

pahal

QUARTERLY NEWSLETTER BY UP-TSU

A NOTE BY EXECUTIVE DIRECTOR

Dear friends,

With great pleasure, I present the ninth issue of PAHAL before you to showcase UP-TSU's commitment to support GoUP deliver RMNCH+A services across UP, while also supporting COVID-19 management and CoVID vaccination rollout in the state.

This issue focuses on the support provided by UPTSU in rolling out integrated counselling for RMNCHA & AFHC counsellors, activation of Blood Storage Units, accreditation of new medical colleges for LSAS, EmOC courses, Social mapping of ASHA and Anganwadi workers' area-alignment for enhanced community service delivery, ICDS call centre, facility mapping exercise to finalize the facility master's for effective integration and use of information for better health-programming.

While many of you have taken CoVID vaccination, the threat of COVID has not completely gone away. We must continue our vigil against COVID-19 by remaining faithful to the safety protocols.

I hope you have an engaging read!

Sincerely,

(Dr. Vasanthakumar N.)
Executive Director



About UP-TSU

Uttar Pradesh Technical Support Unit (UP-TSU) was established in 2013 under a Memorandum of Cooperation signed between Government of Uttar Pradesh (GoUP) and Bill & Melinda Gates Foundation (BMGF) to strengthen the Reproductive, Maternal, Newborn, Child, and Adolescence health (RMNCH+A) and nutrition. University of Manitoba's India-based partner, the India Health Action Trust (IHAT) is the lead implementing organization.

UP-TSU provides technical and managerial support to GoUP at various levels of the health system and that includes maternal, new born, child health, nutrition and family planning. UP-TSU also supports the GoUP at the state level in policy formulation, planning, budgeting, human resource management, monitoring, contracting, procurement, and logistics to improve healthcare throughout the state.

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- IEC/BCC

Your suggestions, innovative ideas and feedback are invaluable to the success of our program.

Write to us at iec.uptsu@ihat.in



One-day ToT on integrated counselling with partners in UP-TSU office



Session on mental health taken by Dr Ved Prakash from NHM while training AFHC and RMNCH+A counsellors



Dr. A.K. Singh
ACMO, Kanpur Nagar

ANM and CHO training on FP counselling has been a good opportunity provided by UP-TSU to train service providers on FP counselling. The E-module training package is an interesting self-learning tool that will help the trainees to revisit entire sessions. This training has cleared common doubts on spacing methods, safe/unsafe days and Lactational Amenorrhea Method (LAM) which will help our trainees to disseminate information regarding FP in the field.

Integrated counselling – foundation for a healthy start to life

Young people are our human capital for the future. The inclusion of adolescent health within the continuum of care approach will allow early detection of pre-existing health issues enabling timely interventions and improved surveillance. This is critical for women to begin pregnancy with minimum risk of adverse outcomes. FP division of NHM, GoUP was supported by UP-TSU in developing an integrated counselling module with the objective of equipping counsellors of different cadres to understand the full spectrum of needs across all the life stages. This would enable them to focus on health promotion and prevention in order to ensure wellbeing of clients in a holistic manner. The draft module was shared with Rashtriya Kishor Swasthya Karyakram (RKSK) – NHM and partners' viz. SIFPSA, UNICEF and JHPIEGO followed by a one-day ToT with partners.

The training on integrated counselling for RMNCH+A and AFHC counsellors using digital platform has been rolled out by GoUP with the support of UP-TSU. The two-day capacity building sessions facilitated by the FP and RKSK division of NHM will train 333 AFHC counsellors and 246 RMNCH+A counsellor in 12 batches across 75 districts from 18th February till 25th March '21.



