



India



राष्ट्रीय स्वास्थ्य मिशन



Quality, Equity, Dignity
A Network for Improving Quality of Care
for Maternal, Newborn and Child Health

Country context

POPULATION & MORTALITY RATES	2017	2020	2022
Population (in million) ¹	1 354.2	1 396.4	1 407.5
Maternal Mortality Ratio per 100,000 live births ²	113	97	-
Neonatal Mortality Rate per 1,000 live births ²	33	20	-
Stillbirth Rate per 1,000 births ²	-	3	-

NATIONAL COVERAGE OF KEY INTERVENTIONS (2021)	%
Antenatal care (4 or more visits) ³	59
Skilled birth attendance during delivery ⁴	-
Institutional deliveries ⁵	89
Post natal visit for baby (within 2 days of birth, medically trained provider) ⁵	79
Postnatal care for mother (within 2 days of birth, medically trained provider) ⁵	78
Caesarean section rate ⁶	-
Family planning ⁷	73
Initial breastfeeding (1 hour of birth) ⁸	-
Exclusive breastfeeding rate (of infants under age of 6 months) ⁹	-

1. United Nations, Department of Economic and Social Affairs, Population Division (2022). World Population Prospects 2022, Online Edition. <https://population.un.org/wpp/Download/Standard/Mode/Used/>
 2. Sample Registration System (SRS).
 3. WHO/SRHR Global Database, Percentage of women aged 15-49 years attended at least four times during pregnancy by any provider, September 2022.
 4. UNICEF/WHO joint database on SDG 3.1.2 Skilled Attendance at Birth, May 2022.
 5. United Nations Children's Fund, Division of Data, Analysis, Planning and Monitoring (2022). Global UNICEF Global Databases: Maternal and Newborn Health Coverage Database, New York, May 2022.
 6. WHO Global Health Observatory, <https://www.who.int/data/gho>
 7. United Nations, Department of Economic and Social Affairs, Population Division (2020). Estimates and Projections of Family Planning Indicators 2020. New York: United Nations.
 8. United Nations Children's Fund, Division of Data, Analysis, Planning and Monitoring (2022). Global UNICEF Global Databases: Infant and Young Child Feeding: Ever breastfed, Early initiation of breastfeeding, Exclusively breastfed for the first two days after birth, New York, October 2022.
 9. United Nations Children's Fund, Division of Data, Analysis, Planning and Monitoring (2022). Global UNICEF Global Databases: Infant and Young Child Feeding: Exclusive breastfeeding, New York, October 2022.

Milestone progress (2017-2022)

STRATEGIC OBJECTIVES	MILESTONE DELIVERABLES	2017	2020	2022
LEADERSHIP	Supportive governance policy and structures developed or established	●	●	●
	Quality of care for maternal and newborn health roadmap developed and being implemented	●	●	●
	On-site coaching visits occurring in learning districts	●	●	●
	Quality improvement coaches trained	●	●	●
ACTION	QoC coaching manuals developed	●	●	●
	Learning districts and facilities selected and agreed upon	●	●	●
	QoC implementation package developed	●	●	●
	Adaptation of MNH QoC Standards	●	●	●
LEARNING AND ACCOUNTABILITY	Orientation of learning districts and facilities	●	●	●
	Mechanism for community participation integrated into QoC planning in learning districts	●	●	●
	A research institution to facilitate documentation of lessons learned identified and is active	●	●	●
	District learning network established and functional (reports of visits)	●	●	●
	Common indicator data collected, used in district learning meetings, and reported upwards	●	●	●
	Baseline data for MNH QoC common indicators collected	●	●	●
Common set of MNH QoC indicators agreed upon for reporting from the learning districts		●	●	●

Key: ● On track (achieved) ● In progress (initiated but not completed) ● Not started ● No information

Ensuring MNH QoC core indicators are available in routine HMIS

DATA ELEMENTS	Integrated into HMIS	Collected	Reported	Used	Source
Pre-discharge maternal deaths	●	●	●	●	
Maternal deaths by cause	●	●	●	●	
Neonatal deaths by cause	●	●	●	●	Special Newborn Care Unit (SNCU) online portal
Facility stillbirth rate (disaggregated by fresh/macerated when possible)	●	●	●	●	Disaggregation proposed in the revised HMIS
Pre-discharge neonatal mortality rate	●	●	●	●	Deaths from special newborn care units are currently reported in the HMIS. Facility based newborn deaths within 24 hours and in 1-7 days included in revised HMIS format.
Obstetric case fatality rate (disaggregated by direct/indirect when possible)	●	●	●	●	
Pre-discharge counselling for mother and baby (woman-reported)	●	●	●	●	
Companion of Choice (woman-reported)	●	●	●	●	LaQshya Checklist
Women who experienced physical or verbal abuse in labor or delivery (woman-reported)	●	●	●	●	Reported at facility level
Breastfeeding within one hour	●	●	●	●	DHS survey
Immediate postpartum prophylactic uterotonic for PPH prevention	●	●	●	●	
Birthweight documented	●	●	●	●	
Premature babies initiating KMC	●	●	●	●	Reported in SNCU online portal
Basic Hygiene Provision	●	●	●	●	LaQshya Checklist
Basic sanitation available to women and families	●	●	●	●	LaQshya Checklist

