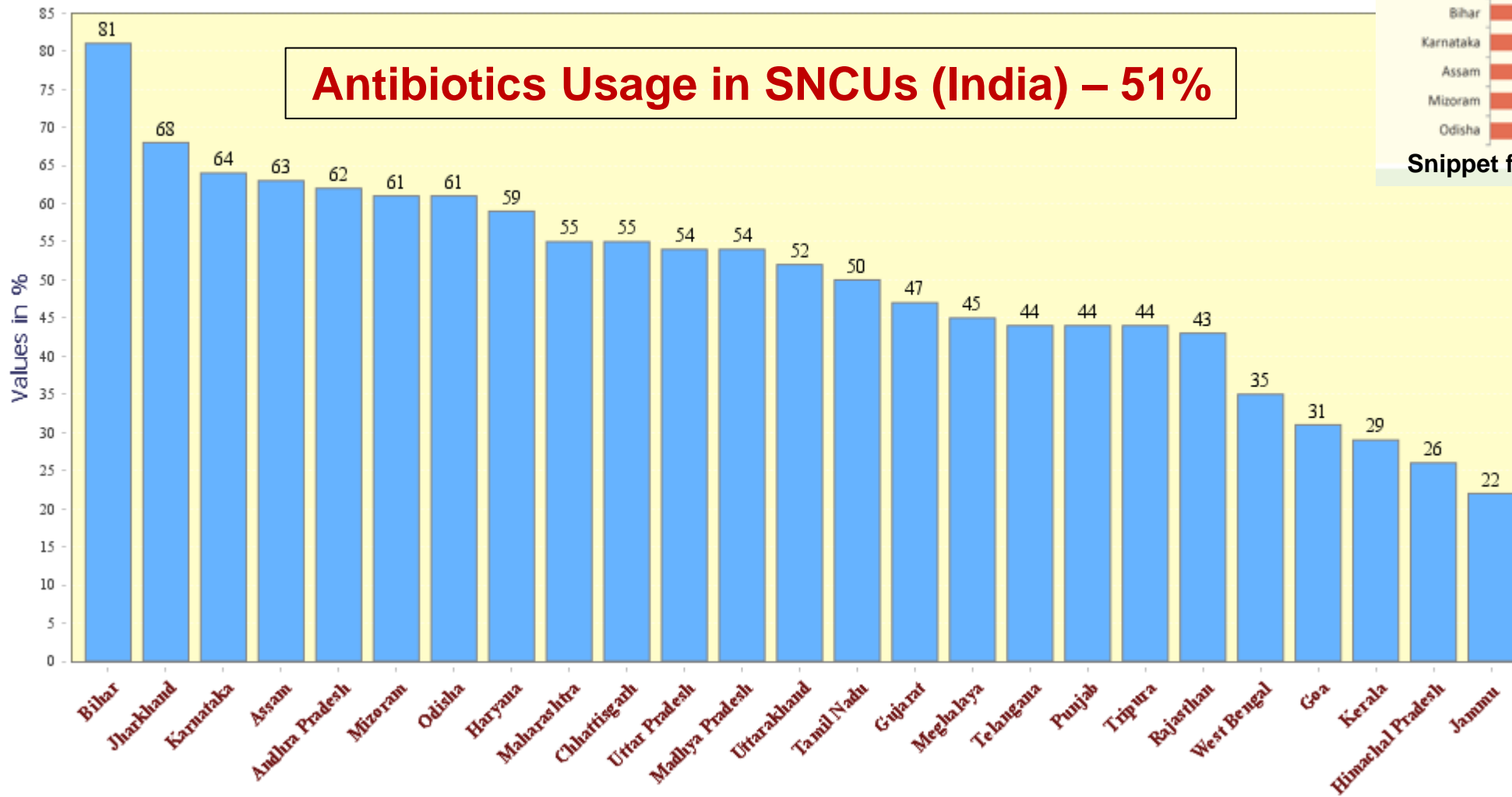
Access and Quality of care around birth is the key

Quality of Care – Antibiotic Use in SNCUs

Supportive Care (Antibiotics): INDIA

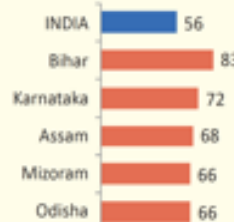
Time Period: 01/01/2017 to 31/12/2019

Antibiotics Usage in SNCUs (India) – 51%

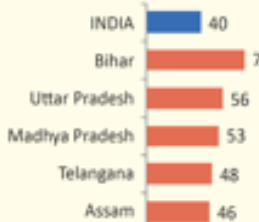


TREATMENT GIVEN (%)