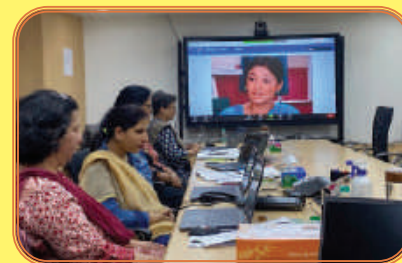
GM- FP Dr. Alpana Sharma addressing the counsellors



Counsellors from Hathras district attending session on Integrated counselling



UP-TSU team facilitating session on Integrated counselling



UP-TSU team facilitating session on antenatal care and counselling

Khushhaal Parivar Diwas

Khushhaal Parivar Diwas, observed on the 21st of every month by GoUP with the support of UP-TSU focuses on newly married couples, women of parity 3+ and women with high risk pregnancy. Shagun kits are distributed to newlywed couples on Khushhaal Parivar Diwas. A total of 4,298 clients were counselled by RMNCH+A counsellors on Khushhaal Parivar Diwas in January 2021, of which 553 couples were newly married, 1,493 couples were 1 parity, 1,747 couples with 2 or more parity and 505 were identified as women with HRP.



Shagun kit was distributed to newlywed couple by Hon' Chief Minister Yogi Adityanath on Kushhaal Parivar Diwas



Figure 1-ILR Installed at CHC Jalesar-District Etah



Figure 2-Blood Transfusion started at CHC Jalesar, District Etah

Activation of Blood Storage units- Saving lives, one drop at a time

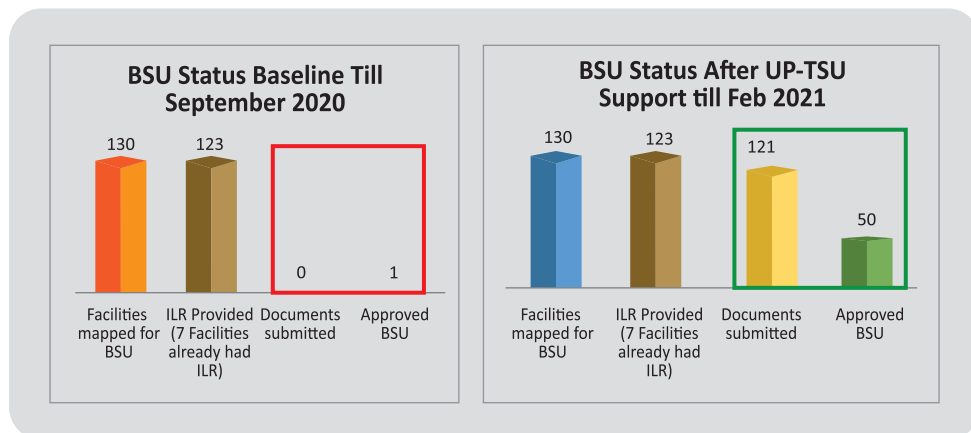
A well organised Blood Transfusion Service (BTS), is a vital component of the health care delivery system and expected to ensure accessible and adequate supply of safe blood. So far, the services have been made available only through established blood banks extending up to district level.

In order to extend services for providing safe blood at sub- district levels, NHM was supported by UP-TSU in the process of certification of Blood Storage Units (BSU). An action plan was developed and shared to facilitate the process of certification from appropriate authorities and ILR installation. A field assessment was conducted and a report was submitted to the state blood cell in 2019. Following which the State blood cell procured and supplied 123 ILR and centrifuge to BSU in addition to the planned procurement of additional 60 ILR in 2019. These units would procure required units of safe blood from specified Mother Blood Banks, already established at the district level.

BSU Approval Base Line till September 2020

Facilities mapped for BSU	ILR Provided (7 Facilities already had ILR)	Documents submitted	License Approved for Blood Storage Unit
130	123	0	1

Additional LT/LA staff position has been sanctioned by the state with the follow up training of doctors and technicians. UP- TSU has provided support in the application process of 130 facilities and 121 documents have been submitted to FDA, UP for approval of which 50 licenses have been approved till date.



The aim is to ensure that all identified BSU receive their licence while the quarterly facility wise report will help in understanding the functioning and ensure availability of adequate quantity of safe blood to a large population especially to women during childbirth.

