

Mother, but without Forgetting Her Child: Time To Nationwide the Good Practices of Maternal and Newborn Deaths Audit for Better Healthcare Quality.

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Abstract

The objective of this study was to aware people about the use of maternal and neonatal clinical audit as integrated strategy to fight against Maternal and neonatal mortality. A short literature review has been conducted using the words audit, clinical audit, maternal audit and neonatal audit » to produce lessons learned about clinical audit in the African context. Several strategies are implementing to improve the quality of care but not in nationwide setting about maternal death audits. And few studies focused on newborn death audits. Both maternal and newborn deaths audits are suitable for achieving the Reproductive, maternal, newborn and child health (RMNCH), as a nationwide initiative going toward achieving Sustainable Development Goals (SDGs).

Introduction

Maternal mortality rates remain very high globally and particularly in sub-Saharan Africa [1]. Despite the achievement for reducing maternal mortality ratio (MMR) these last years, countries, mainly those from Sub Sahara, needs to do more for mothers and newborns in order to sustain the trend and to achieve the third target of the Sustainable Development Goals (SDGs). Most of these deaths are avoidable [2, 3]. One way of reducing maternal mortality is by improving the availability, accessibility, quality and use of services for the treatment of complications that arise during pregnancy and childbirth [4]. The combat against maternal mortality involves several strategies including implementation of maternal death audits aiming to improve the quality of care [3-5], but few studies focused on newborn death audits. Both maternal and newborn deaths audits are suitable for achieving the Reproductive, maternal, newborn and child health (RMNCH).

Reproductive, maternal, newborn and child health (RMNCH) must include integrated service delivery for mothers and children from pre-pregnancy to delivery, the immediate postnatal period, and childhood. Such care is provided by families and communities, through outpatient services, clinics and other health facilities. As well, Every Newborn impact framework provides key steps for integrated care to mother and children [6]. The maternal and newborn death audit is helpful for that.

A maternal death audit is an in-depth systematic review of maternal deaths to delineate their underlying health social and other contributory factors, and the lessons learned from such an audit are used in making recommendations to prevent similar future deaths [7]. Five approaches for reviewing maternal deaths and ill health: Facility-based maternal death review, Community-based maternal death review (verbal autopsy), Confidential enquiries into maternal deaths, Survey of severe morbidity (near misses), clinical audit [7].

Maternal death audit (MDA) is one of the strategies that have proven effective in improving the quality of obstetric care in Ethiopia, Nigeria and Senegal, and there are indications that the audits have helped reduce maternal mortality [8-11].

In its implantation in Burkina Faso, maternal death audits (MDAs) were irregularly scheduled, mostly driven by critical events ; and, programming, communication, and compliance with the basic principles in the conduct of maternal death audits were inadequate as compared to the national standards, a condition for improving the quality of clinical audits [12]. But about a review from Rwanda, the authors found that the facility-based maternal death audit approach has helped facility teams to identify causes of death and contributing factors, as well as make recommendations for action to prevent future deaths. They recommend that Rwanda better inform corrective actions by complementing these audits with other strategies, such as confidential enquiries and near-miss audits [13]. Recommendations made by maternal death audit committees concerned a better management of obstetric complications, the availability of medicines and infrastructure, competencies improvement and motivation of human resources, a good referral system, the population sensitisation, and communication amongst staff and between departments within the hospital, between health facilities, and between health providers and patients [13].

Lessons have to be learned from maternal death audit (MDA) to newborn death audit because there is a strong need of integrated system for reproductive, maternal, newborn and child health (RMNCH). Wether the review of maternal death is common that is not the case for reviewing newborn death. This strategy, for improving quality of care for mothers and newborns by reviewing all cases of maternal and newborn death, has to be a nationwide initiative in order to be a demonstration of strong political that will be to improve maternal and newborn health going toward achieving Sustainable Development Goals (SDGs).

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