

Transforming Newborn Care: The Genesis and Journey of Family- Centred Newborn care- India Model



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Presentation Layout

- I. Concept genesis
- II. Evidence generation & Evolution
- III. Implementation & challenges
- IV. Way forward & Country Scale up
- V. Conclusions

Year 2007

State of Newborn care

SETTING

- 16 bedded
- referral neonatal intensive care unit of north India
- Severe HR constraints



Incessant Alarms !!



Wet Babies !



IV swellings!



Misplaced Tubes/probes!!



Common scene outside the neonatal unit.....
Parent Attendants lined waiting..... !!



“Can we start ‘engaging’ the waiting parent attendants *as nursing aides* for their own babies?”

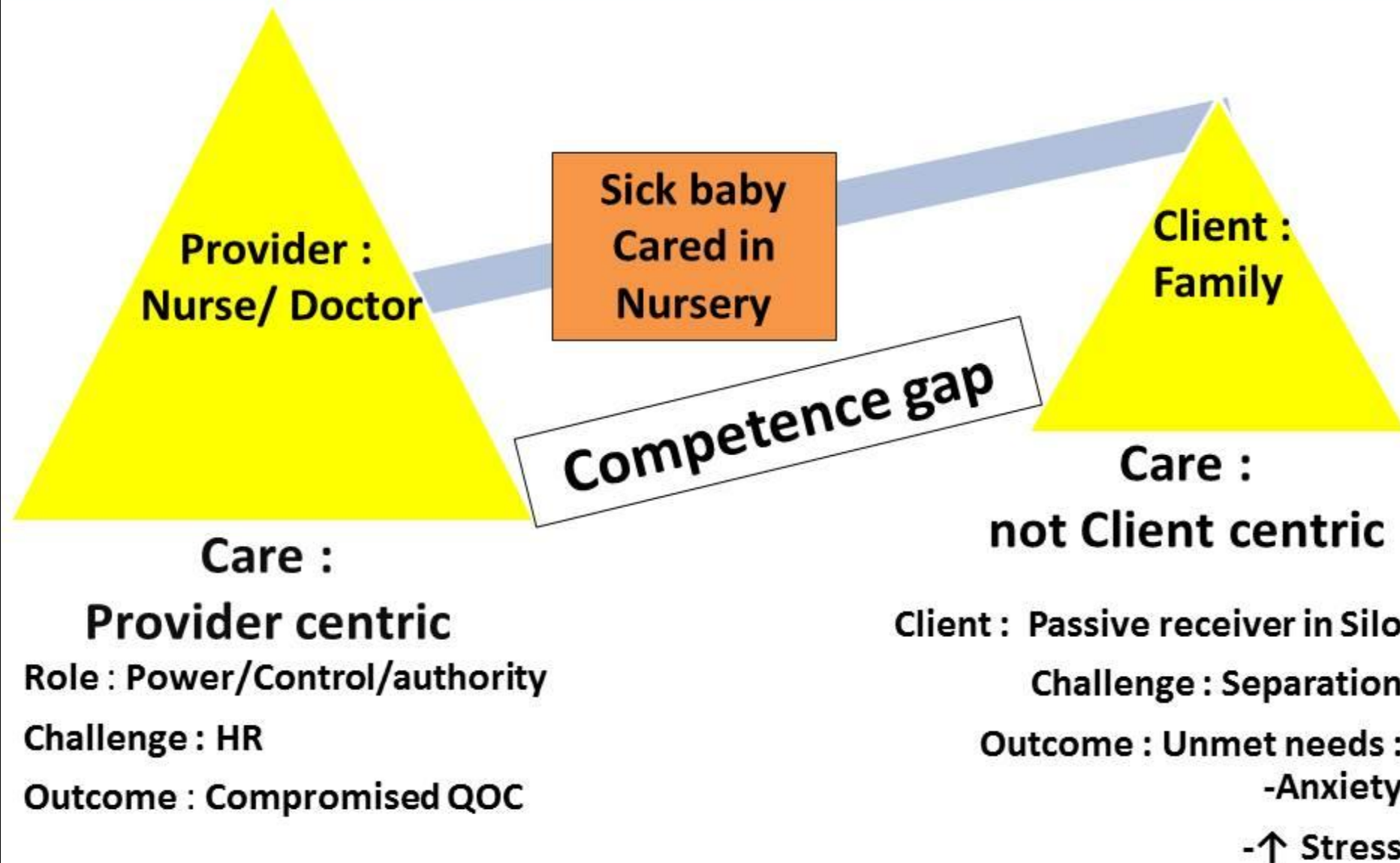
WHAT DID WE SEE?

FRINGE BENEFITS!!!