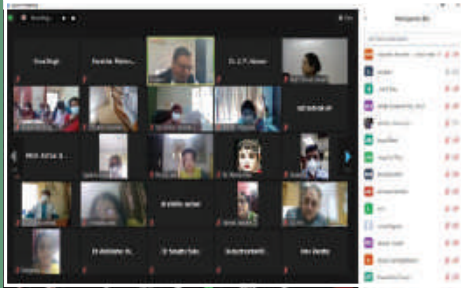
Strengthening CEmOC and LSAS training for operationalizing FRUs

In a bid to strengthen the MNCH service delivery at FRUs, GoI in the year 2003 sanctioned CEmONC and LSAS Training in Medical Colleges for MBBS Doctors working in public health facilities. The objective of these trainings is to develop and enhance the skills of the doctors in managing maternal complications and handling C- section deliveries at FRUs to overcome obstetric emergencies.

Uttar Pradesh has accredited a total of six medical colleges as centres for CEmONC & LSAS training each for providing training for the extended curriculum of 24 weeks as per the GoI guidelines released in February 2020.

The accreditation process was followed by 3 days Induction workshop training for 48 faculty Master Trainers on new 24 weeks curriculum in CEmONC services from newly accredited four Medical Colleges in the month of October 2020.





Efforts to fruition - First C-section performed at a CHC FRU since 2013

Rinku, a 23 year old Primigravida with 38 weeks pregnancy was admitted at CHC Manikpur, Chitrakoot in the morning of 15th Feb 2021 with labor pain. She was diagnosed to be in latent labor at the time of admission. When the government nurse mentor reported for her shift in the afternoon, she discovered that there was no progress in cervical dilatation. She immediately informed the visiting obstetrician who examined the client post which relevant investigations were done. The family was informed and consent for LSCS for non-progress of labor was taken. The team of on-call anesthetist & obstetrician from the DWH performed the LSCS at 4 pm and a live female baby weighing 2,800 g was delivered.



"With these trainings, I now feel confident enough to start treatment even if the doctor isn't available due to an emergency."

**Manju, Staff Nurse
DWH, Varanasi**

District TOT of master trainers from 4 district hospitals in CEmONC services with the training of 29 master trainers was completed in December 2020.

LSAS orientation and ToT was held in the month of February 2021 with a total of 49 faculty members nominated for LSAS training from the Anaesthesia Department of 4 Medical Colleges- KGMU Lucknow, GSVM Kanpur, SNMC Agra & JNMC-Aligarh and 13 Anaesthetist from 4 District hospitals are nominated for LSAS training.

The nomination of trainees is in process; the pairs of MBBS trainee Medical Officers (One CEmONC and One LSAS) have been identified and training will start from March 2021 in all six accredited Medical Colleges. These trainings will create a pool of 48 pairs of trained MBBS doctors who can potentially perform CEmONC and activate 48 FRUs every year.

RRTC Program in Virtual Mode during COVID ERA:

1. 58 online CME sessions completed with the participation of 168 doctors
2. 122 online mentoring sessions completed with the participation of 247 doctors
3. 297 online post mentoring sessions completed (ongoing)

Strengthening referral care through EMT training

As per the implementation experiences, it has been observed that pregnant women access the facility service late in full dilatation and consequently end up delivering the baby in the ambulance during transportation, while some of their babies are unable to breathe properly. Unfortunately, many of these babies with birth asphyxia do not receive continuous oxygen supply and resuscitation while being transported to the facility. Thus it is critical to develop the skills of emergency medical technicians (EMTs) in emergency resuscitation techniques of government ambulances to save lives.



The technical team at Farrukhabad zone decided to train all EMTs on key newborn resuscitation and MNH skills with the support of CMS, DCH Farrukhabad who planned the training of 423 EMTs in 7 batches. The training not only covered newborn resuscitation but also other key MNH skills like AMTSL, ENBC, KMC and breast feeding.

The EMTs enthusiastically practiced on mannequins and asked several questions to clear their doubts. The training focused on equipping them with necessary skills to focus on emergency care during transportation. It is with the hope that having trained EMTs in ambulances during transportation can improve the chances of survival of several mothers and newborn.

