

Online supplement 2: Improvements through health-systems strengthening

The table below gives an overview of the areas of health-systems strengthening accomplished in each of the MOUs. It was not possible to address all the infrastructural issues, for example, space constraints and insufficient ablution facilities. Actions in the domains of service delivery and medical products were mostly specific to individual intervention MOUs and are indicated with ticks. Actions for the remaining health-systems building blocks were undertaken across the board for all MOUs but, where necessary, were adapted or implemented according to the specific set-up or contextual requirements of each MOU.

| Building block | MOU A | MOU B | MOU C | MOU D | MOU E |
|---|-------|-------|-------|-------|-------|
| SERVICE DELIVERY | | | | | |
| Infrastructure: | | | | | |
| • <i>Repair of window or ceiling</i> | ✓ | | ✓ | | |
| • <i>Review of structure with planned renovation</i> | | ✓ | | | |
| • <i>Renovation ablution area</i> | | | | ✓ | |
| • <i>Satisfactory</i> | | | | | ✓ |
| Environment: | | | | | |
| • <i>Area cleaned and reorganised</i> | ✓ | | ✓ | ✓ | |
| • <i>Changes reviewed with staff</i> | ✓ | | ✓ | ✓ | |
| • <i>Closed for upgrading</i> | | ✓ | | | |
| • <i>Satisfactory</i> | | | | | ✓ |
| Facility manager: | | | | | |
| • <i>Existing involvement and support in MOU</i> | | ✓ | | | ✓ |
| • <i>Facility manager's functions explained</i> | ✓ | ✓ | ✓ | ✓ | ✓ |
| • <i>Improvement in involvement and/or supportive supervision</i> | ✓ | | ✓ | - | ✓ |
| • <i>Improved collaboration with other facility managers</i> | ✓ | ✓ | ✓ | | ✓ |
| Obstetric triage / admission bed area: | | | | | |
| • <i>Admission/triage bed area reviewed</i> | ✓ | ✓ | ✓ | ✓ | ✓ |
| • <i>Emergency care area set up</i> | ✓ | | | ✓ | |
| • <i>Admission/triage bed area updated or repacked</i> | | | ✓ | ✓ | |
| Functionality of referral systems: | | | | | |
| • <i>Negotiated improvement in functionality of referral routes</i> | ✓ | | ✓ | ✓ | |
| • <i>Functional referral routes</i> | | ✓ | | | ✓ |
| MEDICAL PRODUCTS | | | | | |
| Drugs: | | | | | |
| • <i>Expired drugs removed</i> | ✓ | ✓ | ✓ | ✓ | ✓ |
| • <i>Rational ordering and use of drugs advocated</i> | ✓ | ✓ | ✓ | ✓ | ✓ |

| Building block | MOU A | MOU B | MOU C | MOU D | MOU E |
|---|-------|-------|-------|-------|-------|
| • Pethidine and support drugs available | ✓ | | | | |
| • Pethidine and support drugs and scheduled register supplied | | ✓ | ✓ | ✓ | ✓ |
| • Installed scheduled cupboard | | | | ✓ | |
| • SOP and protocol for pethidine and support drugs supplied | ✓ | ✓ | ✓ | ✓ | ✓ |

Supplies and equipment:

- Handheld doptone and vital function monitoring equipment procured for the five triage/admission beds
- Five LED portable overhead surgical lights procured for delivery rooms
- Wheelchairs to safely transport women in/after labour Overhead warmer and infant resuscitaires for each unit
- Emergency trolleys cleaned and stocked according to protocols
- PPH and eclampsia boxes with protocols reviewed *in situ*
- Equitable access to resources arranged with Whatsapp group to promote rational use and sharing
- Linen shortages highlighted at district level and district manager intervened to solve delays from suppliers

HEALTH WORKFORCE

Midwife champion:

- Team leader nominated by facility manager and midwives

Policies, protocols, procedures:

- Triage area with updated standard operating procedures; laminated flow charts and protocols; display boards revisited
- Training needs reviewed with midwife teams and facility manager
- Advocacy for respectful professional care reaching all levels of the health workforce
- Laminated referral and high-risk criteria fixed at writing desk in triage/admission area

INFORMATION

Feedback and facility information:

- Review of birth register to ensure adherence and correct information
- Tracking of performance and reports of incidents discussed
- Review of facility indicators with manager and steps needed to improve
- Review of equipment needs, supplies and outstanding maintenance with manager

FINANCING

Sustainable funding:

- Planning with facility managers and unit midwives to source necessary equipment, supplies; advocating rational usage in all units
- Linked managers and MCWH coordinator with Whatsapp to be able to support all units equally with supplies by borrowing essential drugs when units are running low

LEADERSHIP AND GOVERNANCE

Oversight and accountability:

- Role of facilitator: ensured collaboration and support to managers; assistance with team building in the units
- Constant feedback and monitoring to achieve greater accountability in units

Abbreviations: PPH box = Postpartum haemorrhage box; MCWH = Mother, child and women's health; PHC = Primary health care; SOP = Standard operating procedure; LED = Light emitting diode