



Proshanti UK Monthly Field Activity Report

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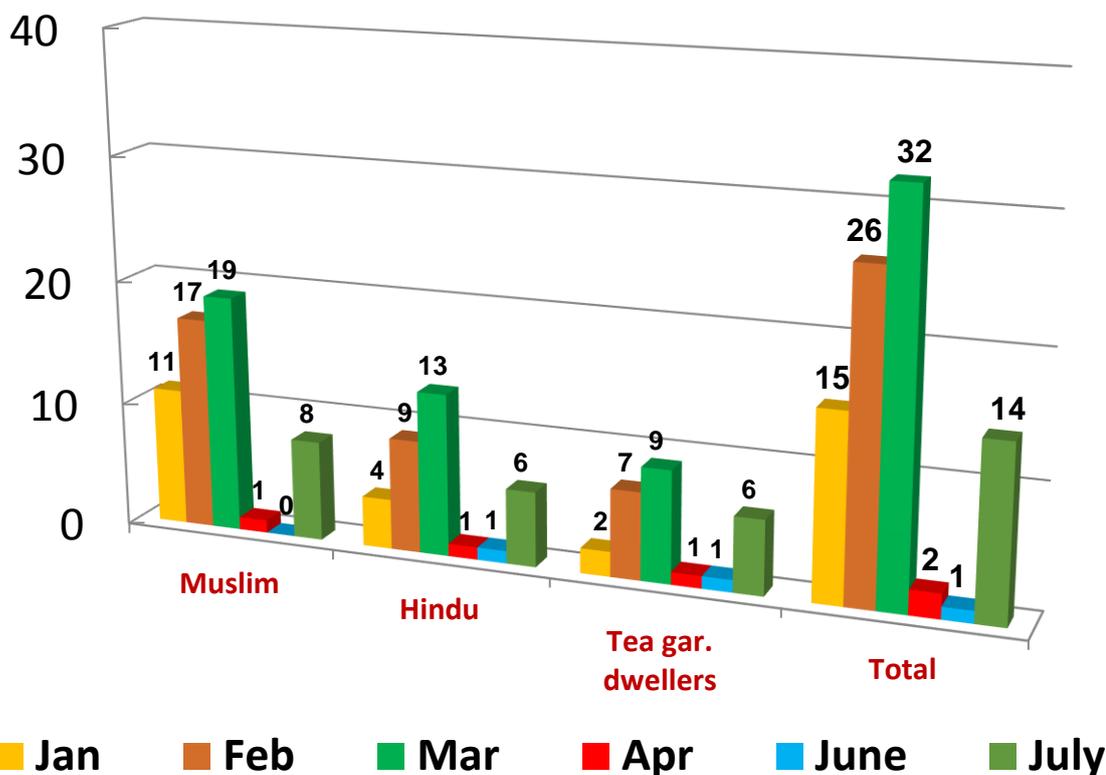
Patient statistics / turnover:

An English proverb says "Health is wealth" but the health and nutrition situation in Bangladesh is worse than some African counties (UN Global Health & Nutrition Report-2013). Government are trying to ensure public health with the help of different wings and took different type of activities & project; for that established different services delivery point like UHC, UH&FWC, CC, Satellite Clinic etc. But the service delivery points don't work properly and the people cannot claim their right to health. In this situation the government service providers are referring many clients to Proshanti UK for better services. We are silently contributing towards health success indicators of Bangladesh. Therefore we focused our activities on quality of ANC & PNC, client counselling & monitoring, health education, strong EDD follow-up, safe delivery and control TBA delivery. This month we have started new client enrolment under UWT (Ummah Welfare Trust) funding and we are very much committed to successfully fulfil the UWT commitment. Present client statues are given below.

Old Enrolled	New Enrolled	Drop Out	Total delivered	Present Clients Stats
76	14	06	33	51

Client enrollment status Jan - July, 2015

Muslim-48, Hindu-28 & Tea garden dwellers- 20



A.N.C Coverage in July, 2015

ANC-1	ANC-2	ANC-3	ANC-4+	Total ANC
14	00	08	24	46

We are committed to ensure quality of ANC that's why we ensured weekly checking of equipment and randomly cross checking is going on of clinical tests and medicines. We have ensured urine sugar and albumin test & records of every client on every ANC. This month we rechecked Hb% of 08 clients out of 46 ANC.