Mentoring Innovation- Capacity building by in-house specialists

Specialist doctors at DWH, Varanasi observed that their staff nurses lacked confidence and their overdependence on doctors for management of birth complications. They had little experience in managing maternal complications and birth asphyxiated babies on their own. Time is of essence in saving these babies as they need to be treated within the 'golden minute'. It is critical that service providers receive continued training and handholding to keep abreast with newer and effective lifesaving interventions. In order to equip the Staff Nurses with the necessary skills and confidence to manage these complications, specialists- Gynaecologists and Paediatricians at DWH, Varanasi decided to train them in the management of critical maternal and new-born complications on monthly basis. This would ensure that the Staff Nurses begins new-born resuscitation in the labour room itself and doesn't waste critical time in shifting the baby to the SNCU. These sessions were facilitated using mannequins available at the mini skill lab at the district and has covered new born resuscitation and PPH management. Overall 5 Staff Nurses of Labour Room were trained.



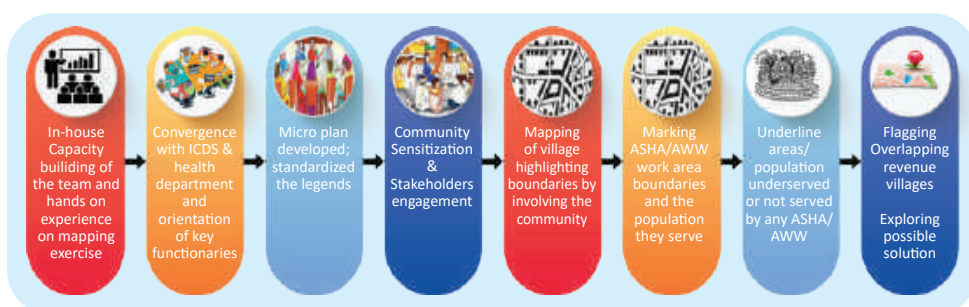
Workshop on ASHA AWW area alignment

ASHA AWW Area Alignment for better accountability and service delivery

ASHA and AWW are responsible for delivering RMNCH+A and Nutrition services at the village level. One of the most complex challenges faced by them is unclear area alignment due to merged villages and lack of clear village boundary depiction. In order to understand the current scenario of ASHA AWW area alignment, Bahua block, Fatehpur district was selected for 'Learning and Piloting ASHA AWW area mapping'. Social mapping, a PRA (Participatory Rural Appraisal) method was used in ASHA AWW area alignment which was carried out in 101 revenue villages.

A 3 days' orientation workshop was organized for ASHA Sanginis, DCPM and BCPM and TSU field team in consultation with UP- NHM and the district administration with the involvement of ICDS and Panchayati Raj Institution departments.

The process followed for mapping is illustrated below –



Local Community support in drafting the map

The key findings are illustrated in figure:1.

Based on the mapping results, suggestions were presented to the District administration for corrective action. The discussions with the district administration indicated that the alignment of ASHA and AWW will now be done at the block level by engaging FLWs. Furthermore, additional ASHA positions will be proposed in the upcoming DHS meeting for required approvals from administration.



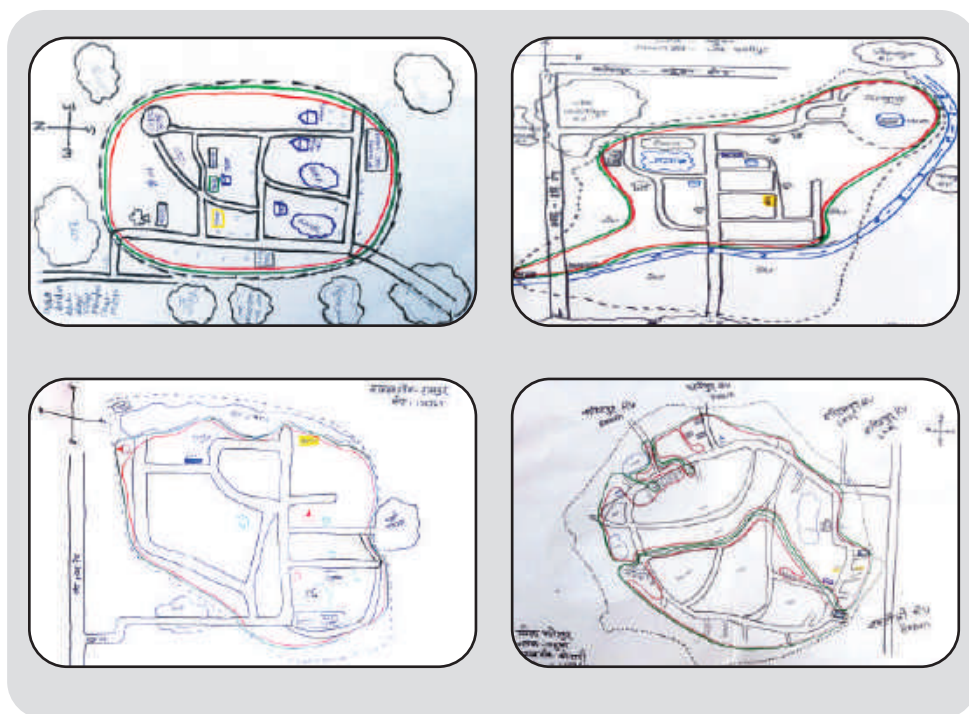
Figure 1: Status and Proposed Action Plan



