



## Summary of Change Package to Accelerate Attainment of Millennium Development Goal 4 in Ghana – Part 1

Care Pathway		Successful Change Idea(s)	Facility Type*
<b>ANTENATAL</b>	<b>1. Registration in 1<sup>st</sup> Trimester</b>	1A. Community stakeholder meetings with opinion leaders and other influential groups about the importance of early and regular ANC 1B. Community stakeholder meetings <u>followed by</u> registration of pregnant women by community volunteers on monthly basis	C C
	<b>2. At least 4 visits before delivery</b>	2A. Increase number of days ANC is offered at static site <u>AND</u> re-design clinic processes to reduce visit duration per client to < 1hr 2B. Offer ANC as outreach service as well as at static site <u>AND</u> re-design clinic processes to reduce visit duration per client to < 1hr	C & H C
<b>PERINATAL</b>	<b>3. Skilled Delivery &amp; Immediate Postnatal Care</b>	3A. Video show in communities on the risks of labour & delivery	C
		3B. Male advocacy group in communities to promote skilled delivery	C
		3C. TBA engagement on risks of unskilled delivery and provide incentives	C
		3D. Use ANC register to identify women at 36+ weeks gestation for home visits to remind them & family members about skilled delivery & confirm transport plan	C
		3E. Provide domiciliary delivery if, upon notification by mobile phone, labour too advanced, woman has no means of transport from community or health staff cannot arrange transport from clinic or hospital	C
		3F. Create a welcoming, patient-friendly environment in health facility for labouring women	C & H C & H
		3G. Create systems to ensure consistent and correct use of partographs	C & H
		3H. Create systems for reliable neonatal resuscitation	
<b>POSTNATAL</b>	<b>4. Care on Day 1 or 2</b>	4A. <u>If facility skilled delivery</u> – detain for observation for ≥24hrs if possible. If not, discharge after minimum of 6hrs and follow-up on Day 2 with facility or home visit	C & H
		4B. <u>If domiciliary skilled delivery</u> – follow-up on Day 2 with facility or home visit.	C
		4C. <u>If unskilled delivery</u> – ask family members or volunteers to notify health staff immediately by mobile phone/bicycle/motorbike. Woman comes to facility on Day 1 if possible or health staff follow-up with home visit on Day 1 or 2	C
	<b>5. Care on Day 6 or 7</b>	5A. During Day 1/2 visit, make appointment for Day 6/7 visit at facility or home. Use reminder systems at community, clinic/hospital to improve reliability. 5B. If woman lives in <u>different sub-district or distant community within CHPS zone</u> , refer to other sub-district or CHO for Day 6/7 visit. Contact CHO to follow-up if no show. 5C. If woman lives in <u>distant community without CHO AND</u> return facility visit not possible <u>AND</u> health staff home visit not possible, train IMCI volunteers to provide Day 6/7 care.	C & H C & H C

\*C=Health centre, clinic or CHPS compound; H=hospital