LAQSHYA LABOUR ROOM QUALITY IMPROVEMENT INITIATIVE



Mrs Shailaja Mathews

Introduction

- Ministry of Health & Family welfare , government of India launched an Ambitious programme LaQshya on 11th December 2017.
- The Main aim of this programme was improving quality of care in Labour room & maternal Operational Theatre.



Goal & Objectives

• **Goal** - To reduce preventable maternal and newborn mortality, morbidity and stillbirths associated with the care around delivery in Labour room and Maternity OT and ensure respectful maternity care.

• Objectives -

1. To reduce maternal and newborn mortality & morbidity due to APH, PPH, retained placenta, preterm, preeclampsia & eclampsia, obstructed labour, puerperal sepsis, newborn asphyxia, and sepsis, etc.

2. To improve Quality of care during the delivery and immediate postpartum care, stabilization of complications and ensure timely referrals, and enable an effective two-way follow-up system.

Objectives

3. To enhance satisfaction of beneficiaries visiting the health facilities and provide Respectful Maternity Care (RMC) to all pregnant women attending the public health facility.

• Target Beneficiaries:

LaQshya program will benefit every pregnant woman and newborn delivering in public health institutions. Program will improve quality of care for pregnant women in labour room, maternity Operation Theatre and Obstetrics Intensive Care Units (ICUs) & High Dependency Units (HDUs).

Strategies

- 1. Reorganizing/aligning Labour room & Maternity Operation Theatre layout and work as per 'Labour Room Standardization Guidelines' and 'Maternal & Newborn Health Toolkit' issued by the Ministry of Health & Family Welfare, Government of India.
- 2. Ensuring that at least all government medical college hospitals and high case-load district hospitals have dedicated obstetric HDUs (High Dependency Units) as per GoI MOHFW Guidelines, for managing complicated pregnancies that require life-saving critical care.
- 3. Ensuring strict adherence to clinical protocols for management and stabilization of the complications before referral to higher centres.



- Following facilities are being taken under LaQshya initiative on priority:
- All Government Medical College hospitals.
- All District Hospitals & equivalent healthy facilities.
- All designated FRUs and high case load CHCs with over 100 deliveries/60 (per month) in hills and desert areas.

Key Features

- LaQshya program envisages to improve quality of care in labour room and maternity OT.
- Under the initiative, multi-pronged strategy has been adopted such as improving Infrastructure upgradation, ensuring availability of essential equipment, providing adequate Human Resources, capacity building of health care workers and improving quality processes in labour room.
- Implementation of 'fast-track' interventions (NQAS assessment, Trainings, Mentoring, Reviews etc.)

Key Features Cont...

- Capacity-building of healthcare workers by skill-based training like Dakshta & improving quality processes in the labour room.
- To strengthen critical care in Obstetrics, dedicated Obstetric ICUs at Medical College Hospital level and Obstetric HDUs at District Hospital are operationalized under LaQshya program.

Institutional Arrangements

• Under the National Health Mission, the States have been supported in creating Institutional framework for the Quality Assurance-

National Mentoring Groups State Quality Assurance Committee (SQAC) District Quality Assurance Committee (DQAC) Quality Team at the facility level

Institutional Arrangements Cont...

• National Mentoring Group:

Includes members of the Programme Divisions, IEC Division, NHSRC, NIHFW, AIIMS and Medical Colleges, Nursing colleges, Schools of Public Health, Professional Associations, Hospital Planners, IT professionals, Development Partners, Empanelled external assessors & eminent professionals.

 State level- State NHM, Departments of Health and Medical Education would jointly create institutional arrangement for seamless flow of support.

Institutional Arrangements Cont...

• District level-

 An external multidisciplinary team, responsible for mentoring one or more labour rooms, would comprise of District Family Welfare Officer/RCHO (equivalent), district/divisional quality consultants, nursing instructors/mentors from the functional skill labs, faculty of nearest medical colleges and representatives of professional associations and development partners.

Institutional Arrangements Cont...

• Facility Level:

- 1. Quality Circle in a labour room involves Gynecologist, Pediatrician, Matrons and Nursing Staff & Support Staff.
- 2. In the Operational Theatre, anesthetist would also be a member of the Quality circle.
- 3. The Quality Circles works in coordination with facility level quality team headed by the Medical Superintendent or facility-in-charge.

Digital Innovation

• LaQshya Web portal-

- All LaQshya related data will be uploaded on the portal for prompt report generation as well as visualization of dashboard to monitor progress in key maternal new born indicators at various levels (facility, District, State & National)
- Safe delivery App- Job aid as well as training tool for health workers.



Certification, Incentives & Branding

- Quality Improvement in labour room and maternity OT will be assessed through NQAS (National Quality Assurance Standards). Every facility achieving 70% score on NQAS will be certified as *LaQshya certified facility*.
- Quality Improvement in labour room and maternity OT will be assessed through NQAS (National Quality Assurance Standards). Every facility achieving 70% score on NQAS will be certified as *LaQshya certified facility*.
- Facilities achieving NQAS certification, defined quality indicators and 80% satisfied beneficiaries will be provided incentive of Rs. 6 lakhs, Rs.3 lakhs and Rs.2 lakhs for Medical College Hospital, District Hospital and FRUs respectively.







To **improve quality** of care in labour room and maternity operation theatres.



To reduce preventable maternal and new-born mortality, morbidity and stillbirths.



Benefit every pregnant woman and new-born delivering in public health institutions



Till date 2427 **Public health facilities** across country have been identified