Sangini presentation on gaps in ASHA AWW area mapping



Finalization of map with the support from local community



Capacity Building Initiatives

The Tehsil Nutrition Coordinators (TNCs) of UP-TSU conducted a two-day training of 58 selected ICDS functionaries (11 Mukhya Sevika and 47 Anganwadi Workers) of Shukul Bazar, Jamo, and Amethi block on breastfeeding & complementary feeding in the month of February. This training was imparted as a part of the technical support provided by UP-TSU to Boston Consulting Group (BCG) implementing a pilot on breastfeeding in three blocks of Amethi district.

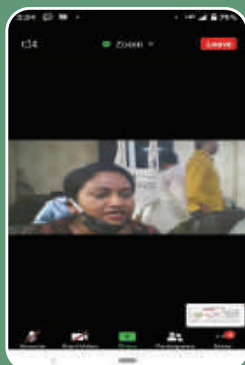


Mr. Anish Singh, Tehsil Nutrition Coordinator, Varanasi, UP-TSU demonstrating correct positioning and attachment of breastfeeding by using a doll.

UP-TSU and UNICEF jointly conducted virtual training of nearly 800 ICDS functionaries from 31 districts of Uttar Pradesh on the usage of growth monitoring devices viz. Infant weighing scale and Stadiometer on 1st March 21 at the State Nutrition Mission, Lucknow.



Ms. Tapaswini Swain, State Nutrition Specialist-Technical, UPTSU, demonstrating the process of measuring height on a Stadiometer.



ICDS Call Centre- program strengthening through citizen engagement

The ICDS Department of Uttar Pradesh established a Call Centre in August 2020 to strengthen citizen engagement and grievance redressal system for ICDS services with a focus on Take-Home ration (THR) in the state. This two-way engagement between beneficiaries, anganwadi workers and the program is expected to improve outreach and delivery by facilitating accountability on the supply and distribution side while enhancing knowledge of services amongst the beneficiaries on the other.

The call centre was operationalized on 9th October 2020 with the engagement of 40 personnel for handling both inbound and outbound calls. UP-TSU supported ICDS Department in the development of concept and design of the Call Centre, process of procurement, development of standard operating procedures (SOP), and operationalizing the Call Centre. Currently, UP-TSU is providing ongoing monitoring support and coordinating with Common Service Centre (CSC) for the day-to-day functioning of the Call Centre.



A glimpse of the ICDS call centre, Lucknow, Uttar Pradesh

A 'call-in' function wherein beneficiaries can call the toll-free number '1800-180-5500' and register complaints regarding service availability and quality.



A 'call-out' function where beneficiaries and AWWs identified through existing protocols are called '0522-6180600' to validate the service delivery and ascertain the quality of services.

In outbound calls, AWWs are generally asked about the receipt of dry ration THR, the quantity of THR received against the number of registered beneficiaries and whether information related to COVID19 and nutritional practices was provided to the target beneficiaries. (Source: Interview with AWW Neeta Singh, Umrah, Varanasi).

