



KANYE ADVENTIST HOSPITAL(KAH)

QUALITY IMPROVEMENT PROJECT POSTER

TITLE: Integrated Management of Childhood Illness (IMCI) clinic

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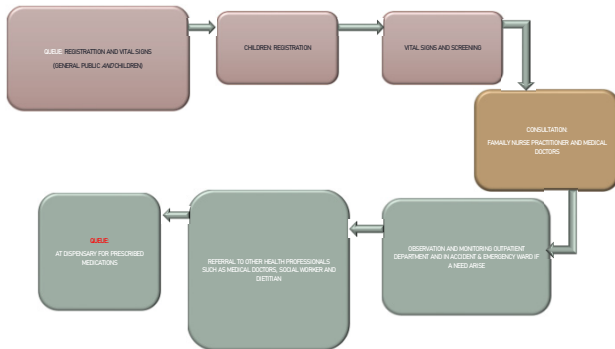
THE PROBLEM STATEMENT

Poor implementation Of IMCI (Integrated Management of Childhood Illness) thus leading to an increase in the number of preventable death among 0-59 months children . Others factors contributing included structural constraints, the general population including children served at the same service points hence hindering timely identification of children under critical conditions.

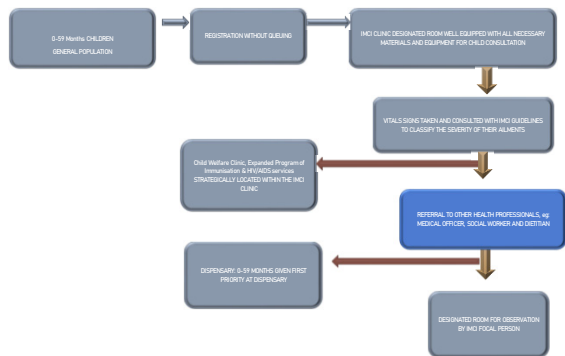
AIM (TARGET)

To improve childhood care services for children aged 0-59 months at KAH by establishing an operational IMCI clinic at a strategic point for integrated services by December 2020.

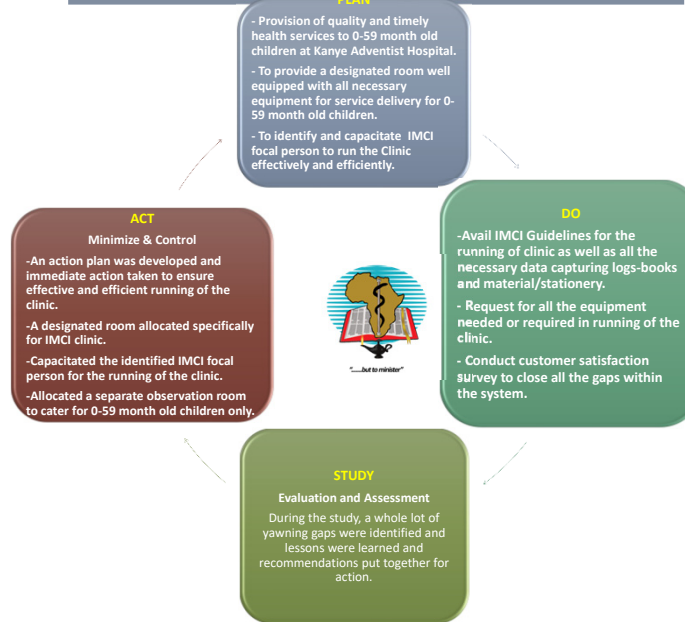
GRAPH OR FLOW MAP OF PRESENT STATE



GRAPH OR FLOW MAP OF FUTURE STATE

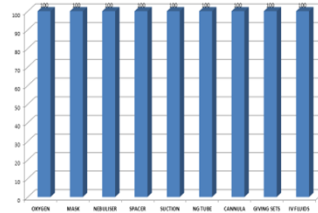


PLAN, DO, ACT, STUDY CYCLE (PDAS)



FISH BONE DATA: (LIMITED SPACE, INADEQUATE EQUIPMENT, AND INADEQUATE STAFFING.

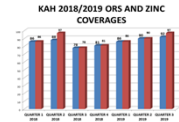
KAH FACILITY ASSESSMENT IMCI EMERGENCY EQUIPMENT 2019



RESULTS

We took a holistic approach and implemented the IMCI components and it bore the following fruits to mention a few:

- Through data analysis, customer satisfaction surveys, and interactions with care givers, IMCI in KAH has brought improvement in 0-59 months population care.
- We saw an improvement in the following areas:
 - a) Routine health check ups attendance have improved
 - b) Uptake in scheduled immunisations increased including Vitamin A coverage,
 - c) Health seeking behaviours patterns improved hence reduction in the severity of disease and mortality.
 - d) Oral Rehydration Solution (ORS) and Zinc Sulphate uptake increase. As shown in the graph below:



- Counselling done since inception of the IMCI clinic has assisted in the decline of numbers severe cases seen in KAH.
- The community was empowered to be able to identify childhood health problems and to come up with appropriate solutions.

Summary of Accomplishments

The revision helped in:

- Reduction of mortality rate as a result of expedited IMCI services provision.
- Reduction in incidence and severity of illness among under 5s as caregivers now have good health seeking behaviours and they (caregivers) are well informed on child care.

SUMMARY

1. Lessons Learned.

Child care givers are able to identify the conditions of their children hence reducing child mortality. Also there are positive impacts on Integration of children's services like IMCI, Child immunization and Children's Welfare Clinic.

2. Impact on Quality of service.

The IMCI programme initiated in the institution has brought a great improvement in child welfare care and management, we have witnessed a great reduction in severity of diseases and child mortality.

3. **Challenges** – Structural constraints and inadequate staffing; observations are done in waiting area which is an open space. There is a single focal person for IMCI in her absence service is provided by a midwife with in-service training in IMCI services.

FUTURE STEPS/ WHAT'S NEXT?

1. Way forward.

- As an institution we would like to continue this quality improvement project more so that, it has increased our customer satisfaction index and turn around time.
- We intend to train more personnel on IMCI guidelines to ensure the smooth and consistent running of the unit
- To procure more advanced emergency equipment
- To increase the observation area by partitioning
- Medical officer to be allocated to the clinic full time.

2. Commitment.

- We would like to continue with the same project as its successful completion will not only increase our customer satisfaction but also improve the reputation of the hospital.