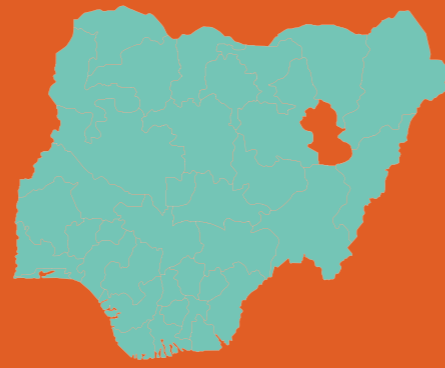


We ask Gombe State Ministry of Health to:



- ✓ Retrain the MPDSR committee members across all facilities
- ✓ Provide accommodation to health workers in Tula, Kuri and Biri Hospitals
- ✓ Provide and carry out a turnaround maintenance of ambulances in Malam Sidi, Bojude, Potuki, Bojoga, and Talasse Hospitals
- ✓ Provide modern delivery beds to all the secondary health facilities with the exception of the State Specialist hospital
- ✓ Provide Ambu bags and medical oxygen to all Cottage Hospitals
- ✓ Provide paediatric Weighing scales to all Cottage Hospitals
- ✓ Provide blood pressure apparatus or sphygmomanometer to all secondary health facilities
- ✓ Provide functional blood banks to all the secondary health facilities
- ✓ Reactivate the In-house Training Committee in the State Ministry of Health



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Produced by the Gombe State Maternal and Perinatal Death Surveillance and Response (MPDSR) Steering Committee in October 2018, with support from MamaYe-Evidence for Action

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HEALTH FACILITY MATERNAL AND PERINATAL DEATH SURVEILLANCE AND RESPONSE (MPDSR) SCORECARD

GOMBE STATE, NIGERIA

Jan– June 2018



FACILITY NAMES

INDICATORS	State Specialist Hospital	Billiri General Hospital	BamBam Cottage Hospital	Bajoga General Hospital	Bajude Cottage Hospital	Biri Cottage Hospital	Deba General Hospital	Dukku General Hospital	Hinna Cottage Hospital	Kuri Cottage Hospital	Kaltungo General Hospital	Kumo General Hospital	Kashere General Hospital	Mallam Sidi Cottage Hospital	Nafada General Hospital	Potuki Cottage Hospital	Pindiga Cottage Hospital	Talase General Hospital	Tula Cottage Hospital	Tumu Cottage Hospital	Women & Children Hospital	Zambuk General Hospital
Total no of Deliveries	1642	321	336	287	243	21	75	308	63	19	170	698	124	26	81	142	76	116	34	249		53
REVIEW OF MATERNAL DEATHS																						
Number of maternal deaths in the last 6 months	38	3	1	5	0	1	2	9	0	0	3	2	4	0	1	1	0	6	0	0		3
Number of maternal deaths reviewed in the last 6 months	38	2	0	5	0	1	2	3	0	0	1	2	1	0	1	1	0	4	0	0		3
% of maternal deaths reviewed	100%	67%	0%	100%	NA	100%	100%	33%	NA	NA	33%	100%	25%	NA	100%	100%	NA	67%	NA	NA	NA	100%
REVIEW OF PERINATAL DEATHS																						
Number of peri-natal deaths in the last 6 months	305	16	9	41	16	22	12	62	12	1	37	29	21	15	19	12	5	14	2	13		7
Number of peri-natal deaths reviewed in the last 6 months	153	8	4	41	16	18	9	27	12	0	16	13	18	15	19	5	3	8	0	8		7
% of peri-matal deaths reviewed	50%	50%	44%	100%	100%	82%	75%	44%	100%	0%	43%	45%	86%	100%	100%	42%	60%	57%	0%	62%	NA	100%
USE OF MDR EVIDENCE																						
MPDSR Committee has an action plan for current quarter																			no			
Action plan contains clearly defined activities																			no			
Number of activities in this quarters action plan	9	5	6	3	6	6	6	6	3	0	3	3	1	3	3	5	3	3	0	4		9
Number of activities in action plan implemented during this quarter	3	3	2	1	5	3	6	5	2	0	2	0	1	2	3	5	2	2	0	1		9
% of actions implemented	33%	60%	33%	33%	83%	50%	100%	83%	67%	N/A	67%	0%	100%	67%	100%	100%	67%	67%	N/A	25%	NA	100%
MPDSR MEETINGS AND REPORTING																						
MPDSR Committee hold monthly meetings with minutes of meeting																						
MPDSR focal person is notified of all maternal deaths within 12 hours																						
All maternal deaths are reviewed within 48 hours																						
MPDSR focal person is notified of all perinatal deaths within 12 hours																						
All perinatal deaths are reviewed within 48 hours																						
MPDSR forms are completed																						
Causes of each maternal death are clearly defined					0					0												
Causes of each perinatal death are clearly defined																						
Health staff are using evidence from MDR to improve quality of care																						
Completed MDR forms are submitted monthly to the State M&E officer																						

Note: Women and Children Hospital is yet to be commissioned

Not applicable
 75% - 100% All criteria met
 50% - 75% Some criteria met
 <50% No criteria met