

QUALITY INDICATORS IN OBSTETRIC DEPARTMENT

DR ANITA NELAKUDITI

CONSULTANT OBSTETRICS & GYNECOLOGY

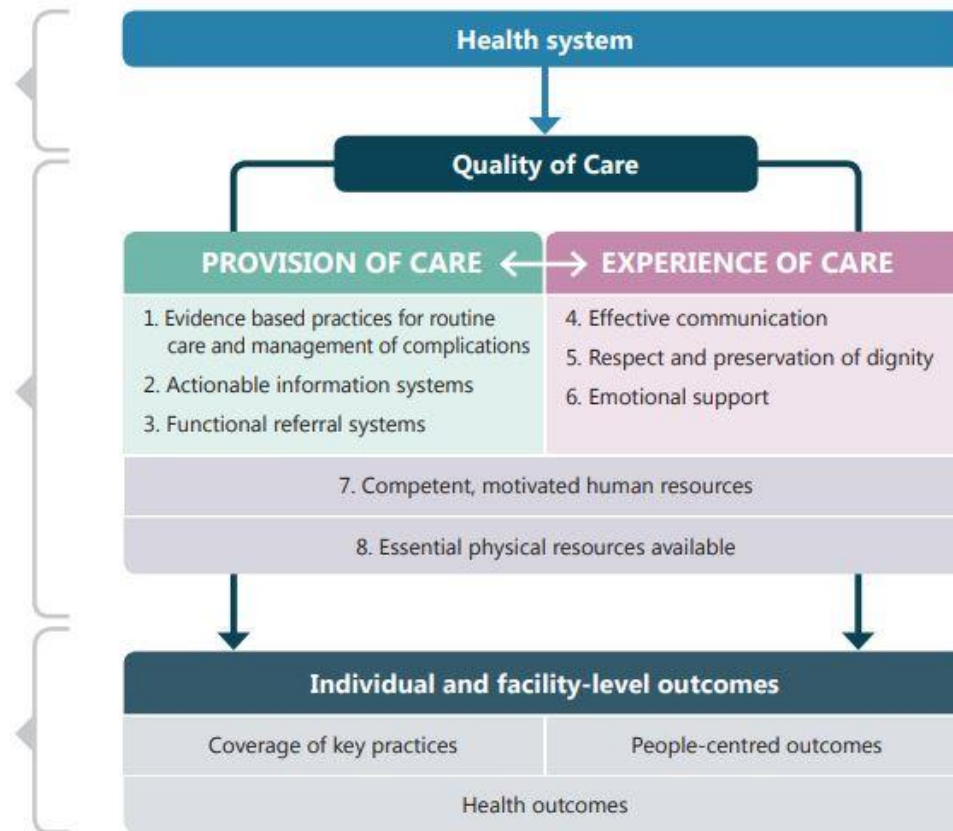
RAMESH HOSPITALS , GUNTUR

Operation Theatre - LASER SAFETY

Ramesh Hospitals – Guntur



- Every year, 289 000 women die due to complications in pregnancy and childbirth, and 6.6 million children below 5 years of age die of complications in the newborn period and of common childhood diseases. Many of these deaths could be prevented by providing optimal care at health facilities
- Therefore,improving the quality of facility-based health care services and making quality an integral component of scaling up interventions to improve health outcomes of mothers, newborns and children is of utmost importance.



QUALITY

- Quality of care can be defined as ‘the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge. In order to achieve this, health care must be safe, effective, timely, efficient, equitable and people-centred”
- The quality of care for women and newborns is therefore the degree to which maternal and newborn health services (for individuals and populations) increase the likelihood of timely, appropriate care for the purpose of achieving desired outcomes that are both consistent with current professional knowledge and take into account the preferences and aspirations of individual women and their families. This definition takes into consideration the characteristics
- of quality of care and two important components of care: the quality of the provision of care
- and the quality of care as experienced by women, newborns and their families.

.

quality indicators

Quality indicators have been developed as Quality assessment tools to measure quality of care

- ‘Measurable elements of practice for which there is evidence or consensus that they reflect quality and hence help change the quality of care provided’
- The purpose of quality indicators is to support continuous improvement in care, often called quality improvement.

- **Box 2 Key Sustainable Development Goals indicator linking to maternal, perinatal and reproductive health²⁷**
- ***SDG 3 Good health and well-being***
- By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births
- By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1000 live births and under-5 mortality to at least as low as 25 per 1000 live births
- By 2030, ensure universal access to sexual and reproductive healthcare services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Achieve universal health coverage, including financial risk protection, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all.
- ***SDG 2 Zero hunger***
- By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons.

EPMM I	EPMM II	Sustainable Development Goal or Global Strategy indicator
Impact		
Maternal mortality ratio		√
Maternal cause of death (direct/indirect) based on ICD-MM		√
Adolescent birth rate		√
	Gender parity index (GPI)	√
Outcomes/Coverage		
Four or more antenatal care visits		√
Skilled attendant at birth		√

