

Sunita Srivastav (28) had been trying to conceive for the last five years of her marriage and finally she was a few hours away from holding her baby. Throughout her pregnancy, she had a smooth journey, until the time of her delivery when the situation turned grim.

Chandini, a nurse assigned to take care of Sunita, had been guiding her in the last few months before her delivery. This was a case of 'precious pregnancy' and therefore, the nurse and other staff were overtly alert towards her condition to ensure a safe delivery.

On 24th April, Sunita was wheeled in at 10 in the morning. She was nervously excited about the prospect of being a new mother and was looking forward to cradling her baby. When Sunita started getting contractions in the evening, Chandini, who had recently completed her Manyata trainings, assessed and checked her vital stats for any signs of concern. Through the programs' learning module, Chandini had learnt how to use partograph efficiently. Under the guidance of the attending doctor, she began plotting the partograph for delivery.

After plotting the partograph, she realized that both Sunita and her baby were showing signs of distress. She immediately informed the doctor about Sunita's condition. The doctor, trusting her staff's capabilities, quickly sprang into action, went through the report and reached out to Sunita's family. As part of maternal quality care protocol, the doctor informed them about her condition. Depending on the severity of the situation, the doctor may have to conduct a caesarian section.

The nurses knew it was imperative to remain calm and continue assisting the doctor as the delivery was time-sensitive. They ensured that the labour room was ready with all essentials in place.

Upon the family's consent, Sunita was taken to the labour room. Chandini along with her team of nurses worked round the clock with the doctor to overcome the complication of obstructed labour and were able to avert a c-sec delivery. With their help, Sunita had a normal delivery.

Immediately after the delivery, Sunita's baby did not respond to the new environment. The nurses took charge and began resuscitating the baby. After successfully resuscitating the baby, they took it to newborn intensive care unit. They had learnt performing new-born care as a part of their trainings under Manyata.

Chandini along with the team at Javitri Devi hospital ensured that Sunita had a safe delivery and was able to meet her beautiful baby. Post her delivery, the nurses guided Sunita to take on her new role as a mother, teaching her essentials of breastfeeding and others areas on how she can take care her new born. The care and support which Sunita received from the nurses was so good, that she began calling her nurses her new best friends.



Sunita Srivastav at Javitri Devi Hospital

ABOUT MANYATA

Manyata is a unique program that seeks to improve the quality of maternity care by strengthening skills and competencies related to key life-saving practices among providers working in private maternity care facilities. It aims to improve the quality of care for mothers and newborn. The trainings under the program are focused on building capacity of medical teams in private maternity facilities enabling them to make informed decision.

The program focuses to ensure adherence to **16 clinical and 10 facility standards developed by FOGSI on the lines of WHO standards of care**. The quality standards focus on antenatal, intra-partum and immediate postpartum care to mothers.

The program works on a dual approach addressing both quality improvement and quality assurance. Under quality improvement, the paramedical staff is sensitized on clinical standards. They are trained by experts on checklists, System Development Procedures and situation-based scenario. Once the training is completed, the private healthcare provider (facility) is assessed by trained and qualified assessors from FOGSI. On successful assessment, the facility is awarded the 'Manyata Certification'. By attaining this, the enrolled hospital is recognized for its excellence in maternity care.



MATERNAL MORTALITY CONTINUES TO BE A GLOBAL BURDEN

with at least 585,000 women dying each year by complications of pregnancy and child birth. More than 75% of maternal deaths, world over, are due to four major complications: hemorrhage, infection, hypertensive disorders of pregnancy, and obstructed labor (Anon., n.d.). Obstructed labor, a major cause of maternal mortality, accounts for 1–5 deaths/1000 live births which might cause complications like prolonged labor. There are interventions that prevent and treat these complications. However, identifying these complications on time can be challenge.

In order to enable health care providers to identify prolonged labor, the World Health Organization recommends the use of a graphical presentation chart called a partograph. The partograph assists nurses and midwives to monitor labors, study symptoms of obstructed labor, signs of fetal distress, thereby, helping them to effectively identify and address complicated deliveries.

In low-resource settings, particularly in developing countries, the partograph has been identified as an imperative tool to help in improving maternal and fetal healthcare outcomes (Obstetric care in low-resource settings: What, n.d.). Manyata, a program centered on improving the quality of care for mothers and newborns, ensures that doctors and their teams in private setups are capable of making informed decision by using the partograph.

Manyata standards include ‘monitoring the progress of labor’ as an important component in its trainings. Nurses and medical staff are taught how to read and interpret a partograph and take necessary actions in the best interest of the woman in labor. This helps them in making quick and informed decisions which is crucial to save the lives of both, the mother and her baby.

KEY TAKEAWAYS

1

Respectful and supportive care to the mother, new born resuscitation and providing postpartum care to the mother and child are crucial components of quality care standards and play a significant role in saving the lives of mothers and newborns. Manyata modules ensures that the nursing staff is trained on these aspects thoroughly, enabling them to contribute in a more efficient manner.

2

Trust building between the doctor and nurses contribute in making teams work more efficient and swift, making sure that crucial time is not lost during complications. Manyata trainings reiterate on the importance of trust building between the doctor and nurses ensuring that a mother receives the quality care she deserves.

3

In low resource settings, partograph plotting is an essential skill for nurses. It plays a critical role in saving lives of mothers and newborns. Through Manyata trainings, nurses are able to effectively plot the partograph, identify fetal distress and preparedness to manage the situation, saving both the baby and the mother.