## DCSTs role in strengthening MCWH in the "3 Streams of PHC"

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#### **Key Strategies for improving MCWH**

- Strategic Plan for Maternal, Newborn, Child and Women's Health (MNCWH) and Nutrition in South Africa 2012 – 2016
- CARMMA (Campaign on accelerated reduction of maternal and child mortality in Africa)
- Contraception and fertility planning (family planning)
- Re-engineering PHC with emphasis on 3 streams
  - District Clinical Specialist Teams (DCSTs)
  - Integrated School Health Programme
  - Municipal ward based PHC outreach teams

Strategic Plan for Maternal, Newborn, Child and Women's Health (MNCWH) and Nutrition in South Africa 2012 – 2016

The strategic plan has 5 components which are further unpacked in next slides

- Maternal Health
- Newborn Health
- Child Health
- Women's Health
- Community Interventions

#### **Maternal Health**

- Basic Antenatal Care (four visits for every pregnant women beginning during the first trimester)
- HIV testing early in pregnancy (14 weeks) and at 32 weeks with initiation of ART
- Improved access to care during labour through introduction of dedicated obstetric ambulances and establishment of maternity waiting homes (where appropriate)
- Improved intrapartum care (with specific focus on the correct use of the partogram, and standard protocols for managing complications)
- Training in essential steps in the management of obstetric emergencies
- Post-natal care within six days of delivery

## **Newborn Health**

- Promotion of exclusive breastfeeding
- Provision of PMTCT
- Resuscitation of newborns
- Care for small/ill newborns according to standardized protocols
- Kangaroo Mother Care for stable LBW infants
- Post-natal visit within six days

# **Child Health**

- Promotion of breastfeeding
- Provision of preventative services (immunisation, growth monitoring, vitamin A, regular deworming)
- Correct management of common childhood illnesses (IMCI)
- Early identification of HIV-infected children and management
- Improved hospital care for ill children especially for those with common conditions using standardised protocols
- Expansion and strengthening of school health services
- Developing services for children with long-term health conditions

## Women's Health

- Access to contraceptive services, including pregnancy confirmation, emergency contraception and a full range of contraceptive methods
- Post-rape care for women and children (PEP)
- Improved reproductive health services for adolescents through provision of youth-friendly counselling and reproductive health services at health facilities and as part of school health services
- Improved coverage of cervical screening and strengthening of referrals

## **Community Interventions**

- Provision of a package of community-based MNCWH services by generalist CHWs working as part of municipal ward-based PHC outreach teams
- Multi-sectoral action to reduce poverty and inequity, and improve access to basic services, especially improved water and sanitation
- Implementation of a MNCWH communication strategy at all levels

#### **CARMMA**

This campaign focuses on key priority areas and is an African continent-wide initiative to achieve the MDGs.

- Exclusive breastfeeding
- Improved contraceptive services
- Improvement of the PMTCT programme
- Improved outcomes for babies and mothers
  - ESMOE (Essential steps in the mgt of obstetric emergencies)
  - KMC (kangaroo mother care)
  - Obstetric waiting homes
  - Improved transport (obstetric ambulances)

#### **Three Streams – School Health**

- Mandate is to cover all students and schools in an incremental way starting with quintiles 1 and 2
- NDOH and DBE have finalised core package of services for primary and secondary schools
- Screening, health education/promotion
- Provision of PHC services through mobile services
- Strengthen M&E to show impact of school health

## **DCSTs & School Health**

- Review information/indicators arising from school health services
- Review the quality of school health services and provide guidance on how to improve these
- Review referral pathways between school health and facilities and provide guidance on improvements
- Provide in-service training to school health nurses

## Municipal ward based PHC Outreach Teams

**Generic functions of PHC teams:** 

- Know the demography of the catchment population
- Know the epidemiology
- Health promotion and prevention (household and community)
- Screening, identification of individuals at risk and referral focusing on HIV, TB, MCWH initially
- Palliative care in partnership with Dept of Social Dev
- Social mobilisation
- Linking resources to community needs to improve health outcomes
- Link with school health teams

## **DCSTs & PHC Outreach**

- Review, analyse and interpret information & indicators arising from PHC Outreach teams.
- Review the quality of PHC Outreach team services and provide guidance on how to improve these
- Review referral pathways between PHC Outreach and facilities with respect to MCWH services in particular and provide guidance on improvements
- Provide in-service training to team leaders (prof nurses ) of PHC Outreach teams

## District Management Team & District Hospital Management

- DCST must work closely with the district management team and management team of the district hospital (and regional hospital)
- Administratively the DCST reports to the District Manager
- Clinically the reporting line is to the province
- Activities of the DCSTs must be reflected in the District Health Plans

## Conclusion

- DCSTs should work closely with the other two streams of PHC re-engineering as well as the district management team and district hospital management
- DCST to review District Health Plans and strengthen them
- Key is to focus on the health outcomes and design plans to improve health status through a focus on improved clinical governance

# **Thank You**