GROUND IMPACT

"I got a call from the Call Centre on 3rd March and was asked whether I have received THR for the month. They also asked what all I received as THR and whether the Anganwadi Worker advised me on COVID19 prevention and diet of my child?"

The last time I received THR (1 kg rice, 2 kg wheat, 750 g dal, 400 g milk powder, and 450 g ghee) was on 3rd of February. Generally, people like us cannot afford to feed the child regularly with milk and ghee, but ever since I started receiving dry ration THR, I can feed my child milk by dissolving the milk powder and adding a little ghee to his dal-chawal every day. It is a good thing that the government is distributing dry ration as THR because it's more useful and verifying it too."

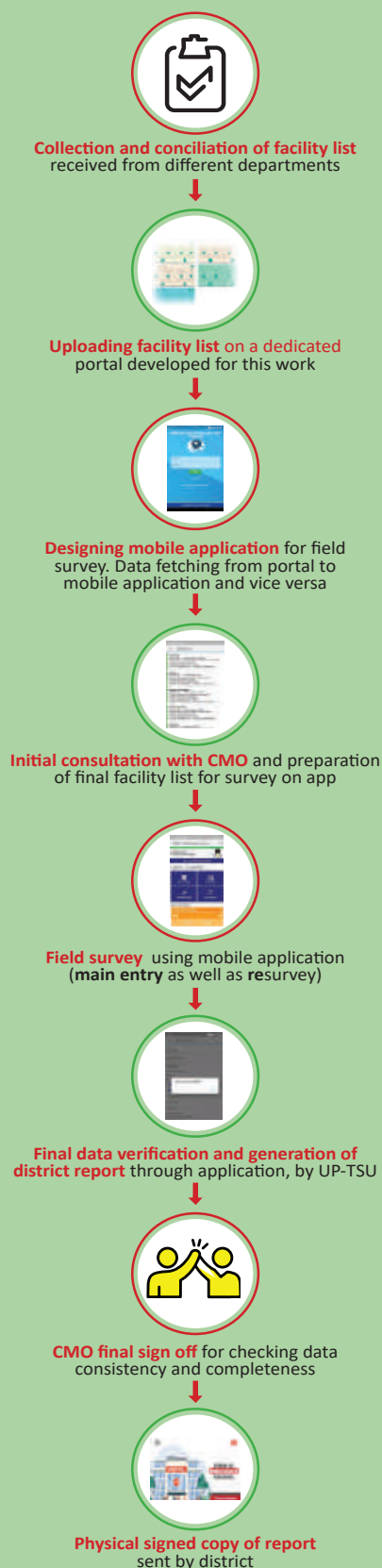


Pinkhi Devi, Khanpur AWC, Chiraigaon, Varanasi

- 8385 Inbound Calls received on the toll free number
- 2,87,797 Outbound Calls made and 1,17,340 calls received by the Anganwadi Workers
- 1,15,814 Outbound Calls made and 39,073 calls received by the beneficiaries

(Source: UP DIA Portal Call Centre Data, 2nd Nov 20 to 7th March 21)

Process adopted during the facility mapping exercise



Standardizing public health facility database through robust facility mapping

Despite having a vast health sector data system in Uttar Pradesh, the State continues to face challenges with various health sector management issues and non-standardized facility numbers, nomenclature etc. are a few examples of health management issues. At present, different government data sources depict different number of public health facilities in the State which makes it difficult for the decision-makers to manage the facilities efficiently. The lack of unified facility id, nomenclature, geocoding, etc. hinder the program planning, resource allocation, measurement, data integration, and most importantly de-power citizens to have an easy and nearest access to care. To overcome these barriers, Directorate General and Medical Health Services (DGMH), National Health Mission and UP-TSU jointly conducted a facility mapping exercise across the 75 districts in the state during October 2020-February 2021.

This mapping was based on the learnings of a pilot phase conducted in Azamgarh and Hardoi districts between June-July 2020. The UP-TSU also supported government in designing the mapping processes, developing the data collection tools, a GIS based application for the real-time data collection, and data analysis.

