



Centre for Health Development - Eastern Visayas
Family Health Cluster
Basic Emergency Obstetric and Newborn Care (BEmONC)
Monitoring Tool on MNCHN Strategies

Period Covered: _____ Name of ILHZ/CHO: _____ SSV Quater No. _____ of the year _____

Consolidated by: _____ Date: _____ Checked by the PHO/CHO: _____

| | | (Name and Signature) | | | | | | |
|---|--|--|---------|---------|---------|---------|---------|-----|
| Write down the name of the facility → | | RHU/DHC | RHU/DHC | RHU/DHC | RHU/DHC | RHU/DHC | RHU/DHC | ALL |
| A. Service Coverage (From FHSIS) | | National Target | | | | | | |
| | | by 2015 (DOH) | | | | | | |
| 1 | Contraceptive Prevalence Rate | 65% | | | | | | |
| 2 | % of Pregnant woman with at least 4 prenatal visits (1st visit in the 1st | 85% | | | | | | |
| 3 | % of pregnant women given at least | 85% | | | | | | |
| 4 | % of pregnant women given iron/folate supplementatin | 95% | | | | | | |
| 5 | % postpartum women with visitwith at least 2 PP visits within the 1 week after | 85% | | | | | | |
| 6 | % of postpartum women given vitamin A | 85% | | | | | | |
| 7 | % of postpartum women who initiated breasstfeeding | 85% | | | | | | |
| 8 | % of infants given Hep B within 24 hours of birth | 85% | | | | | | |
| 9 | % of fully immunized children(0-11 | 95% | | | | | | |
| 10 | % of facility based deliveries | 80% | | | | | | |
| 11 | % of skilled birth attended deliveries | 85% | | | | | | |
| 12 | Number of delivery at the facility since Jan.this year | | | | | | | |
| B. Outcome/Impact | | | | | | | | |
| 1 | No. of maternal deaths since January | | | | | | | |
| 2 | Review carried out of above cases | | | | | | | |
| 3 | No. of neonatal deaths since January | | | | | | | |
| 4 | Review carried out of above cases | | | | | | | |
| 5 | No. of under five deaths | | | | | | | |
| 6 | Review carried out of above cases | | | | | | | |
| C. Resources and LGU support | | | | | | | | |
| 1 | Human resources is complete (BEmONC trained personnel, ambulance driver, utility worker) | V.g (3), g (2), p(1), v.p (0) | | | | | | |
| 1.1 | No. of BEmONC trained personnel | Actual numbers | | | | | | |
| 1.2 | How many of BEmONC trainees remain | | | | | | | |
| 1.3 | Training needs | | | | | | | |
| 1.4 | Total number of midwives | | | | | | | |
| 1.5 | No of Midwives trained for CEMNC | | | | | | | |
| 1.6 | Number of midwoves untrained | | | | | | | |
| 2 | Facility | V.good (3), Good (2). Poor (1). V. poor (0), specify problems if poor.v.poor | | | | | | |
| 3 | Readiness to receive cases/emergency | | | | | | | |
| 4 | LGU's commitment for drugs/supplies, forms and equipment maintenance | | | | | | | |
| 5 | 24 hours Delivery service provided and functionality of tracking system | | | | | | | |
| 6.1 | MDR being conducted (% of reviewed/deaths) | | % | | | | | |
| 6.2 | NDR being conducted (% of reviewed/deaths) | | | | | | | |
| 7.1 | Availability of Resolutions/Ordinances on FBD | Yes (1), No (0) | | | | | | |
| 7.2 | Availability of Resolutions/Ordinances on user's fees | | | | | | | |
| 7.3 | Availability of Resolutions/Ordinances on incentives for CHT | | | | | | | |
| 7.4 | Implementation of Resolutions/Ordinances on FBD | | | | | | | |
| 7.5 | Implementation of Resolutions/Ordinances on user's fees | | | | | | | |
| 7.6 | Implementation of Resolutions/Ordinances on incentives | | | | | | | |
| D. Financing | | | | | | | | |
| 8.1 | Philhealth accreditation for MCP/Newborn screening (MCP+) | MCP+(2), MCP(1), None | | | | | | |
| 8.2 | Facility receives reimbursement (forcomplete claims made in the last quarter) | Within 60 days (2), Some delay (1), None (0) | | | | | | |
| 9 | Any other initiatives specify such as user fees, since when | Specify | | | | | | |