Joni Das (Midwife) is facilitating a Health Session

Knowledge is power therefore we are trying to build awareness to our clients on different issues within the health educations. The clients are from the grassroots level and they believe in deep social prejudice and involved in practices. Clients and their relatives attended this particular awareness session conducted by our Nurse Joni Das.

Health education is an important part of ANC so we organize health education sessions on every ANC. It is an effort to develop life skills of the pregnant mothers. This session is held every day after the completion of clinical tests

Healthy mother & healthy baby depends mostly on nutrition intake and nutrition is the most important issue during pregnancy, it is also an indicator of quality of care we provide. This month we provided nutritional support to four malnourished clients in the form of food package. They are (i) Salma Begum PS-30, (ii) Rita Suvakar PS-33, (iii) Popi Akther PS-46 & (iv) Mira Rabidas PS-71. In July we carefully observed their change like weight, B.P, hb%, fundal height, sickness & weakness ratio, etc and their smiling face showed their inner happiness. Additional nutrition would help the growth of the upcoming child. We are also guiding the clients how to make proper use of the nutrition supplement.

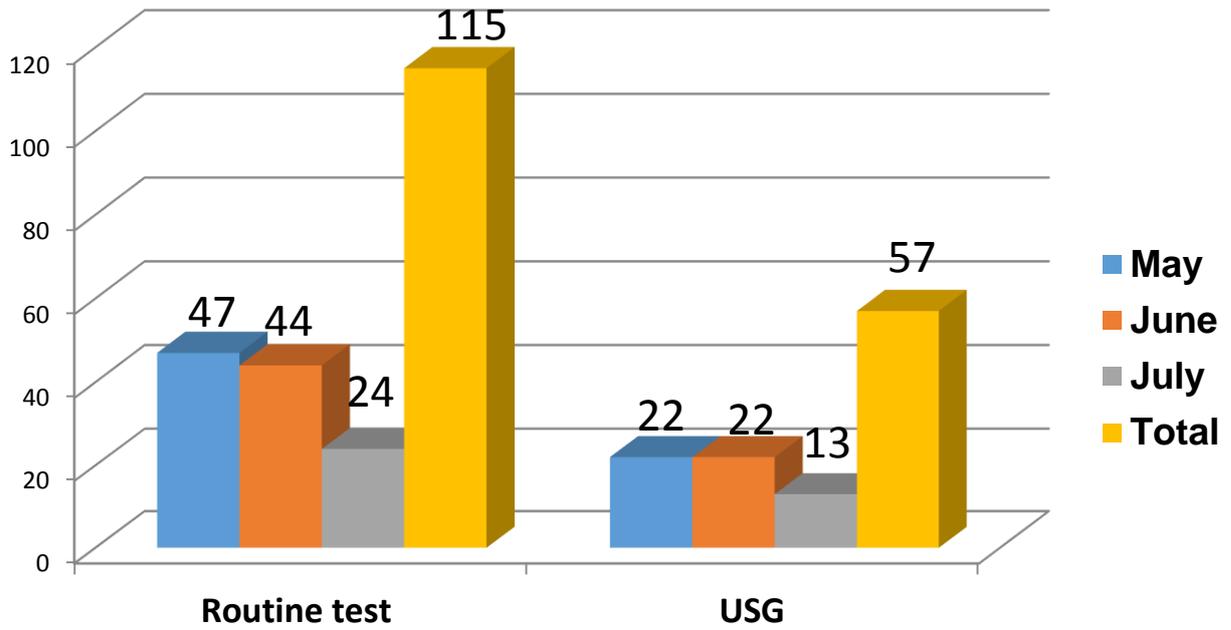
APEX Club of Hakaluki View, Juri is a local voluntary social organization and involved with different social activities. This organization support & promote Proshanti's activities strongly and offered to build a working relationship with Proshanti UK. APEX Club offered partial assistance towards our food supplementary project for July as well. Md. Tajul Islam President of the Club told at the distribution programme, "though it is a small opening hope it will be big one day and we will try to continue it at least for six months". Hadi Hussain Babul (P.D Bangladesh, Proshanti UK) congratulated the Club for their positive attitude and suggested them to work for venerable people of Juri. On the occasion Md. Al Amin Mullah represented AAMC.

Two clients will be dropped from next month's list and newly selected 8 clients will receive nutrition support from next month. We have added Vitamin A fortified soybean oil and Iodine enriched salt to the food pack.