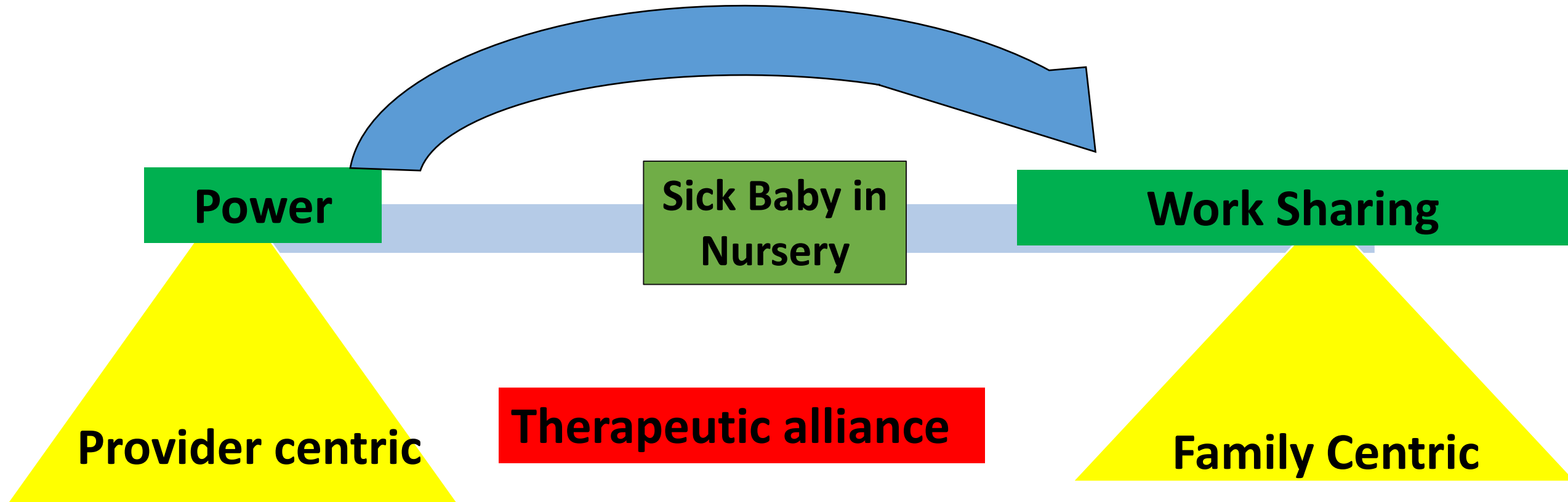
- Parents
- Babies
- Nurses



Conventional Model for care of a sick newborn



Family Centric Care : A Paradigm Shift



NET outcome

- Quality Improvement
- Improved Health Outcomes.
- Care giving competencies, *likely to be Cornerstone of Continuum of Care*
- Positive and Trustful Relationships

Family-Centered Care to Complement Care of Sick Newborns: A Randomized Controlled Trial

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 From Departments of Pediatrics and ^SMicrobiology, PGIMER and Dr. RML Hospital; *Biostatistics, AIIMS; and
[#]Management Studies, IIT; New Delhi, India.

TABLE III SUMMARY OF OUTCOMES IN THE TWO GROUP OF SICK NEWBORNS

Outcome variables	Control group (n=147)	Intervention group (n=148)	Mean difference (95% CI)	P value
Culture positive nosocomial infection rate	7.17	6.43	0.74 (-4.21, 5.6)	0.76
Culture negative nosocomial infection rate	9.86	10.56	-0.70 (-6.6, 5.2)	0.82
Duration of stay, median (IQR)	11 (7,18)	11.5 (7,17.5)		>0.05
Mortality, No. (%)	13 (8.8)	10 (6.8)	(0.04, 2.01)	0.5
Breastfeeding rate, No. (%)	98 (66.7)	119 (80.4)	(0.59, 0.74)	0.007

No ↑ in Infection
↓ Hospital stay
↑ Breast feeding

Audio-Visual Training Tool : 4 Modules

1- Entry Protocol



2- Developmentally Supportive Care



2- Developmentally Supportive Care contd...(Feeding)

AV Training Module Contd...



