

Innovation: Health Post Scorecard

Background:

Improving maternal care is integral to reducing preventable maternal and neonatal morbidities and deaths. Early registration of pregnancy, regular monitoring, and quality antenatal check-ups are all essential services which should exist at the primary level. Urban Primary Health Centers are sites for providing primary health care and prevention services to the city's vulnerable communities. Health post service provision focus over the last decade has shifted towards immunization, polio eradication, family planning, and prevention of HIV/AIDS, tuberculosis and malaria. However, antenatal, postnatal, and neonatal services are not prioritized at city health posts despite their responsibility to provide these services.

SNEHA has been partnering with the Municipal Corporation of Greater Mumbai (MCGM) and adjacent six municipal corporations of the Mumbai Metropolitan Region (MMR) to support and strengthen pregnancy care for women by working with both the public healthcare systems and the communities. Besides working with public hospitals to map and establish referral networks and promote timely care for women with potential complications, the program collaborates with municipal health posts to standardize primary antenatal care services and build capacity of their staff and outreach workers.

The Government of Afghanistan has developed a Balanced Scorecard (BSC) to regularly monitor the progress of its strategy to deliver a basic package of health services. It has become a useful tool to summarize the multidimensional nature of health-services performance, and identify performance strengths and weaknesses in the local context¹. Scorecard has been used as a monitoring tool in several other studies².

Steps / Processes:

The intervention was designed after the situational analysis to understand the availability, accessibility, and quality of care of antenatal, postnatal services at health posts. The intervention aims to ensure that the Antenatal Clinics (ANC) would be conducted weekly at health posts on a fixed day and time. All core services would be provided during the clinics. All equipment required for the clinic would be available to function properly. Roles and responsibilities of all health post staff including the Medical Officer (MO), General Nurse Midwife (GNM), Auxiliary Nurse Midwife (ANM) and outreach workers (link workers) would be suitably delegated and ANM and ASHAs would mobilize pregnant women in the community to attend ANC clinics at the health post.

¹ Peters D H, Noor A A, Singh L P, Kakar F K, Hansena PM, G Burnhama : A balanced scorecard for health services in Afghanistan. Bulletin of the World Health Organization 2007;85:146-151.

² Mutale et al :Application of Balanced Scorecard in the Evaluation of a Complex Health System Intervention: 12 Months Post Intervention Findings from the BHOMA Intervention: A Cluster Randomised Trial in Zambia, PLoS ONE, 9, 4, (e93977), (2014)

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A standardized ANC clinic observation form was developed to observe functionality, regularity, service provision and utilization of services. The scorecard was adapted from MoHFW's Quality Standards for 'Urban Primary Health Centre'³. SNEHA's frontline workers observe the clinic once a month and report on the status of the ANC clinic to the Medical Officer and the Assistant Medical Officer. The objective of the observation tool is to quantify the status of the health post in terms of services, human resources, infrastructure and supplies availability. This would enable us to identify current gaps in the provision of services and potential areas for partnering with the health posts to improve service provision.

Rules of Scoring:

2 Marks	For each compliance/Availability
1 Mark	For each partial – compliance/ Irregularity
0 Mark	For every Non-Compliance/ Non available

	2	1	0	Total	Remarks
Staffing for clinic					
MO + 2 ANMs					
Services					
Weekly ANC clinic					
Availability of 9 core services					
Awareness generation activities					
Referrals					
Infrastructure					
Availability of equipment					
Lab facilities					
Medications					
Family planning					

³ Ministry of Health and Family Welfare, Government of India. January 2016. Quality Standards for "Urban Primary Health Centre", National Quality Assurance Programme (NQAP).

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A healthy world begins with a healthy woman

services					
Running water and washroom facilities					
IEC					

On an average, more than 60% of the health posts have started providing weekly antenatal clinics with 9 core services across 7 municipal corporations in Maharashtra.

The 9 core services which are tracked are:

Weight measurement, B.P., TT injection, Iron Folic Acid (IFA) tablets, Abdominal Checkup, R-15 register, Referral for danger sign, Referral for investigation and MCH card.

The health post staff is informed that SNEHA representatives would be visiting the clinic monthly and observing and reporting on the status of the ANC clinics. It is explained that these visits are not a medium for fault finding and reporting on any shortcomings of the health post, but a means of working together to identify and address challenges as well as highlighting and appreciating the work of health post staff in ensuring provision of regular ANC services to the community. Additionally, the staff is assured that any data collected is only for feedback to the health post and the municipal corporation. In order to avoid any discomfort of the health post staff while being observed by an external person (SNEHA frontline worker - FLW), she does not note down her observations during the clinic. FLW additionally conducts health exhibitions and health talks for the beneficiaries attending the clinic, providing them information on aspects related to maternal and newborn health. Feedback meetings between pregnant beneficiaries and health post staff are held every quarter to create a platform for healthy communication between communities and health providers.

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Challenges and Solutions:

- Holding regular weekly clinics becomes challenging for the health post staff especially during pulse polio week or national campaigns such as ‘Mission Indradhanush, MR Campaign’, meetings or trainings of health post staff.
- *Almost none or few beneficiaries attend ANC clinics: The team continuously encourages ASHA workers to bring in a specified number of pregnant women from their assigned areas to each clinic so that the access is improved.*
- *Absent/Non-functioning equipment: Continuous advocacy is carried out at the health post and municipal corporation level to make necessary the equipment such as the weighing machine, height scale, BP apparatus, stethoscope and examination table available. The feedback is also shared in the monthly and quarterly review meetings held at the health post.*

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