

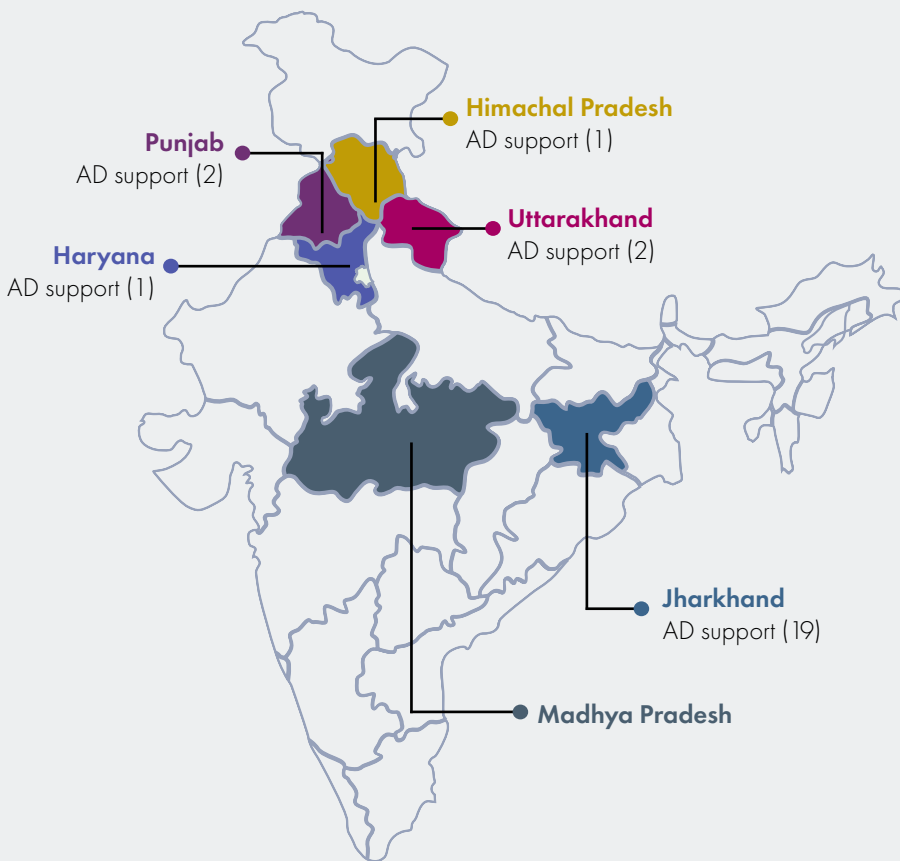
NEWSLETTER

2022 | JULY-SEPTEMBER | ISSUE NO 2 | VOLUME 1

SAMVEG

Systems Approach for MNCH focusing on Vulnerable Geographies

Aims to improve Maternal, Newborn and Child health outcomes in key priority areas of high need by demonstrating innovative models across the continuum of care



3 States (Technical Support)

25 Aspirational Districts (AD)

Aspirational District Support

Engaging Private Sector

Innovative Implementation Models

Miscellaneous Project Activities

Expected to impact a population of 143 mn with a focus on 3.6 mn pregnant women, 3.3 mn newborns, and 13.4 mn children.

SAMVEG PROJECT CONSORTIUM



ASPIRATIONAL DISTRICT SUPPORT

25 Aspirational Districts (ADs) in five states are supported by USAID under SAMVEG project with special focus on two poor performing ADs-Sahibganj in Jharkhand and Nuh in Haryana under Government of India’s Mission Utkarsh.

Jharkhand (19)	Uttarakhand (02)	Punjab (02)	Haryana (01)	Himachal Pradesh (01)
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Support to poor performing districts using KPI for quarterly actions

Collaborative Partners Review Meeting for Sahibganj Aspirational District on 16th September:

To improve the 9 Key Performance health indicators of Aspirational District Sahibganj, SAMVEG Project conducted a consultative Partner’s meeting in Ranchi. This meeting was chaired by Addl. Commissioner, Child Health, MoHFW Dr. Sumita Ghosh and attended by Mission Director, NHM Jharkhand Shri. Bhuvnesh Pratap Singh along with USAID & other Development Partners.