3- Kangaroo Mother Care



4- Preparation for Discharge and care at Home



Institutionalising Family Centred Care: The Process

**Induction at Admission
& Identification of
Primary Care Provider**



Daily Trainings Scheduled



**Demonstrations and
Practice**



Supervised Learning



Peer To Peer Learning



Discharge Counseling



Independent Doing

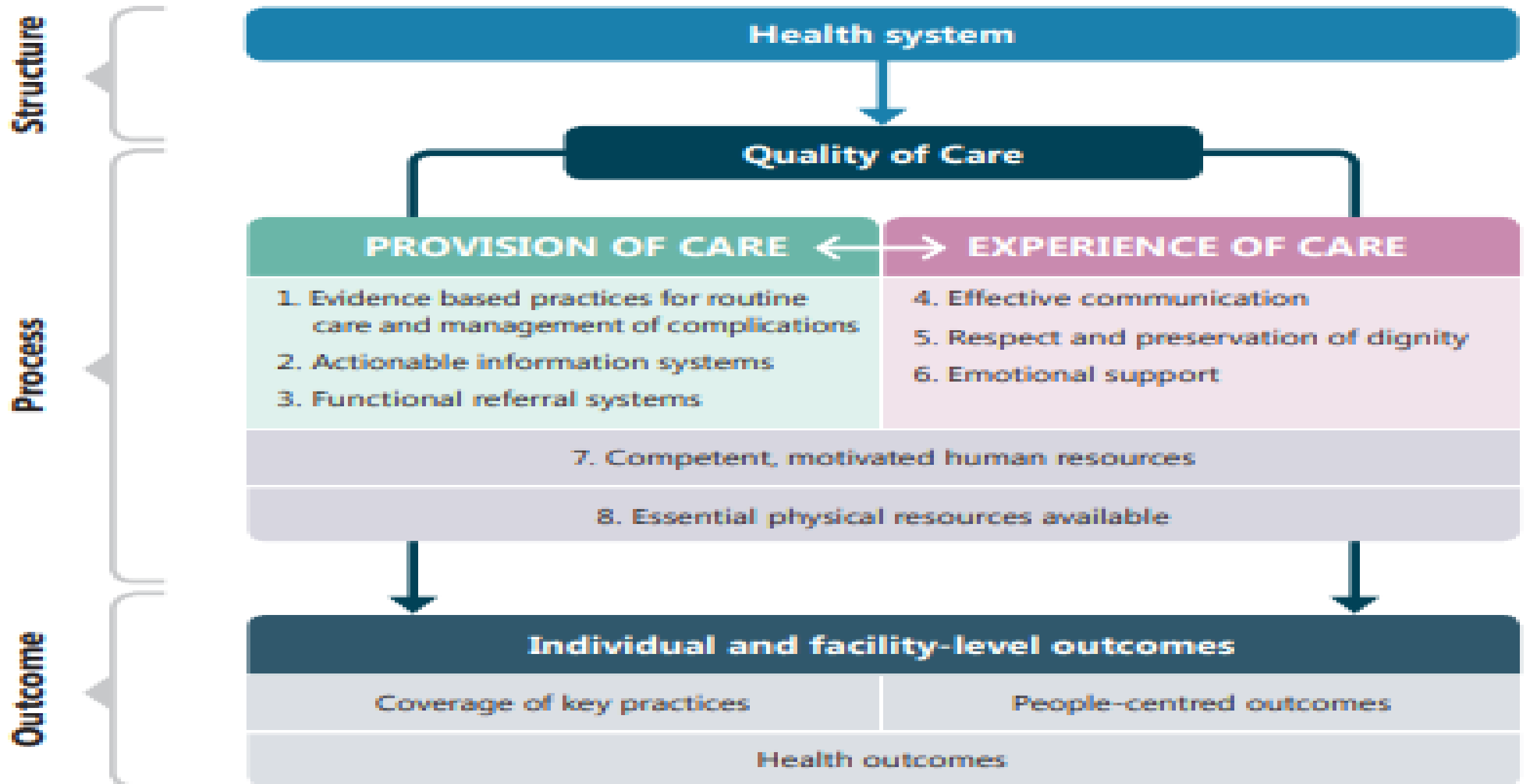


**Continuum of Care at
home**



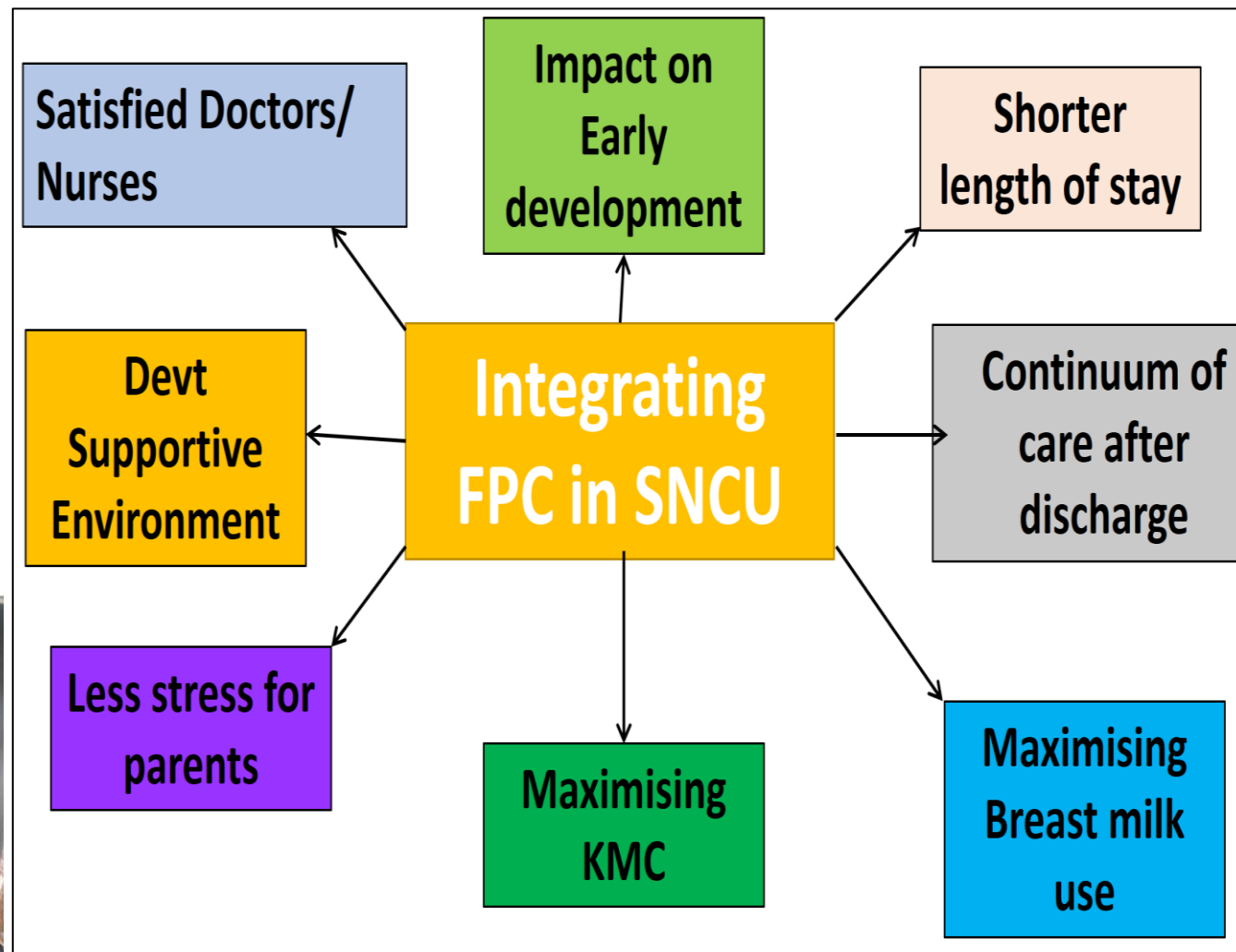


WHO Quality Of Care Framework for Maternal-NB



Experience of care- Mother/ Family: Family Centred Care





Family Centered Care for newborns

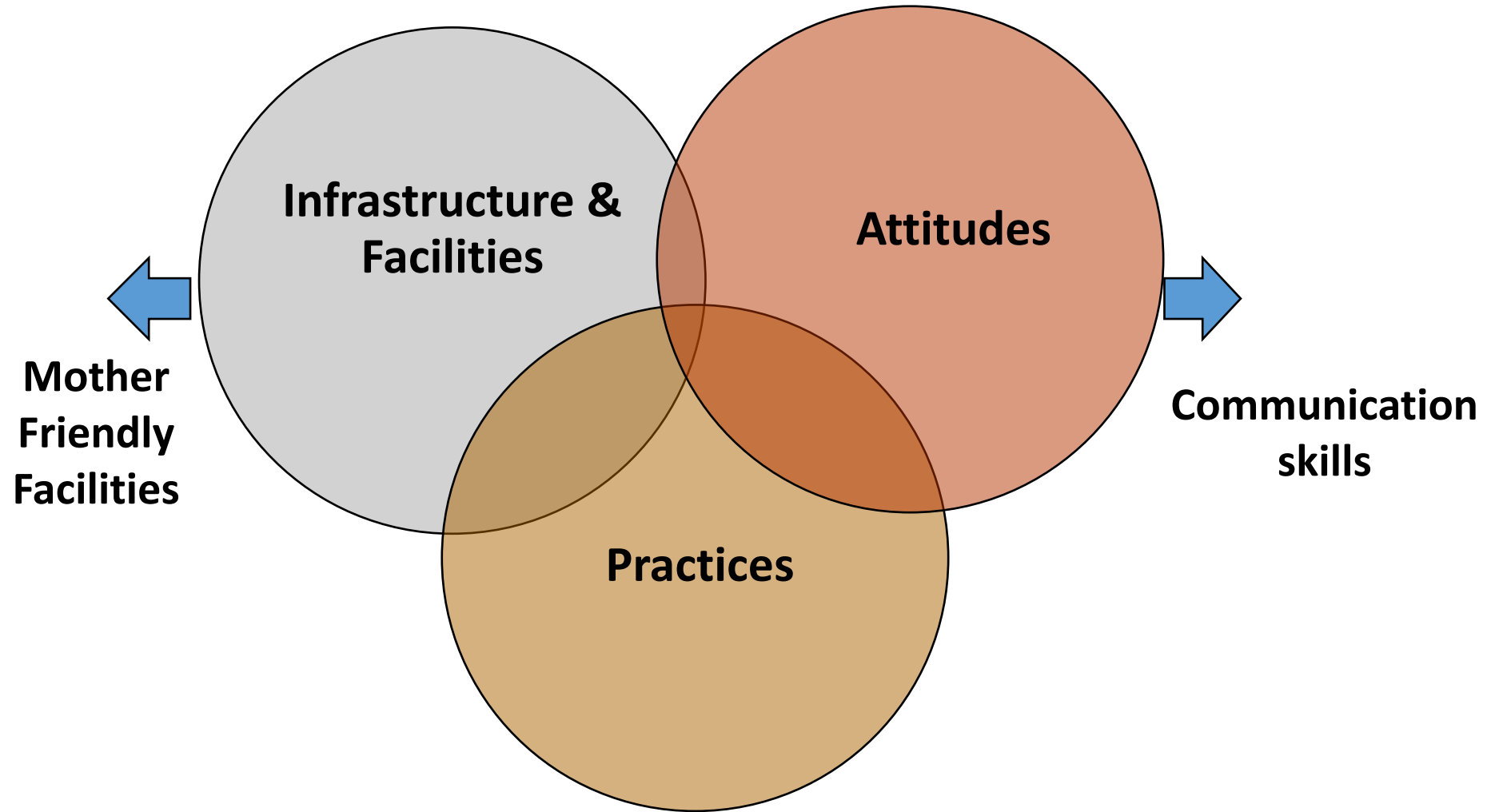
ISN'T IT APPEALING?...

- Seemingly simple
- Low cost
- Could possibly help overcome HR constraint
- Seems to have benefits for all stakeholders involved

IS IT THAT SIMPLE ?

IS IT FEASIBLE?

Implementing FCC



Lessons Learnt

Mothers: Easy buy in!

Providers: Challenges!!

- ❖ Accepting P-A as a co-partner in care !
- ❖ Diminished authority?
- ❖ Watch Dog Effect!!
- ❖ Tend to task shift!!
- ❖ Expected to deliver a standard of care !!

Getting health care provider on board is the most important!!!

- A module is required (Do's & Don'ts)
- Identification of a 'champion'
- Need of initial & periodic sensitization of all provider team Constant
- Constant Supervision / monitoring

Responsibility rests with care providers!!

Measures & Attributes of Implementation

(June'16-July'17)

1. Measure of Implementation

- Workspace readiness
(Infrastructure-Facilities)
- Parent/Attendant preparedness *(Practices)*
- Staff preparedness *(Attitudes)*

2. Feasibility

- 61% Males
- 37% Fathers
- 20% Grandparents
- 41% > 50 years old
- 25% Illiterate

3. Acceptability

Qualitative study (2016)

- Primary gains:
(Empowerment, Skills, Continuum of Care)
- Improved patient- staff relation

4. Measure of Quality of Care

Participatopn of Mothers in Care in processes of care

- Nesting,
- Positioning,
- Cleaning,
- Skin to Skin Care

IEC Material

The image shows a collection of six student posters from the 2017-2018 school year, displayed on a wall. The posters are titled "How often we say all those things" and feature various graphics and handwritten text. A large black arrow points to the first poster on the left.

Poster 1 (Leftmost): Titled "How often we say all those things", it features a pyramid graphic with the text "I am the best of all" at the top. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

Poster 2: Titled "Family centered care of newborn as evidenced", it features a circular diagram with the text "Family centered care of newborn as evidenced" in the center. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

