# PROCEEDINGS OF THE MISSION DIRECTOR, STATE RURAL HEALTH MISSION & EXECUTIVE SECRETARY, STATE HEALTH SOCIETY, CHENNAI – 6

## PRESENT: Thiru PANKAJ KUMAR BANSAL, IAS,

## Proc.No.7000/P3/SHS/12

### Dated: 16.10.12

- Sub: NRHM TN State Health Society –RCH Maternal Health – Initiating Special Maternal Death Audit activity at Districts under NRHM – release of funds for 6 months (October'12 to March'13) – funds sanctioned & orders issued- regarding.
- Ref: 1. PIP 2012-13.
  - Govt.of India letter F.No. 10(11)/2012 NRHM-1, Min. of Health & Family Welfare, New Delhi, dt.16.07.12 (Supplementary PIP)
  - 3 20<sup>th</sup> E.C. Meeting held on 01.08.2012
  - 4. This office letter No.7000/SHS/P3/2012 dated 1.10.2012.

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#### ORDER:

Under RCH Maternal Health, a proposal for Special Maternal Death Audit at the district level, with budget cost of Rs.90.00 lakhs has been included in PIP 2012-13 and approved by GoI vide Ref. 2 cited and also by 20th E.C.Meeting vide In the approved activity, it is proposed that a team comprising of 2 ref.3 cited. Senior Obstetricians / Anaesthetists / Retired Government Specialists / Private Practitioners, will conduct inquiry within 24-48 hours of each of the maternal deaths that occur in the district and document the chain of events that led to the maternal death. Guidelines for conducting the Audit has already been communicated vide ref. no.4 cited. The team will undertake visits to the place of death, place of referral(s) from where referral was made (if the deceased mother is a referred case), Facility / registration check-ups facilities where AN and AN were undertaken (MCH/DH/SDH/PHC/HSC/ Urban Health Institutions/ Private Institutions / any other) in and around the district and upto the house-hold level based on the merit of the case. The team will scrutinize the reports and case-sheets pertaining to the deceased mother and prepare a report on the maternal death in triplicate, one of which will be sent to SHS, second to the District Collector and the third copy will be retained at the District. The expenditure shall be incurred at Rs.10,000/- per investigation of case of Maternal Death Audit with, details as below:

		Rs.10,000/-
Incidental Exp	enses- Rs.500X2 days	= Rs.1000/-
Fuel Expenses	-Rs.500/-X 2 days	= Rs.1000/-
Honorarium-	Rs.2000/-X2 SpecialistsX2days	= Rs.8000/-

Deputy Director of Health Services of all the HUDs will be co-ordinating the special maternal death audit as and when the information on Maternal Death at any of the facility (Govt. / Private / Home / during referral / others) is received by the Deputy Director of Health Services / O/o DDHS.

District Family Welfare Officer of Chennai Corporation will co-ordinate the above activity in maternal deaths occurring in Chennai Corporation limits.

Hence to initiate the said activity, it has been decided to release the funds for 6 months based on the average number of maternal deaths that had occurred in the districts in the past 2 years (2010-11 and 2011-12) for Rs.43.00 lakhs(Rupees Forty Three lakhs only) as per the Annexure -I

Sanction is hereby accorded for a sum of Rs.43.00 lakhs (Rupees Forty three lakhs only) to meet out the expenditure for conducting facility based Maternal Death Review in the district for 6 months (October'12 to March'13) to the District Health Societies, as per the breakup details given above.

The Financial Adviser and Chief Accounts Officer, SHS, Chennai-6 is authorized to draw the amount of Rs.43.00 lakhs (Rupees Forty three lakhs only) from available NRHM account and disburse the same to the Executive Secretaries of the District Health Societies by means of e-transfer as mentioned in Annexure-II

The expenditure is debitable under "NRHM-RCH-Maternal Health-A.1.5".

The Executive Secretaries of the District Health Societies are requested to re-allocate amount to the concerned HUDs as per the Annexure.I and also furnish the Statement of Expenditure and Utilisation Certificate for the incurred amount by 10<sup>th</sup> of every month. The guidelines for this activity is enclosed in the Annexure.III which has already been communicated by e.mail / sent vide this office reference 4<sup>th</sup> cited. The District FW Officer of Chennai Corporation is requested to organize special maternal death audit for the maternal deaths occurring in the institutions coming under Chennai Corporation.