Antibiotics Usage - Highest Five



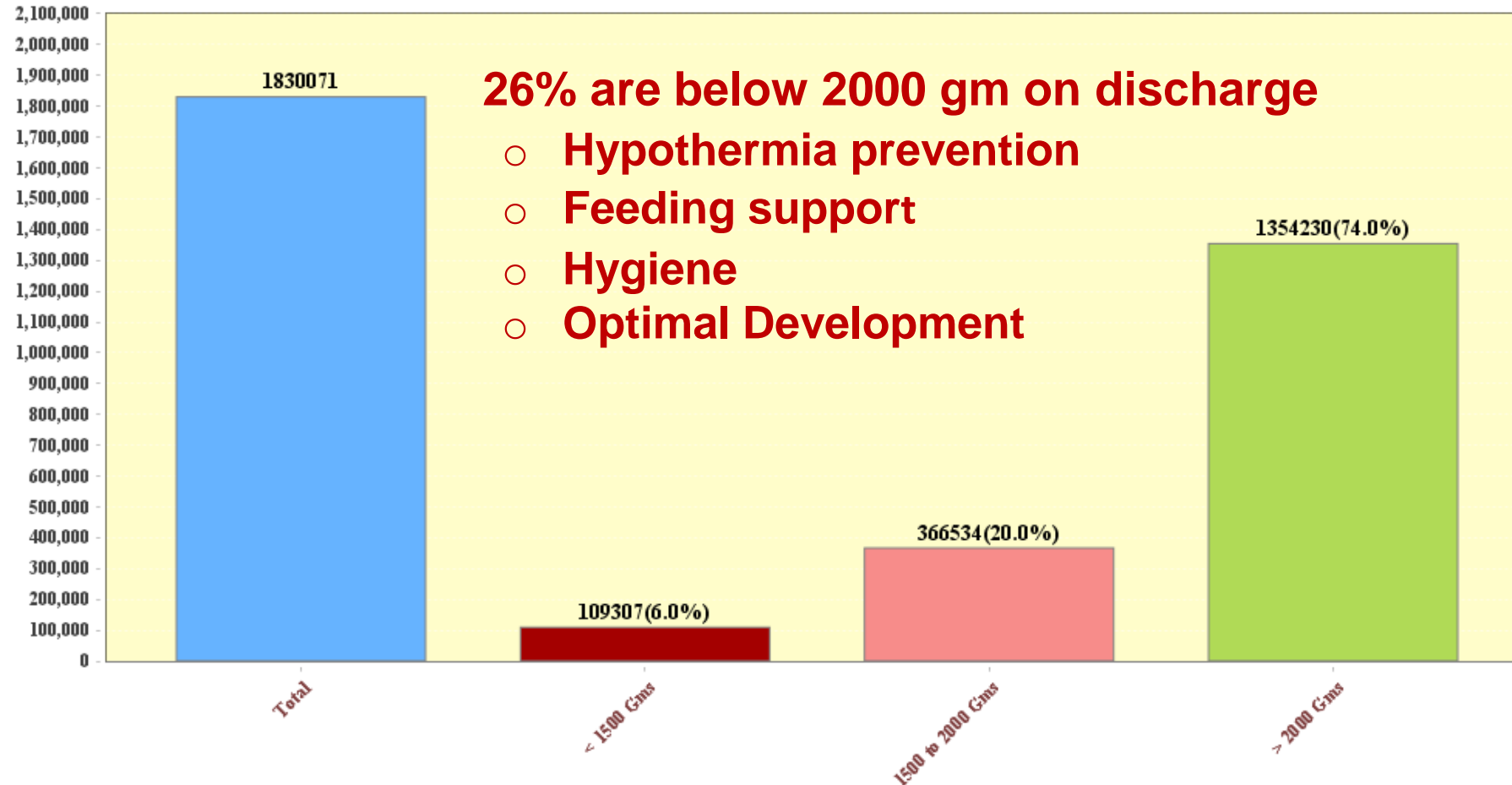
Oxygen Usage - Highest Five



Snippet from SNCU fact sheet 2017-18

Many are Still Susceptible on Discharge

Weight on Discharge: Successfully Discharged (1.5 to 2.0 kg): INDIA
Duration: 01/01/2018 to 26/02/2020