Poster 3: Titled "How often we say all those things", it features a circular diagram with the text "How often we say all those things" in the center. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

Poster 4: Titled "How often we say all those things", it features a circular diagram with the text "How often we say all those things" in the center. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

Poster 5: Titled "How often we say all those things", it features a circular diagram with the text "How often we say all those things" in the center. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

Poster 6 (Rightmost): Titled "How often we say all those things", it features a circular diagram with the text "How often we say all those things" in the center. The poster includes a list of "Things I say all the time" and a list of "Things I don't say all the time".

[illegible]

RESOURCE MATERIALS

Session-1

- Sensitisation to FCC
- Preparation for entry into the Nursery
- Handwashing
- Gowning
- Familiar environment

Session-2

- Developmentally Supportive care
- Cleaning a soiled baby
- Breast feeding
- Expression of Breast Milk

Session-3

- Preparation for Discharge & care at home
- Sporing cleaning
- Appropriate Clothing Thermal care
- Exclusive breast feeding & KMC
- Care of cord & eye
- Danger signs & seeking medical help
- Follow up & compliance with discharge instructions
- Immunisation

Session-4

कंगारू मातृ सुरक्षा
Kangaroo Mother Care

Audio Visual Modules
(Session- 1 to 4)

**National
Training
Guide**

FCC :Tools and Performas

FCC CHECKLIST

<u>ECG Facility Checklist</u>			
Name of the Facility: New Born Care Unit (Complete Address)			
District:		State:	
Date of visit:		Name of monitor:	
Number of functional beds:		Designation of monitor:	
I. Facility Checklist:			
<u>A facility must checklist is to be filled after observation</u>			
S.No.	Observational Points	Score 2 if Present 0 if Absent	Comments
1	Staff/ Nurses/ Nursing Staff		
2	Provision of bathing/ toilet facilities		
3	Provisions for food/drink for mothers		
4	EMG room		a. WITH EMG Chart b. AC material displayed c. Room Open Green
5	EMG/Neuro leading room with privacy		a. AC material displayed b. Refrigerator for storing prepared milk c. Provision of chairs d. Books and journals e. A sink ready for hand wash / washing utensils f. Availability of Resuscitation equipment
6	Records of newborn Unit - Logs and Features of ECG displayed		
7	By Nurses/ICU/ECG		
1. Inform to mothers where they can keep their valuables in secure place before entry			