## Sd./..PANKAJ KUMAR BANSAL, MISSION DIRECTOR.

Encl: Annexure.I & II Annexure.III – Guidelines for maternal death audit.

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The Financial Adviser and Chief Accounts Officer, SHS, Chennai-6 The Commissioner, Chennai Corporation, Chennai. The Executive Secretaries of the District Health Societies. Deputy Director of Health Services of HUDs. The District FW Officer, Chennai Corporation. Copy to: The Director of Public Health and Preventive Medicine, Chennai-6. The Deputy Director (Health), Chennai Corporation. Cash Section / Budget Section Stock file, S/c.1.

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## **REVISED GUIDELINES - MATERNAL DEATH AUDIT**

Maternal Mortality Rate of the State of Tamil Nadu is 97/100,000 Live births. (SRS-2008). Target suggested by the Government of India and State Government for the 12<sup>th</sup> Five Year Plan period is 41/100,000 Live births at the end of 2017.

In the State, Community based MDR is ongoing since 2004. District Level Maternal Death Audit Committee with the District Collector as the chairperson is conducting monthly meetings on maternal deaths and the relatives of the decreased attend the meetings.

Facility Based MDR is ongoing since 2010 through video conference and Government MCH/DH/SDH maternal deaths are being reviewed on the last Thursday of every month.

A proposal to intensify MDR so as to include all Maternal deaths in the State has been approved by NPCC of NRHM in the PIP 2012-13.

Hence it is proposed to form a panel of Experts at each HUD to undertake the inquiry of each Maternal death occurring anywhere in the HUD (Govt. Institution / Private Institution / Home) within 48 hours of Maternal death and send a detailed report to the SHS along with specific remarks.

## Given below are the guidelines:

1. DDHS will identify a panel of Experts consisting of renowned obstetricians and anesthetists in and around the district:

Timeline: 7 days from the receipt of this letter

2. Deputy Director of Health Services will sensitise all the Institutions (Govt. / Private) / IMA/FOGSI/etc. about the proposed special MD audit and enlist their fullest cooperation.

Timeline: 10 days from the receipt of this letter

- 3. The panel of specialists may include both Govt. (in service / retired) and Private Doctors. They may be, preferably, not below the rank of CCS / Professor of the speciality or equivalent.
- 4. The specialists have to be willing to travel across the district, if need be, and submit a detailed report (in triplicate 1 to SHS, 1 to District Collector & 1 to Deputy Director of Health Services) on the chain of events from AN registration leading to the death of the PW within 5 days of occurrence of MD.
- 5. The specialists have to be chosen from the institutions other than the institution where the MD occurred.
- 6. The expenditure towards the conduct of enquiry will be paid as follows:

S.No.	Activity		Amount in Rs.
1	Honorarium for the Experts of the team	Rs.2000 per day x 2 days x 2 Experts	8000/-
2	Fuel expenses	Rs.500 per day x 2 days	1000/-
3	* Incidental expenses	Rs.500 per day x 2 days	1000/-
		Total	10000/-

\* Incidental expenses to be incurred are for food and refreshments of the team, towards stationeries for preparation of reports and expenditure towards Xeroxing the needed documents.

## **MD Special Audit:**

- 1. DDHS will have to be notified at once by the duty Medical Officer (both private and Govt.) on the admission of critically ill pregnant woman / when the admitted pregnant woman or delivered mother becomes critical or dead. A delay of more than 15 minutes after declaration of death may amount to negligence of duty / responsibility of the Institution.
- 2. DDHS will immediately alert the panel of experts and based on availability, will ensure that along with him, a team of 2 specialists visit the Institution (at which the death has occurred) at the earliest.
- 3. The team will undertaken visits to the place(s) from where referral was made (if the deceased mother is a referred case), Facility / facilities where AN registration and AN check-ups were undertaken (MCH/DH/SDH/PHC/HSC/Urban Health Institutions / Private Institution / Any other) in and around the district and upto the house-hold level based on the merit of the case.
- 4. All data pertaining to the deceased mother have to be presented to the MD audit team at the time of visit by all the Institutions (including private Hospitals) involved in the management of the deceased mother from AN-registration till Maternal Death.
- 5. The Team will scruitinise the reports and case-sheets pertaining to the deceased mother and arrive at the plan of investigation and undertake them.
- 6. The Team may prepare a report of the Maternal Death, with Xeroxed copy of details of AN registration, AN care, case-sheets, investigation reports (wherever applicable) in triplicate and send one copy to the State Health Society within 5 days of occurrence of Maternal Death.
- 7. The report has to present all the medical / social / economic causes and specify the areas of system failure if any in the occurrence of maternal death investigated by them.
- 8. The Experts shall suggest measures to prevent occurrence of such Maternal Deaths in future.
- 9. DDHS will disseminate the steps to be taken to address the preventable causes of maternal deaths in the monthly coordination meetings and facilitate their implementation in all the institutions of the HUD.