Key: ● YES ● NO ● No information

Creating an enabling environment for sustainability and scaling up of MNH QoC

Leadership

Under the stewardship of the Ministry of Health & Family Welfare, India, various key programs are being implemented to improve quality of care for mothers and newborns in India:



1. The Pradhan Mantri Surakshit Matritva Abhiyan program (PMSMA): This program aims to provide assured, comprehensive and quality antenatal care, free of cost, universally to all pregnant women, including high risk pregnancy detection on the 9th of every month at designated government health facilities. It follows a systematic approach for engagement with the private sector which includes motivating private practitioners to volunteer for the campaign and participate in government health facilities. The Quality Assurance process under PMSMA is ensured by standards-based checklists and onsite mentoring.

More than 38.6 million beneficiaries and more than 3.74 million High Risk Pregnancy identified under PMSMA

2. Extended PMSMA for tracking High Risk Pregnancies (HRPs): This programme aims to ensure identification, tracking and safe delivery for all high-risk pregnant women. Case-based incentives are provided to ASHAs (Accredited Social Health Activists) in the States reporting high maternal mortality. ASHA ensures 3 additional ANC visits for women detected as high risk at the nearest health facility.

Operationalization of six National Midwifery Training Institutes (NMTIs) across the country

4. Nationwide Midwifery services: In 2018, the Government of India took the landmark policy decision to roll out midwifery services in the country to improve the quality of care of maternity services, ensure task shifting among the health personnel and ensure respectful care to pregnant women and newborns.



5. Surakshit Matritva Aashwasan (SUMAN): An Initiative for Zero Preventable Maternal and Newborn Deaths: The program focuses on providing assured, dignified, respectful and quality healthcare, at no cost and zero tolerance for denial of services, for every woman and newborn.

More than 21000 public health facilities have been notified under SUMAN



3. Labour room and maternity operation theatre QI initiative (LaQshya): The Government of India launched an ambitious programme - "labour room and maternity operation theatre quality improvement initiative" or "LaQshya" (meaning "target" in English) in 2017 to improve the care around the time of childbirth and strengthen existing quality efforts in MNCH services.