INTRODUCTION SESSION

परिवार केन्द्रित देखभाल सुव्यवस्था का प्रारम्भ

ममरी, आज आने वाले को हमने अपहृत कर रें, तो हमपर चार्ज है कि हम उसे उसकी जमानत के अनुसार रिपेयर करना करें। आगे वाले को हमारा हाथों में बन्ने की सलाह करना है। मैंने कि आगो बचा होना कि सफाई हो पर नहीं अने-अने के लिए चिन्तित हो है, चम्पू बाने के जल द्वारा के लिए हम आगो में हमने सफाई करना चालीं और हाथर आज में चालीं कि अगला बन्दा आगो कीजो के हमने हो।

[illegible]

आवधिक टेक्नोलॉजी के लिए सीढ़ी देने वाले टी एलएलएल साधन और उनका नाम, मोबाइल नं. 919900000000

FEEDBACK FORM

[illegible]

NURSING MONITORING SHEET

[illegible]**FOLLOW UP PROFORMA**

ECC FOLLOW-UP PERFORMANCE									
Parameters		3 months (date)		6 months (date)		9 Months (date)		1 year (date)	
Outcome (Death/survival) (Explains the cause of outcome, if death)									
Exclusion (breast feeding (Y/N))									
A.M. given (if eligible)									
Parameters		3 months		6 month		9 Months		1 year	
		Median	Lower	Median	Lower	Median	Lower	Absolute	Can
Weight									
Head									
Circumference									
Length									
No hospitalization (if any) with reason									
Episode I (date)		Episode II (date)		Episode III (date)					
Cause: Management (100%/90%)									

DISCHARGE BOOKLET

परिवार केंद्रित शिशु देखभाल
Family Centered Care for
Newborn

घर पर नवजात शिशु की देखभाल
हेतु कुछ जरूरी बातें

नवजात शिशु विभाग ,
डा. राम मनोहर लोहिया अस्पताल
नई दिल्ली

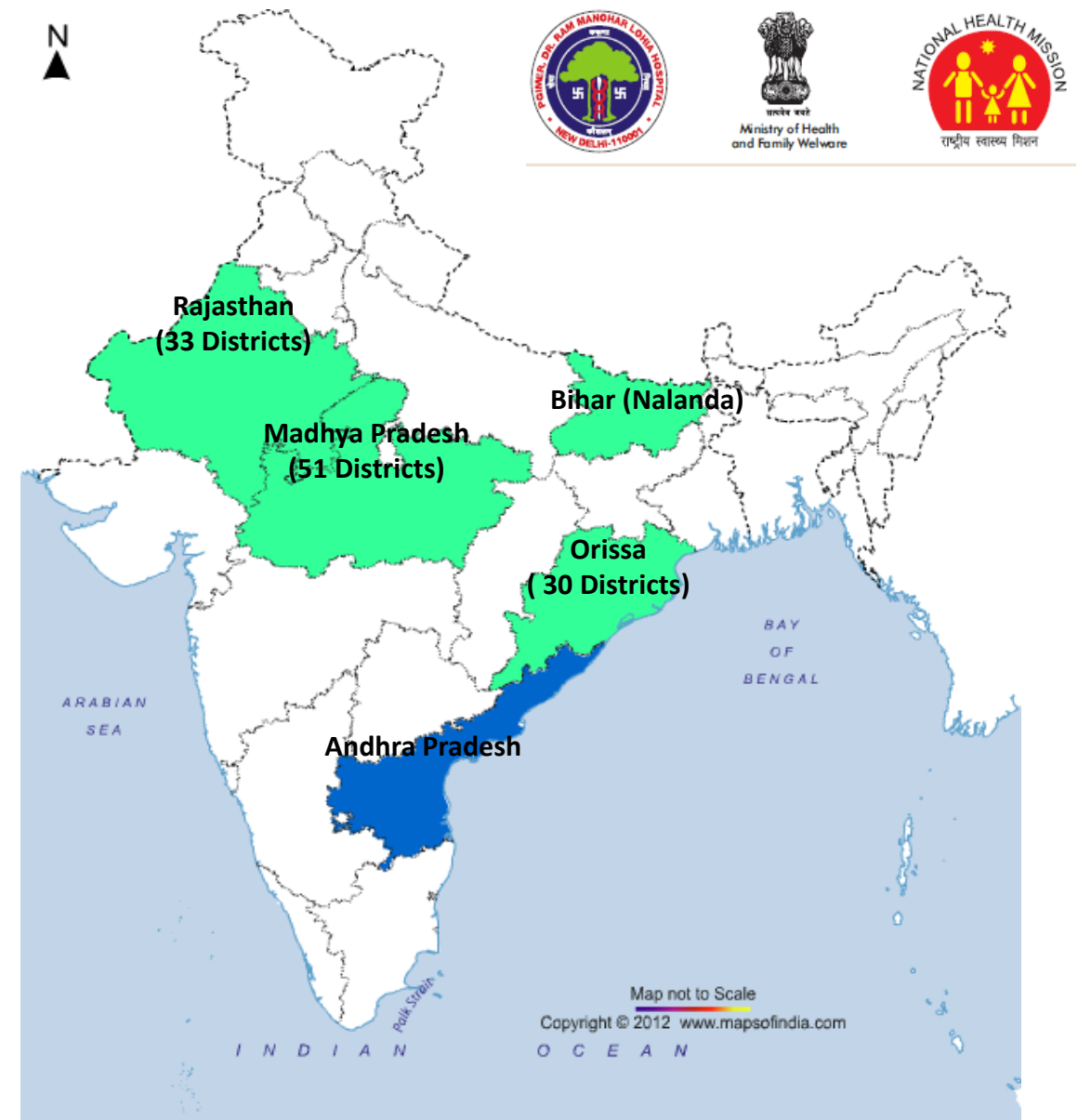
Translation to Public Health system

- ✓ Evidence
- ✓ Implementation Framework
- ✓ Resource Materials
- ✓ Monitoring Tools
- ✓ Felt Need