# Sd./..PANKAJ KUMAR BANSAL, MISSION DIRECTOR.

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for MISSION DIRECTOR.

# MATERNAL DEATHS AUDIT EXPENDITURE FOR THE YEAR 2012-13

S.N	HUD	Average No. of MD for 6 months (based on 2010-11 and 2011-12)	Honarorium for the experts	Fuel expenses Rs. In Lakhs)	Incidental expenses	Total Amount Rs.
1						170000
1	CUDDALORE	17	1.36	0.17	0.17	170000
2	VILLUPURAM	8	0.64	0.08	0.08	80000
3	KALLAKURICHI	16	1.28	0.16	0.16	160000
4	THANJAVUR	14	1.12 0.64	0.14	0.14 0.08	140000
5	NAGAPATTINAM	8	0.04	0.08		80000
6 7	THIRUVARUR PUDUKOTTAI		0.72	0.09	0.09	90000
8		8		0.08	0.08	80000
	ARANTHANGI		0.40	0.05		50000
9	THIRUCHIRAPALLI	18	1.44	0.18	0.18	180000
10	PERAMBALUR	6	0.48	0.06	0.06	60000
11	ARIYALUR	4	0.32	0.04	0.04	40000
12	KARUR	9	0.72	0.09	0.09	90000
13	DINDIGUL	7	0.56	0.07	0.07	70000
14	PALANI	7	0.56	0.07	0.07	70000
15	MADURAI	31	2.48	0.31	0.31	310000
16	THENI	9	0.72	0.09	0.09	90000
17	SIVAGANGA	8	0.64	0.08	0.08	80000
18	RAMANATHAPURAM	4	0.32	0.04	0.04	40000
19	PARAMAKUDI	6	0.48	0.06	0.06	60000
20	VIRUDHUNAGAR	6	0.48	0.06	0.06	60000
21	SIVAKASI	8	0.64	0.08	0.08	80000
22	TUTICORIN	9	0.72	0.09	0.09	90000
23	KOILPATTI	6	0.48	0.06	0.06	60000
24	THIRUNELVELI	15	1.20	0.15	0.15	150000
25	SANKARANKOIL	11	0.88	0.11	0.11	110000
26	NAGARCOIL	5	0.40	0.05	0.05	50000
27	KANCHEEPURAM	7	0.56	0.07	0.07	70000
28	SAIDAPET	7	0.56	0.07	0.07	70000
29	THIRUVALLUR	12	0.96	0.12	0.12	120000
30	POONAMALLEE	2	0.16	0.02	0.02	20000
31	THIRUVANNAMALAI	12	0.96	0.12	0.12	120000
32	CHEYYAR	5	0.40	0.05	0.05	50000
33	VELLORE	12	0.96	0.12	0.12	120000
34	TIRUPATHUR	8	0.64	0.08	0.08	80000
35	DHARMAPURI	12	0.96	0.12	0.12	120000
36	KRISHNAGIRI	12	0.96	0.12	0.12	120000
37	SALEM	25	2.00	0.25	0.25	250000
38	NAMAKKAL	9	0.72	0.09	0.09	90000
39	ERODE	5	0.40	0.05	0.05	50000
40	DHARAPURAM	3	0.24	0.03	0.03	30000
41	COIMBATORE	13	1.04	0.13	0.13	130000

42	TIRUPPUR	8	0.64	0.08	0.08	80000
43	UDHAGAMANDALAM	0	0.48	0.06	0.06	60000
44	CHENNAI	18	1.44	0.18	0.18	180000
	Total	430	34.40	4.30	4.30	4300000

(Rupees Forty three lakhs only)

Sd./ Pankaj Kumar Bansal, Mission Director.

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for MISSION DIRECTOR.