Detailed discussions followed by a group work to identify poor performing indicators under MNCH, TB, and Health System Strengthening was undertaken, and identify actions and support areas for each development partner.

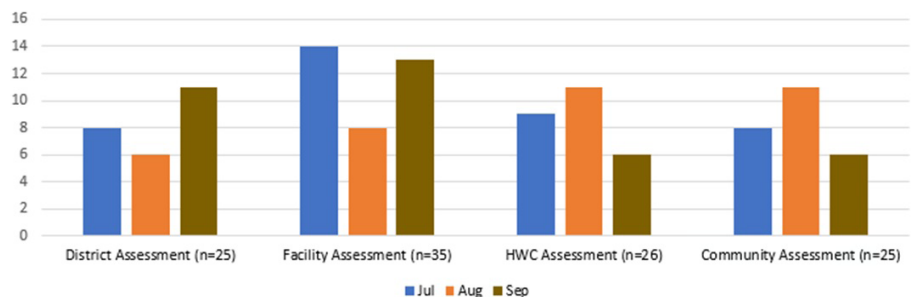


Figure 1: Partner’s meeting at Ranchi

Supportive Supervision Visits in ADs

Supportive Supervision visits (111 visits in this quarter) were undertaken across facilities and community using Gol’s checklists to guide Actions for Gap filling.

Number of Supportive Supervision Visits Conducted **TOTAL VISITS - 111**





ENGAGING PRIVATE SECTOR

Project SAMVEG continues working towards leveraging partnerships for maximum impact and harnessing the strengths of the private sector to achieve greater impact that cannot be achieved alone. SAMVEG is working towards increasing the value propositions and incentives/motivations in engaging with the private sector.

Launch of "SPECIAL" implementation model to Improve Prematurity Care in private facilities in Jharkhand

Aligning to GoI priority to improve Quality of Prematurity Care, SAMVEG successfully launched the SPECIAL initiative for: Strengthening Private Sector Engagement for Counselling – Integrating Antenatal Corticosteroids and Low Birth Weight Care' in partnership with professional associations FOGSI and IAP on September 27, 2022.

The launch event was graced by the leadership team from Ministry of Health & Family Welfare, Government of Jharkhand, USAID India, FOGSI, IAP, NNF and a host of private sector partners.



Figure 2: Launch of SPECIAL event

In partnership with academic institution IIMR, Delhi conducted situational assessments to guide the project models on Revisiting Home visits by ASHAs and Strengthening AMTSL

A situational assessment was conducted for both models in the quarter Baseline reports based on the assessments were developed and shared with USAID. The project team is using the learnings acquired in finalizing and further improving the implementation models and developing tools for implementation



INNOVATIVE IMPLEMENTATION MODELS

SAMVEG demonstrates innovative and responsive models aimed to overcome bottlenecks that impede service delivery or evidence based MNCH interventions.

Strengthening Postpartum Hemorrhage (PPH) complication management readiness

Implementation Model implemented to derive learnings about facilitators and barriers for use of Uterine Balloon Tamponade (UBT). Project has introduced a locally manufactured (Pregna Inc.) pre-assembled device in identified delivery points.

IMPLEMENTATION PROGRESS

- **6310 pregnant women** benefited
- **65 PPH** cases managed
- UBT used in both FRU and non-FRU level facilities
- Regular review and Hands on support for using UBT provided to facilities
- Monitoring and data collection ongoing



Figure 3: Online review of UBT Model

GEOGRAPHY

Different levels of Delivery points (9) across Jharkhand and Uttarakhand

Strengthen Active Management of Third Stage of Labour (AMSTL) -PPH Prevention using new Uterotonic

Project implemented a model to derive learnings on enablers and barriers for appropriate use of Injection Carbetocin, for prevention of PPH, at Public Health Facilities. Project has made available Injection Carbetocin manufactured by Ferring Pharma.