Hadi Hussain Babul (P.D Bangladesh, Proshanti UK) & Md. Tajul Islam (President, APEX Club of Hakaluki View) is handing over supplementary food to Popi Akther PS-46.

Clinical test status of May - July, 2015

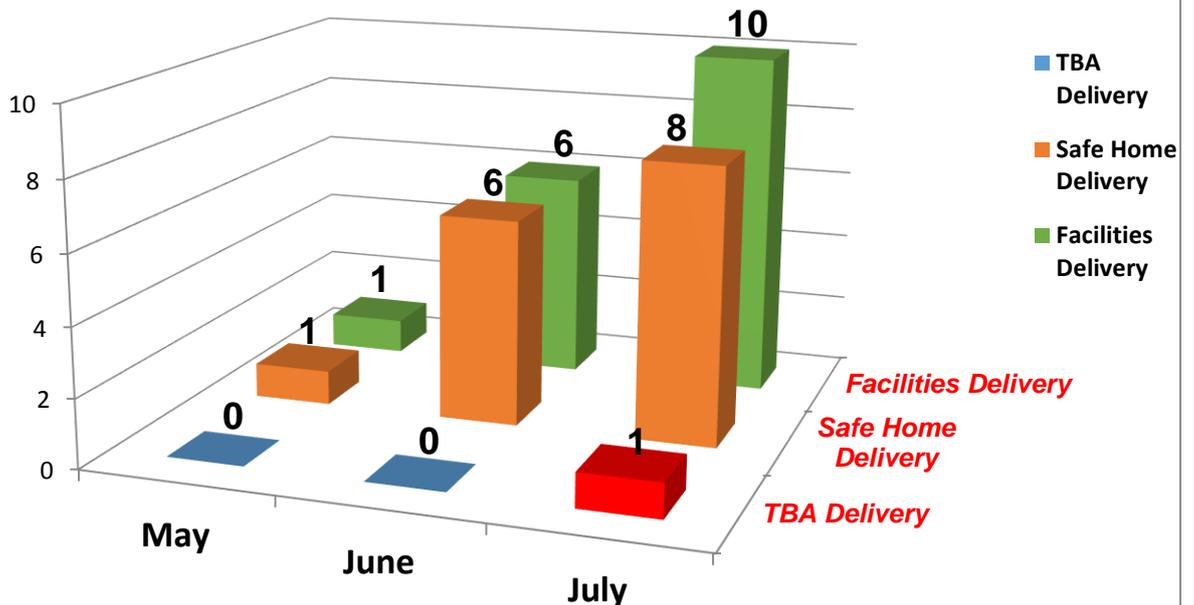


Delivery Conducted

Month	LUCS	NVD Facilities	Safe NVD home	TBA	Total	Remarks
May-2015	00	01	01	00	02	Muslim 01, Hindu 01
June-2015	01	06	06	00	12	Muslim 06, Hindu 06
July-2015	00	10	08	01	19	Mus-12, TG-05, Hin-02

Though it is a big challenge to eliminate TBA delivery but we are committed to bring it down as much as possible to avoid any undue accident. As an action we tried to grow up client awareness during ANC and establish a strong client monitoring system, one to one communication & relationship between Proshanti and its clients to overcome this challenge. We have been able to control TBA delivery from March to July, 2015.

Delivery status of May - July, 2015



P.N.C Service June, 2015

<i>P.N.C-1</i>	<i>P.N.C-2</i>	<i>P.N.C-3+</i>	<i>Total</i>	<i>Remarks</i>
19	05	00	24	

We are trying to ensure a more focused PNC visit at home with the aim to monitor that the mothers are taking proper nutrition that helps her incoming child. During PNC visits midwives are counselling mothers on different issues like postpartum nutrition, importance of exclusive breast feeding, system and rules of breast feeding, infant and young child feeding, child vaccination, postpartum family planning etc. As a result of PNC visits 3 mothers took family planning methods in June for ensuring postpartum health. In July we have been able to ensure 100% postpartum IFA and vitamin 'A'. Here is a short brief about PNC;