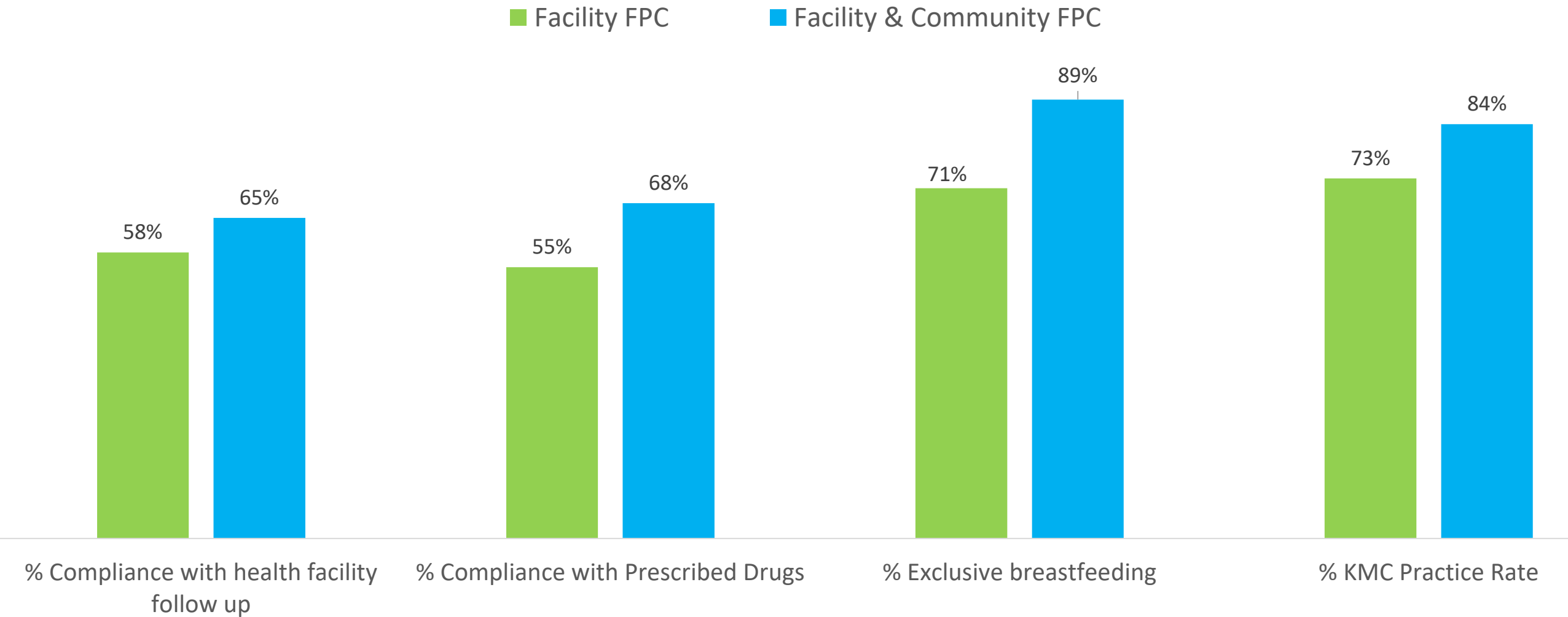
(High Post D/S Mortality, Low QoC, Low Home KMCRates)

Family Participatory Care – Piloting at 5 district

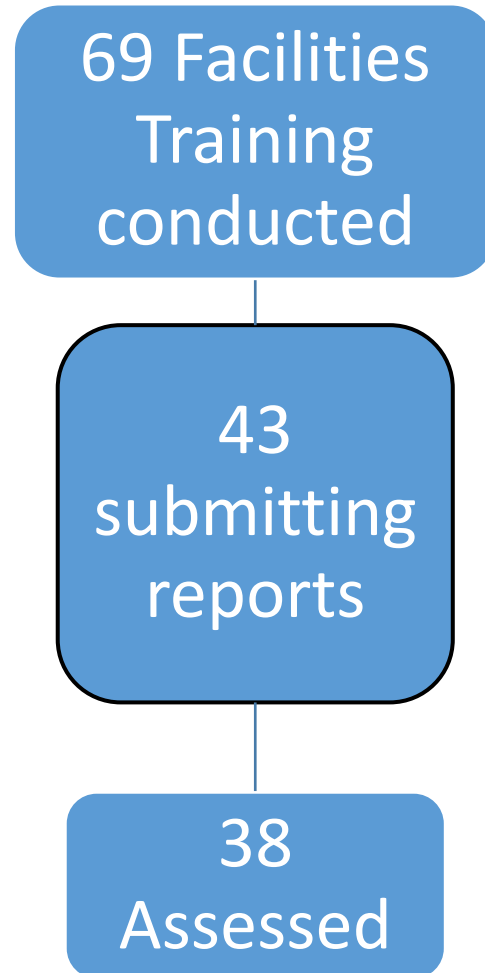
- National Resource Centre
- District level 5 model centres



