



Applicant Information

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Abstract Details

Title:

Improving the uptake of third dose of Intermittent Preventive Treatment of Malaria Amongst Pregnant Women Attending Antenatal Care Clinic at Keta Municipal Hospital

Category:

Maternal and child health

Authors:

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Objectives:

Evidence suggests that uptake of three doses of intermittent preventive treatment (IPTp 3) of malaria using Sulphadoxine pyrimethamine (SP) drastically reduces maternal parasitemia, lowers the risk of low birth weight and increases mean birth weight. However, in Keta Municipal Hospital (KMH) the median percentage of pregnant women taking IPTp-3 in 2022 was as low as 69.7%.

Method:

A multidisciplinary work improvement team led by a quality manager reviewed and brainstormed contributory factors to low IPTp-3 uptake by pregnant women in KMH. Factors identified were prioritized. Root cause analysis was performed using five-whys which identified non-availability of plan to trace defaulters as the root cause of low IPT3 coverage in KMH. A change idea to trace defaulters through regular phone calls was tested using Plan-Do-Study-Act for 3 months and implemented for 12months. Data was collected and analysed monthly to monitor the progress of change implemented. Excel was used to calculate median while run charts were used to display and interpret process and outcome indicators.

Results:

From January to December 2023, a total of 892 clients registered at the Antenatal Clinic out of which 107 (12%) defaulted. The median percentage of pregnant women who received IPTp-3 after follow-up calls was 82%. By December 2023, uptake of IPTp-3 increased from a median of 69.7% to 87.2% against a target of 80%.

Conclusion:

The application of continuous quality improvement tools to identify root cause of IPTp-3 was relevant to increase IPTp-3 uptake amongst pregnant women.

Submission Date:

2024-09-16 07:30:29