IMPLEMENTATION PROGRESS

- Situational Analysis Assessment completed, and report finalized
- Development of participatory training material
- **88 healthcare** providers trained
- Inj. Carbetocin being made available and distributed through district logistics
- **3499 deliveries** reported across 15 implementation facilities
- **3212 deliveries** were administered Inj. Carbetocin for AMSTL



Figure 4: SAMVEG Team training the participants on use of newer Uterotonics

GEOGRAPHY

15 high load Delivery Points of Dewas District of Madhya Pradesh

Strengthening management of Respiratory Distress in neonates with focus on use of Continuous Positive Airway Pressure (CPAP) device

To reduce neonatal mortality due to asphyxia related conditions CPAP implementation model has been theorized. Project identified SAANS CPAP device a cost effective, easy to maintain, portable safe, device manufactured in India, which can be used with simple skill-based training to be introduced at SNCUS in DHs to strengthen management of RDS in premature infants.

IMPLEMENTATION PROGRESS

- Ongoing use of CPAP in all implementing sites
- **51 service providers** trained
- **299 cases** of Respiratory Distress Managed
- **277 newborns** admitted in the 7 intervention SNCUs in Uttarakhand & Jharkhand
- **66 newborns** treated with bCPAP
- Monitoring and data collection is ongoing



Figure 5: CPAP machine installed in SNCU US Nagar, Uttarakhand



Figure 6: Dr. Harish training the participants on CPAP

GEOGRAPHY

7 SNCUs of Jharkhand and Uttarakhand

Quality Upgrade for Improving Accountability & Community knowledge (QUICK) Model

The project has designed Quality Upgrade for Improving Accountability & Community Knowledge (QUICK) Model for taking important pillars of SUMAN policy framework to action. The model deploys a survey-based approach to help understand the health system operations as seen from the lens of beneficiary's feedback.

IMPLEMENTATION PROGRESS

- **3490** beneficiaries called
- **756** beneficiaries counselled



Figure 7: Project Director using Quick application

MISCELLANEOUS PROJECT ACTIVITIES

1

Presentation on project related ECD achievements made at Gol 'ECD Conclave and PAALAN 1000' campaign launch at Mumbai



Figure 8: Dr. Prasant Saboth explaining about importance 1000 days of continuum of care

2

Technical Assistance provided by project SAMVEG, and USAID-Supported SAMRIDH Healthcare Blended Finance Facility and InnAccel Technologies to strengthen healthcare infrastructure and critical care systems for newborns with respiratory distress syndrome (RDS). The ToT involved building capacity on management of RDS with focus on ventilatory support using CPAP. The model is being scaled up in SNCUs across the state of Assam. A Total 12 Staff Nurses and 6 pediatric specialists- all SNCU staff, were trained.



Figure 9: Dr. Harish providing training to the participants on CPAP at ASSAM

3

A Joint Visit by USAID & National Technical Team to Uttarakhand state and district level, to observe State 104 call center & interact with the calling team of the QUICK Model, was undertaken in the quarter. During the visit, team interacted with the State and district level health staff and officials. The visit was successful in achieving its objectives and helpful in providing important insights and guidance to the State for achieving continuous improvements.



Figure 10: Team interacted with DH Health in Dehradun, Uttarakhand

4

Joint mentoring to SNCUs by USAID/India & SAMVEG Project team

SAMVEG's team visited SNCUs of districts Lohardaga and Gumla along with USAID India for assessment & clinical mentoring. During visit, the team interacted with SNCU staff, both Pediatricians and Staff Nurses, and provided inputs and feedback for improving clinical care processes.



Figure 11: Data review by Project team and USAID in SNCU of DH Gumla, Ranchi, Jharkhand

CONTACT US

IPE Global Limited: SAMVEG

IPE Global House, B-84, Defence Colony, New Delhi - 110024 | Tel: +91 11 4075 5900