The facility mapping exercise was recognised as valuable exercise by Government of Uttar Pradesh and considered as a single point of facility reference for any programme planning, budgeting and decision-making. This list will be used across all the departments for reference. Going forward, interlink the data including HR, Supply Chain, and service uptake (HMIS) using a uniform code would allow an effective integration and use of information for better programming.



PUBLICATIONS



Namasivayam V, Dehury B, Prakash R, Becker M, Avery L, Sankaran D et al (2021) published a paper entitled, "Association of prenatal counselling and immediate postnatal support with early initiation of breastfeeding in Uttar Pradesh, India" in the "International Breastfeeding journal" (<https://doi.org/10.1186/s13006-021-00372-6>). The paper focused on assessing the association of community-based prenatal counselling and postnatal support at place of delivery with early initiation of breastfeeding in Uttar Pradesh, India. The findings revealed that 48.1% of new-borns in Uttar Pradesh, India were breastfed in the first hour of life and emphasised that an effective prenatal counselling and immediate postnatal support can improve the early initiation of breastfeeding which is an important intervention to reduce neonatal mortality.



Prakash R, Dehury B, Yadav C, Tripathi AB, Sodhi C, Bilal H et al (2021) developed a paper entitled, "Establishing evidence based decision making mechanism in a health eco-system and its linkages with health service coverage in 25 high priority districts of Uttar Pradesh, India" accepted for publication in the "BMC Health Services Research journal". The paper reveals how a data based review mechanism helps in identifying programmatic gaps, service delivery and lead to strategic problem solving. The paper recommended that strengthening a systematic evidence based review platform would be an important strategy to improve health outcomes and promote the use of routine health monitoring system data in any setting.



Shagun Kit- a gift of choice!

As part of the promotion strategy of Mission Parivar Vikas, distribution of nayi pahal kit was initiated to increase access in tandem with creating an enabling environment for acceptance and use of modern contraceptive methods. However baseline findings of the Nayi Pahal kit (NPK) pilot across two districts of UP showed the need for rebranding of the kit.



The findings from this study led to the development of Shagun kit in an attempt to promote the adoption of modern contraceptive methods among newly married couples. UP-TSU played a key role in the customization and branding of the Nayi pahal training kit for the state. Given its target audience, the kit was christened as 'Shagun kit' in order to make it an essential and culturally acceptable part of gifts given to the couple. A customized jute vanity bag was designed for this purpose to ensure reusability and recall due to exposure. UP-TSU designed Shagun logo and also developed information booklet. A short film was also made in order to orient the officials and FLWs regarding the importance and composition of the kit. NHM, UP issued letter and film on SHAGUN Kit to all 75 districts of the State.



UP-TSU support to Mission Health

Mission Health program is a joint initiative of National Health Mission- UP and Doordarshan. Subject experts from Uttar Pradesh Technical Support Unit were invited to talk and respond to queries from the public regarding various RMNCH+A and critical health behaviours.

The key objective of this program is to address the myths and misconception related to RMNCH+A by providing correct and complete information in an interactive mode by inviting subject experts.

Preeti Anand, Project Director Family Planning spoke about family planning as a crucial intervention to address maternal and infant morbidity and mortality. She stressed on how ASHA plays an important role in ensuring FP services reach all eligible couples while Dr. Seema Tandon, Deputy Director FRU/RRTC Strengthening UP-TSU spoke about the implementation of Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) and addressed the various queries related to maternal health.



EDITORIAL TEAM

Dr. Vasanthakumar N., Executive Director
Sandeep Srivastava, Director - Operations
Dr. Shalini Raman, Team Leader - IEC/BCC

COMMUNICATION TEAM

Ms. Wahida Rohman -M&E
Ms. Deepshikha Khurana - Community Process
Ms. Neha Parveen - FP
Ms. Tapaswini Swain - Nutrition



Preeti Anand
Project Director, Family Planning



Dr. Seema Tandon
Deputy Director, FRU/RRTC



Uttar Pradesh Technical Support Unit
India Health Action Trust

404, 4th Floor, Ratan Square, 20-A, Vidhan Sabha Marg, Lucknow-226001 Uttar Pradesh
+91 522 4922350, 4931777 / www.ihat.in