



CHAPTER-08

ASSESSMENT OF FIRST REFERRAL UNIT COMMUNITY HEALTH CENTRE, ANTA (RAJASTHAN)

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INTRODUCTION

The implementation of First Referral Unit (FRU) is a crucial strategy in the National Rural Health Mission (NRHM) aimed at reducing maternal mortality. NRHM, initiated by the Prime Minister of India on April 12, 2005, represents a comprehensive government initiative to revamp the health delivery system. The mission strives to transform healthcare delivery by ensuring universal access to affordable, equitable, and quality healthcare that is responsive to the people's needs. Additionally, it aims to decrease child and maternal mortality rates, stabilize the population, and promote gender and demographic balance. As part of NRHM, the provision of 24-hour services at the Community Health Centre (CHC) level is envisioned, and First Referral Unit (FRU) hospitals play a pivotal role in offering round-the-clock specialist care in Medicine, Obstetrics and Gynecology, Surgery, and Pediatrics.

High mortality rates linked to pregnancy and childbirth complications persistently affect the developing world. This study investigates the factors contributing to the low acceptance of referrals to specialized medical facilities among 276 women in a rural region of Rajasthan, India [1].

India faces a persistently high and unchanging neonatal mortality rate. To address this issue, Special Care Newborn Units (SCNUs) have been established in various district hospitals, particularly in remote areas with a high burden of neonatal deaths and limited access to specialized newborn care. This study aims to evaluate the operational effectiveness of SCNUs in eight rural districts of India [2].

RESEARCH QUESTIONS

1. What methods could be employed to recognize deficiencies in the operational First Referral Unit?
2. What measures could be implemented to address and rectify all identified shortcomings in the facility?

RESEARCH OBJECTIVES

1. To evaluate high-case load facilities' ability to deliver quality maternal and childcare services, taking into account factors like infrastructure, services, human resources, training, drug and equipment availability, and documentation.
2. To identify both exemplary practices and shortcomings within the facility and its staff to strengthen the provision of sustainable, high-quality services and set benchmarks for other institutions.

RESEARCH METHODOLOGY

The research methodology employed an observational study approach, utilizing random sampling at CHC Hospital in Anta, Rajasthan. The sample size included various departments such as Labour Room, OT, Family Planning, Lab, and Blood Unit. Data collection was performed using the "Piramal ADT NITI facility assessment checklist," an application-based tool with individual checklists tailored to assess different tiers of health facilities. The assessment focused on evaluating access and quality of mother and child health services in District hospitals and Community Health centers within the aspirational district of "Baran," one of the 25 identified districts. The primary objective was to identify key health building blocks, including infrastructure, manpower, available services, lab/diagnostics, equipment, and the availability of drugs and supplies.

RESULTS AND DISCUSSION

In the assessment of various departments within the healthcare facility, the Labour Room achieved an overall departmental score of 61.22%. The evaluation encompassed infrastructure, services, manpower, and related aspects, revealing issues such as inadequate facilities, missing amenities, and limited services. To address these concerns, proposed action plans involve conducting budget estimations, engaging in proposal reviews, and addressing specific deficiencies. On the other hand, the Operation Theatre received a departmental score of 25.28%, indicating challenges related to inadequate infrastructure, missing facilities, and insufficient services. Proposed strategies to improve this department include initiating discussions with the CHC in charge, conducting budget estimations, and engaging in thorough proposal

reviews.

Similarly, the New-born Stabilization Unit (NBSU) obtained a departmental score of 27.94%, with evaluations encompassing infrastructure, services, manpower, and various other factors. Identified problems include the absence of critical facilities, accessibility issues, and concerns related to equipment. The proposed action plans for NBSU involve budget estimations, detailed proposal reviews, and targeted interventions to address specific deficiencies. Contrastingly, the Laboratory & Diagnostics department performed well, achieving a departmental score of 81.14%. The comprehensive assessment covered infrastructure, services, manpower, and other relevant criteria. While there are identified problems, such as inadequate laboratory space and certain missing services, action plans have been devised, including informing the CHC in charge, conducting budget estimations, and engaging in proposal reviews to enhance the overall functionality of the department.

CONCLUSION

In conclusion, the evaluation of all departments within the Functional First Referral Unit (FRU) at CHC Anta indicates significant challenges across key parameters, including Infrastructure, Services, Manpower, Training, Lab & Diagnostic facilities, Drugs & Equipment availability, IEC (Information, Education, and Communication), and Documentation. The overall functionality of these essential healthcare units is suboptimal, revealing inadequacies in critical areas that directly impact the delivery of quality maternal and childcare services.

REFERENCES

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