Improved Adherence with addition of community component in 5 FPC centres



Qualitative & Quantitative Assessment of FPC in 38 facilities in India



Objectives

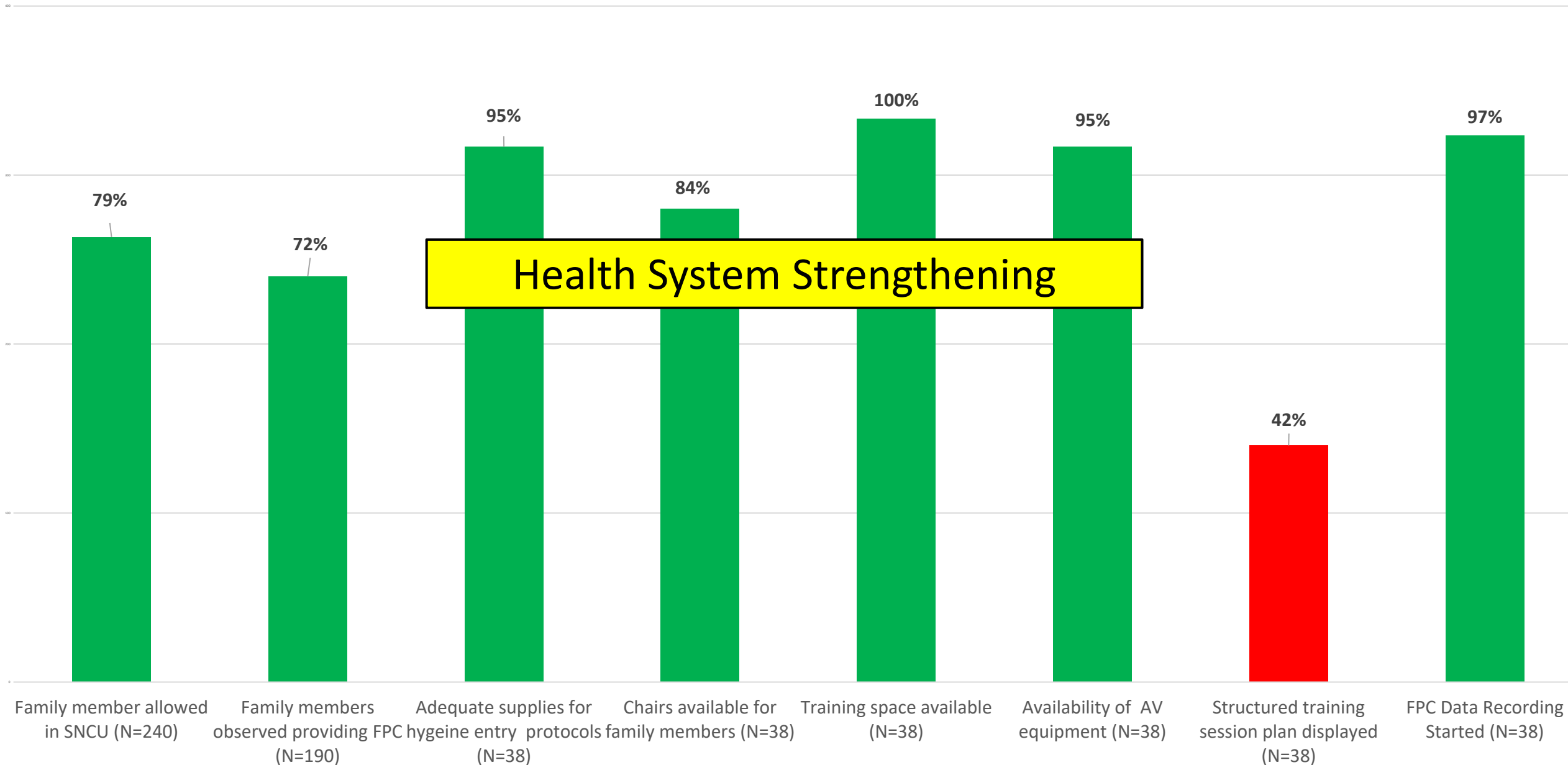
- ❖ Assess the current status of FPC implementation
- ❖ Bottlenecks & challenges in quality implementation of FPC.

FPC Assessment-Quality of Care

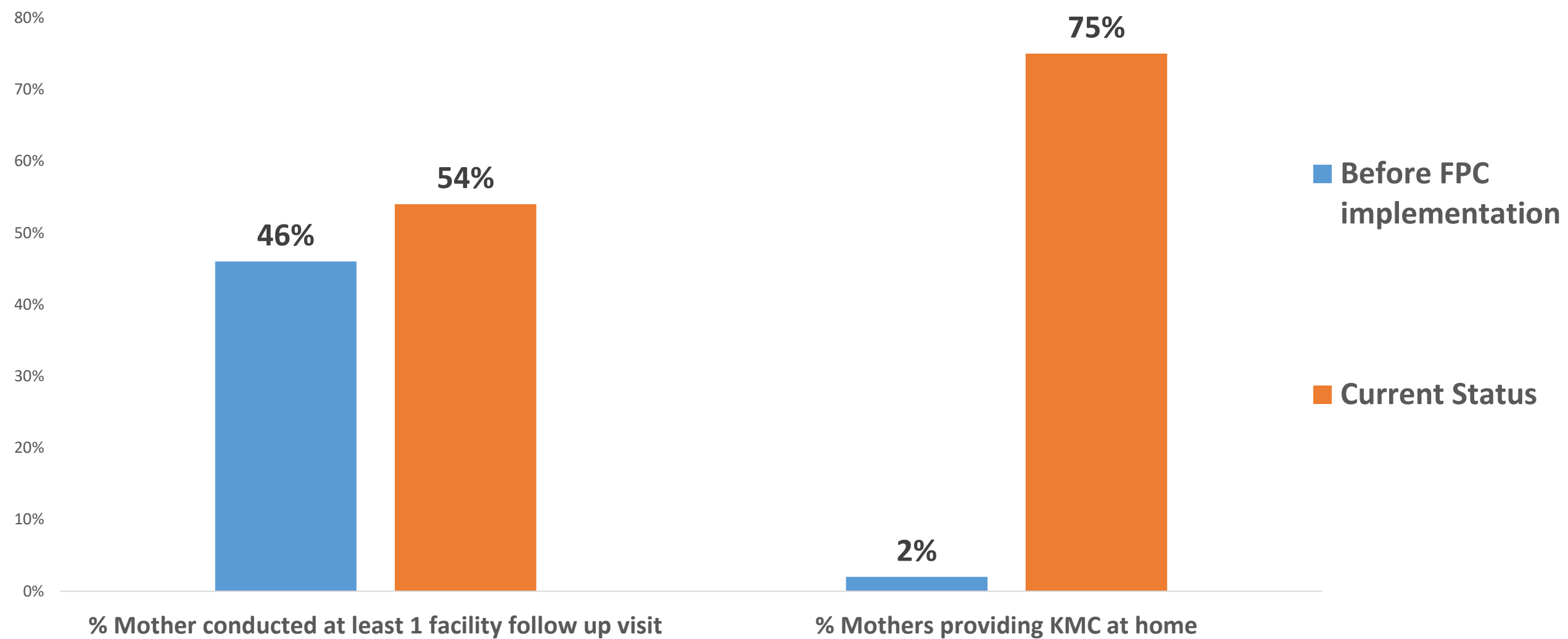
(providers feedback N=38)

S N	Qualitative Opinion of Doctors and Nurses (N=38)	Improved	No Change	Not Sure
1.	Quality of care since starting FPC in the facility	97%	-	3%
2.	Breast feeding practices in the facility	97%	3%	
3.	KMC practices in the facility	100%	-	
4.	Nosocomial infections in the facility	34%	39%	27%
5.	Follow up of discharged cases in the facility	74%	26%	