Need for continued care at home and in community



**Extending Continuum of Care...
Back to Community**

Regular Follow up at Home and in SNCUs - ECD

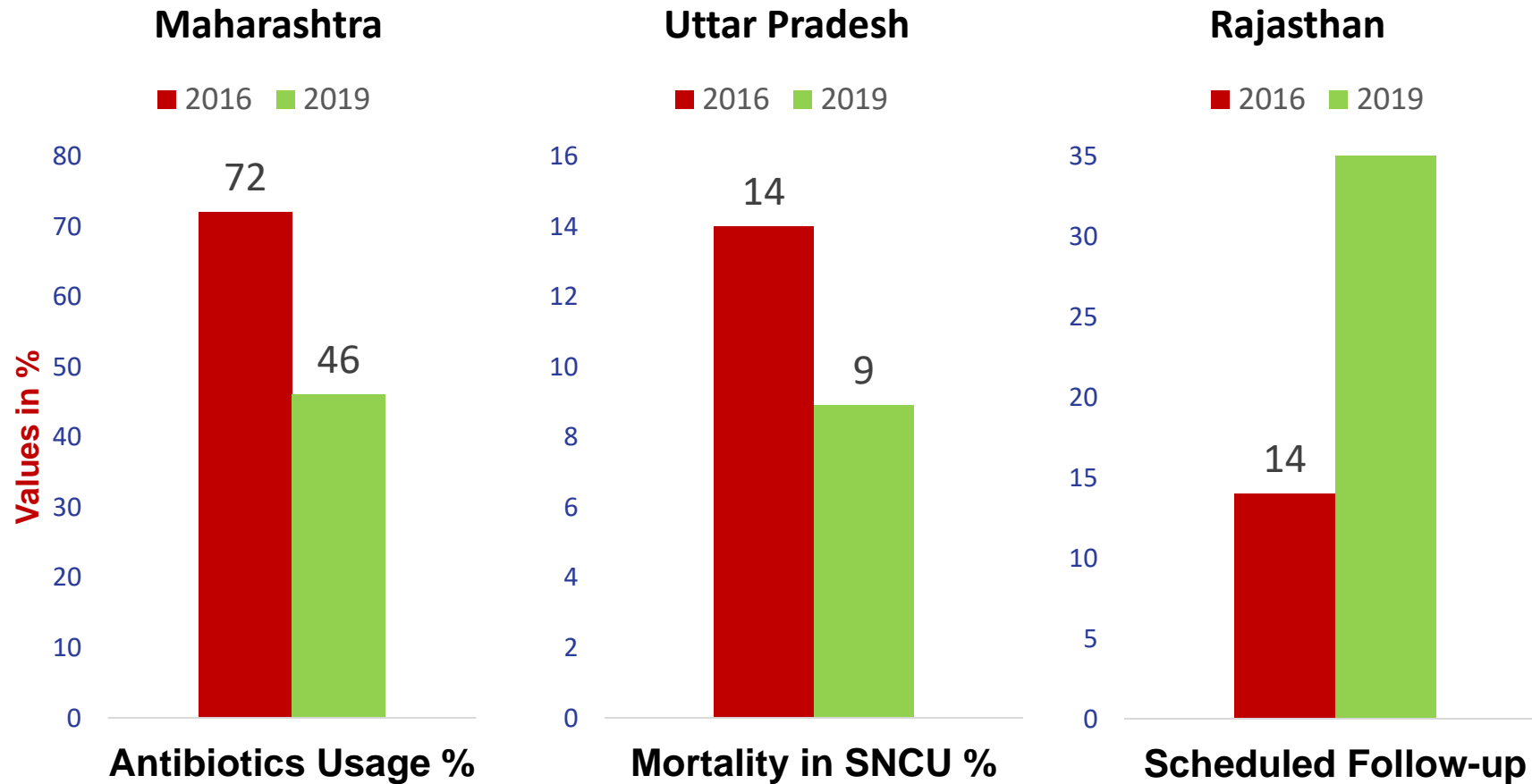


Counselling and Screening on Discharge



Home Visits by ASHA – Referral Linkages

Improvement in Key Quality Indicators



Data Source: SNCU online data

What Helped

- Intervention addressed the **need on the ground**
- Seeing is Believing** – Creating pilots with government
- Government Leadership** and ownership by states
- Ensuring dedicated HR and **funding under NHM**
- Continued **support during scale up**
- Regular review and **feedback to districts**
- Evolving and adapting** as per emerging need
- Exchange across countries** and partners