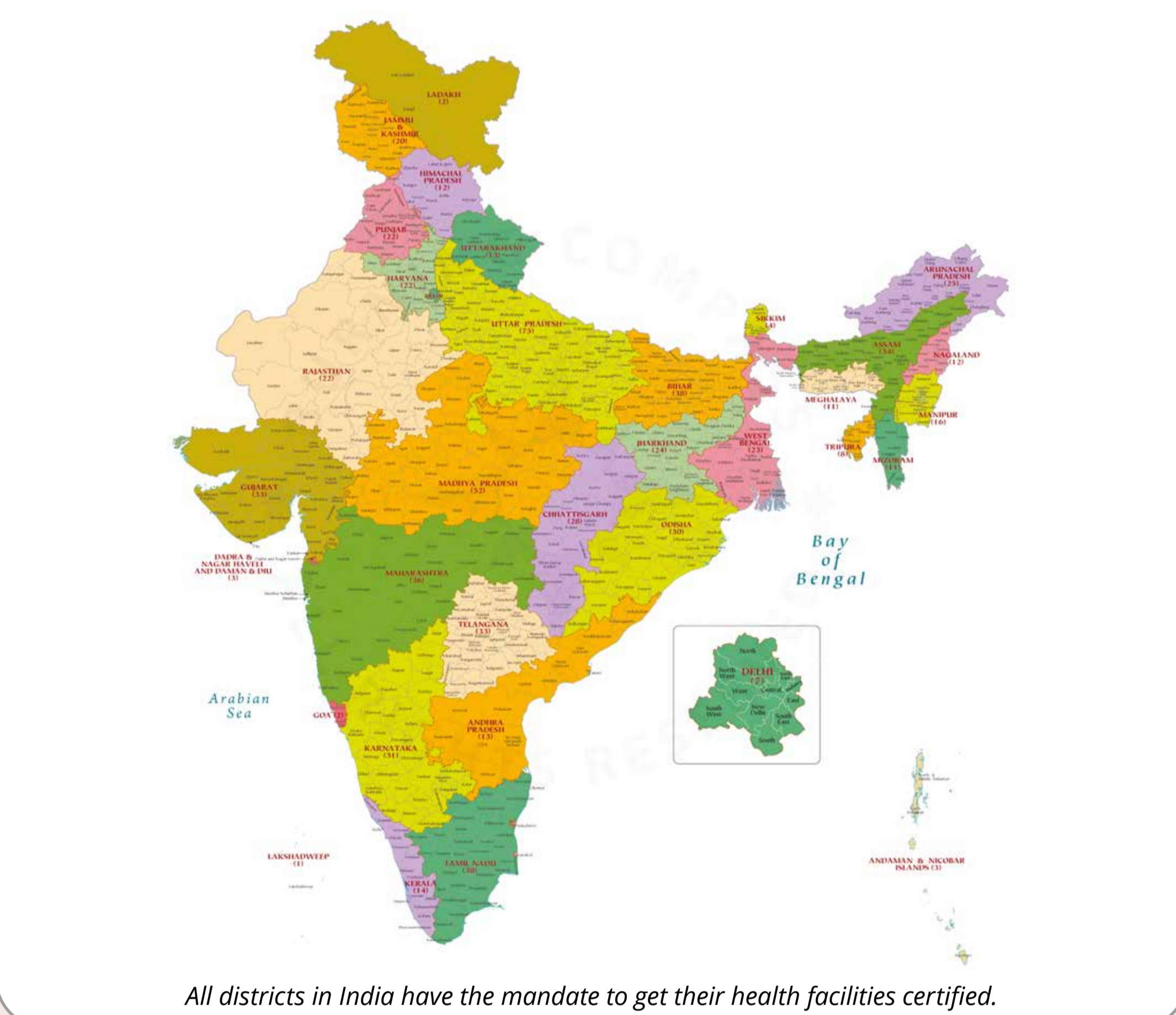


6. MusQan: Ensuring Child Friendly Services in Public Health Facilities: The Ministry of Health & Family Welfare (MoHFW) introduced a quality improvement initiative "MusQan" (meaning "Smile") in 2021 for the paediatric age group (0-12 years), within the existing National Quality Assurance Standards (NQAS) framework. This initiative aims to reduce preventable newborn and child morbidity and mortality. The same institutional framework that has been set up for LaQshya initiative will be used to support the implementation of MusQan.

Other Quality initiatives:

- National Quality Assurance Standards (NQAS)** for District Hospitals, Community Health Centres (CHCs), Primary Health Centres (PHCs), Urban Primary Health Center (UPHCs) and Health and Wellness sub centres have been formulated. The standards have been grouped within the eight areas of concern. Each standard further has specific measurable elements. These standards and measurable elements are checked in each health facility department through department specific checkpoints.
- Kayakalp:** Is an award scheme that aims to promote cleanliness, hygiene and infection prevention. It assesses facilities at internal, peer and external levels using an objective checklist covering eight thematic areas: (a) Hospital upkeep, (b) Sanitation & Hygiene, (c) Waste Management, (d) Infection Control, (e) Support Services (f) Hygiene Promotion, and (g) Beyond the hospital boundary (h) and eco friendliness of the facility.
- Mera Aspaatal:** Meaning my Hospital, Mera Aspaatal is an information and communication technology based platform that captures the 'Voice of Patients' visiting and receiving care at healthcare facilities. Inputs received on Mera Aspaatal supports facilities to identify the dissatisfiers and to take up further actions to mitigate them.
- Strengthening Quality and Safety of Health Facilities Assessments (SaQsham):** IT initiative to strengthen the implementation of NQAS has been launched in 2022. This portal is developed to ensure the automatization of National Quality Certification process for health facilities.
- Safety and Quality: Self-Assessment tool for Health Facilities (SuQushal):** launched in 2022, SuQushal is a self-assessment tool to strengthen quality and safety of services in public health facilities. It aims to enhance the visibility and implementation of patient safety practices in health care facilities. The initiative provides a framework through which a health facility can assess its status in terms of patient safety and take action to deliver safer patient care.

Map of the districts and learning facilities



All districts in India have the mandate to get their health facilities certified.

Taking forward the unfinished and emerging agenda for quality MNCH

- Nationwide implementation of MNH QI programs -LaQshya and MusQan** by Government of India.
 - Well defined standards and protocols for maternal and newborn quality of care** are in place under initiatives LaQshya and MusQan through the National Quality Assurance Standards for public health facility at all levels which is internationally accredited from ISQua (IEEAA).
- The MOHFW is prioritizing the following moving forward:
- Improving provision of quality services to women during antenatal, intranatal and post-natal period by identification of high-risk cases and its appropriate and timely management through PMSMA.
 - Quality certification of all SUMAN notified facilities.
 - Quality certification of newborn care units under MusQan initiative to ensure provision of quality child friendly services in public health facilities.



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