FPC Assessment-Facility observation



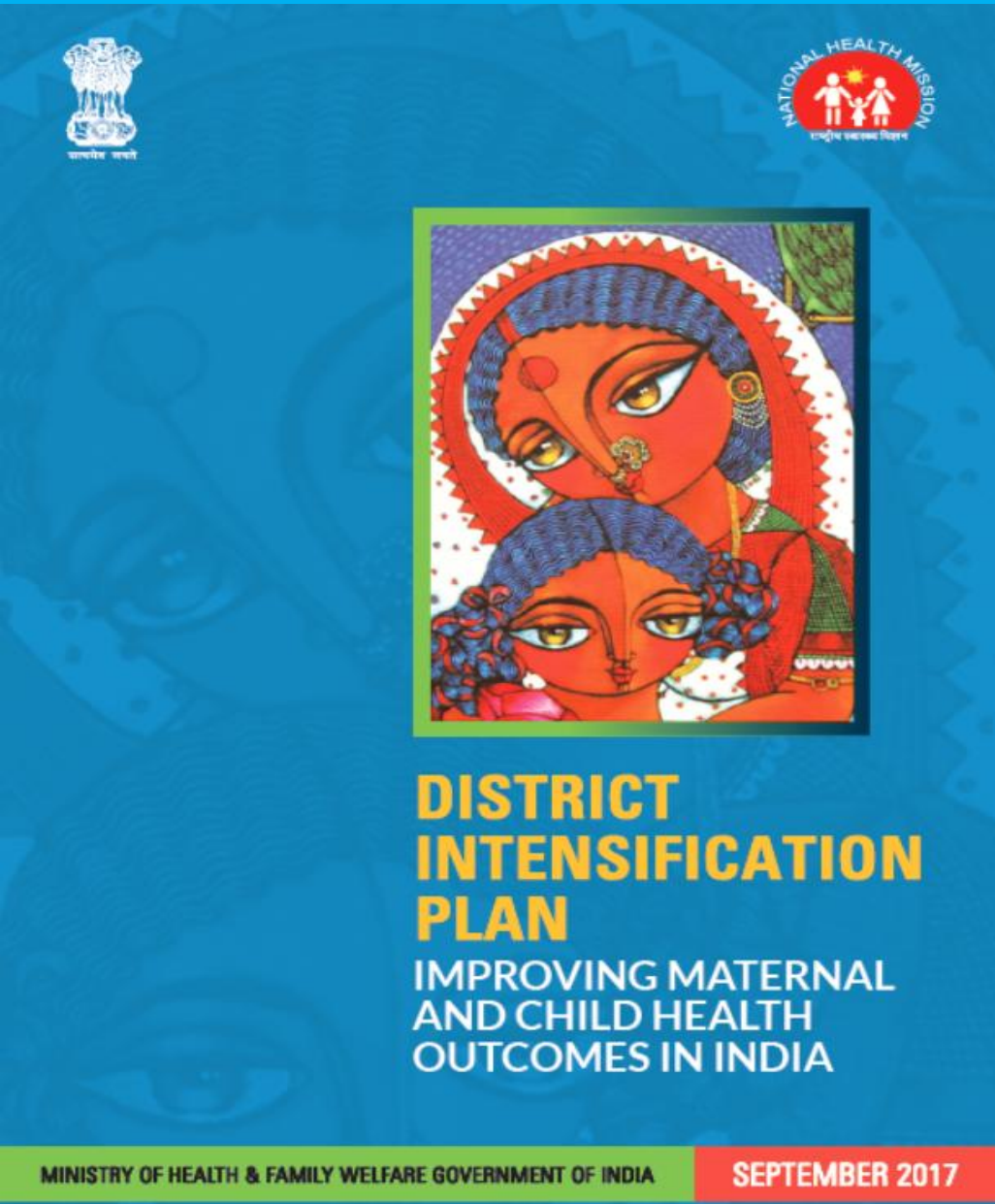
Improvement in Facility follow up and KMC at home



Summary of Findings

- Almost all mothers felt FPC should be a universal practice.
- All units were functional for FPC (*72% eligible newborns receiving FPC*)
- 53% of Doctors & Nurses were trained in FPC.
- Enabling logistics available at most places.
- FPC sessions were regular at most facilities, but trainings not well structured.
- Breast feeding & KMC practices increased, both in facility and at home.

Government of India intensification plan for FPC



- ❖ Need for Intensification of activities in 102 Highest priority districts (HPDs).
- ❖ Best practices identified
- ❖ **FPC included as one of the key activity for intensification**

To conclude, Family Centred Care is....

- A humane way to care; Creates an opportunity for lifelong bonding.
- Family's right to a respectful care : Need to protect, support & promote.
- An approach to Improve Care at SNCUs
- Operationally feasible & acceptable in Indian health care setting
- Winning strategy for improving KMC & empowering families
- Best Integrated with existing facility based newborn care program.

Bringing Health Care providers on board most important!

Key Message

Family Centred Newborn Care holds the key for developing social accountability of health that may help achieve Sustainable Development Goals.



Optimising Early Childhood Development

At Community :
Empowerment: Linkage for
Continuum of Care

At Facility : Nurturing Care
*Through learnt competencies:
Involvement in Processes of*

Family Centred Care

Small or Sick
Newborn at Facility

Experience of care- for Small & Sick Newborn



FPC : A gateway to Nurturing Care for Small &
Sick Newborn



Nurturing Care Framework for Small and Sick Newborns



Key Message

Family Centred Care and Nurturing care for SSNB:

Quality Paradigm:

A gateway for making our Newborns

Thrive with Improved Health Outcomes.

Acknowledgement

- National and state governments
- Babies and their families for participation and consent for pictures
- Our unit staff /doctors and RML Hospital



Family Centred Care and Nurturing Care Related Contributions

Global Change-Makers in Health: A WHO Documentary film:

<https://video.search.yahoo.com/search/video?fr=mcafee&p=who%27s+documentary+global+changemakers+in+health+movie+youtube&type=E210US739G0#id=1&vid=13a501128d6e27d68da3cda0aa387b7e&action=click>