- a. Relevant aspects of the postpartum to be counselled to the mother and her family:** (i) Nutrition - animal proteins, legumes, green vegetables, fats, carbohydrates, fruits and vitamins; (ii) Importance of taking enough fluids, 2–3 litres of water daily; (iii) Personal and environmental hygiene, perinatal care (bathing, changing pads/cloths, adequate rest and sleep, exclusive breastfeeding for six months and weaning advice after six months (begin soft food), need for other postnatal checks during the first six days after delivery and again at six weeks, resumption of sexual activity after six weeks or when sees fit, including counselling client on discussing this topic with husband.
- b. Danger signs during the postpartum to be advised to the mother and her companion:** Excessive vaginal bleeding, dizziness, severe headache, convulsions, severe abdominal pains, blurred vision, heavy and/or foul smelling vaginal discharge, fever, bowel and urinary dysfunction.
- c. Assessment of the neonate from head to toe as following:** General condition / appearance of the baby, auxiliary temperature, respiratory rate (count for one minute while the baby is quiet, head, face, neck , eyes, oral cavity, hands and fingers, chest, abdomen and umbilical cord, external genitalia including anal opening, back and spine, legs and toes.

Clinical issues:

In July 37 clinical test has been done by AAMC and Janasheba Diagnostic Centre. Within these tests 8 were HB% and 13 USG tests. We nagged to ensure proper & quality medication as per prescriptions for our clients this month. Randomly clients' medicine packets were cross checked to ensure that no foul play was done by the pharmacy. We shall continue to do this every month.

Critical case report:



Nahida Kulsum with her baby

Ms. Nahida Kulsum (20) PS-64 was identified as a critical high risk client for the month. She lives 8 kms away from the AAMC. Her husband is a day laborer. Her last issue was a miscarriage. Her family believes in deep social prejudice & wasn't much interest to receive modern medication. From the beginning she was under our intensive care and she helped us to convince her family and received ANC as planed and followed our instructions seriously. We managed the case successfully without any major hiccup. The mother and baby are keeping well. Nahida Kulsum said, "From the beginning I was so afraid and thought what will happen but now I am fearless and very happy and Proshanti changed my life & family's mentality".

We were able to save two neonatal lives this month. The premature baby of Lovely Uria (28) of Shillghat tea garden and low birth weight baby of Najuba Akther (30) of Kontinala created sleepless nights for us.

Both babies were born on the 28th of July at the AAMC. Without delay we took necessary actions calling a Child Specialist who quickly referred the babies to the Newborn Care Unit of Osmany Medical College Hospital in Sylhet. We took ambulance to shift the babies with their respective parents, arranged food and accommodation for the families in Sylhet as well as

medication for the clients for the whole period of their stay. Now both mother and babies are keeping well after all necessary care and treatment.

Khakun Uriea husband of Lovely Uriea (28) told, "I am a very poor man and my daily income is only 69 taka (less than 50 pence). I managed my family with this income. If my wife would not have Proshanti by her side it would not be possible for us to save the baby because I have no knowledge and tea garden management would not have supported me like Proshanti."

Staff issues:

Joni Das joined as a Midwife/ Nurse last month. As she is a new staff we organized a 10 day on job training for her and now she is working indecently. This month she enrolled 07 new clients provided 23 ANC & 04 PNC and conducted 04 home deliveries. Her self-confidence, facilitation skill and delivery skills are growing up day by day. She is capable enough to maintain documentation properly.

We are continuing weekly sharing and coaching to enhance and establish working knowledge to improving quality of work of our staff. Documentation & knowledge cross-checking, on job training, coaching and mentoring are going on to develop these skills.



Joni Das is providing ANC to Client.

Networking: UHC/UNO/NGOs:

Networking and coordination with different stakeholders are going on especially with the Local Government. This month we provided monthly progress report to the UH&FPO, UFPO, UNO and DC Office.

AAMC:

We are continuing daily sharing with AAMC in every service related issue and a friendly working environment is prevailing between AAMC and Proshanti UK.

Problems encountered:

- Dr. K. Zaman shifted his chamber from AAMC but has always given priority to our clients as usual.
- Client's tendency to hid primary information to get admission under this project.
- Client's lack of access to a mobile phone has been a big hindrance for smooth communication.

Overall management concerns:

- Immediately arrange a good camera.
- Need a Multimedia or a Monitor.
- Need a Motorcycle.

Any other issues:

This month Mr. Hadi Hussain Babul, P.D Bangladesh, Proshanti UK, visited project activities and checked financial and other documentation and attended few activities such as the food distribution. He also met many clients to get their views on our services. He advised staff to maintain quality of services at all times.