| E. Service package (By record review and observation) | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| 1 | Antenatal care | | | | | | | | |
| 2 | Intrapartum care (Labor, Partograph) | V.good (3), Good (2). Poor (1). V. poor (0), specify problems if poor.v.poor | | | | | | | |
| 3 | immediate postpartum | | | | | | | | |
| 4 | Postpartum care | | | | | | | | |
| 5 | Newborn Care | | | | | | | | |
| 6 | Practices observed are correct and staff are competent | | | | | | | | |
| 7 | Signal BEmONC functions and other clinical skills are performed in the last quarter. (BEmONC Team) | How many, Specify the ones never performed | | | | | | | |
| 7.1 | Parenteral administration of Oxytocin | Yes(1), No(0) | | | | | | | |
| 7.2 | Parenteral administration of antibiotics | | | | | | | | |
| 7.3 | MgSO4 administration | | | | | | | | |
| 7.4 | Imminent breech delivery | | | | | | | | |
| 7.5 | Manual removal of retained products (incomplete abortion) | | | | | | | | |
| 7.6 | Manual removal of retained placenta | | | | | | | | |
| 7.7 | Dexamethasone for preterm labor | | | | | | | | |
| 7.8 | Newborn resuscitation | | | | | | | | |
| 7.9 | IV insertion | | | | | | | | |
| 7.10 | Suturing | | | | | | | | |
| 8 | Performance of skills for which Midwives are trained | As 7 above | | | | | | | |
| 8.1 | Correct IE procedures | | | | | | | | |
| 8.2 | Active management of the 3rd stage of labour | | | | | | | | |
| 8.3 | Essential newborn care | | | | | | | | |
| 8.4 | IV insertion | | | | | | | | |
| 8.5 | Suturing | | | | | | | | |
| 8.6 | Newborn resuscitation | | | | | | | | |
| 9 | Staff's knowledge level | V.g (3), g (2), p(1), v.p (0) | | | | | | | |
| F. Client interview | | | | | | | | | |
| 1 | Client satisfaction | V.g (3), g (2), p(1), v.p (0) | | | | | | | |
| 2 | Care during childbirth | | | | | | | | |
| 3 | MC Book or HBMR and birth Plan | | | | | | | | |
| G. Referral system | | | | | | | | | |
| 1 | Referred cases reaching the facility | No data or actual % | | | | | | | |
| 2 | Two-way referral system is functioning | | | | | | | | |
| 3 | Justified referral | | | | | | | | |
| H. CHT activities | | | | | | | | | |
| 1 | Quality of monthly report | V.g (3), g (2), p(1), v.p (0) | | | | | | | |
| 2 | % of tracked women with MCBook | % from the latest monthly report | | | | | | | |
| 3 | % of tracked women with Birth Plan | | | | | | | | |
| 4 | % of tracked women delivered at Health Facility | | | | | | | | |
| I. SSV and Action Plan | | | | | | | | | |
| 1 | Last quarter SSV done | Yes(1)/No(0) | | | | | | | |
| 2 | The problems identified has been solved (compare the problems identified in the last and this SSV) | All (2)/ Some (1)/ No(0) | | | | | | | |

Narrative summary

| | |
|--|----------------------------|
| 1. Strengths of the facilities in this Group | 2. Common areas to improve |
| 3. Any other particular problem identified per facility if any (besides common problems) | |
| RHU/DHC _____ | RHU/DHC _____ |
| RHU/DHC _____ | RHU/DHC _____ |
| RHU/DHC _____ | RHU/DHC _____ |
| 4. What are the factors contributing the problems identified in each facility | |
| 5. What PHO/CHO can do to address the problems or further strengthen the service delivery? | |
| 6. Request to CHD 8 to consider | |