



# *NATIONAL MOTHER, NEWBORN AND CHILD'S DAY*

Strengthening Maternal, Newborn and Child Health  
Care Services IN *KAMPONGCHAM PROVINCIAL  
HOSPITAL (CPA3)*

*Date: 21 Feb 2024. From 07:00 AM-05:00 PM ,Hotel Phnom Penh*

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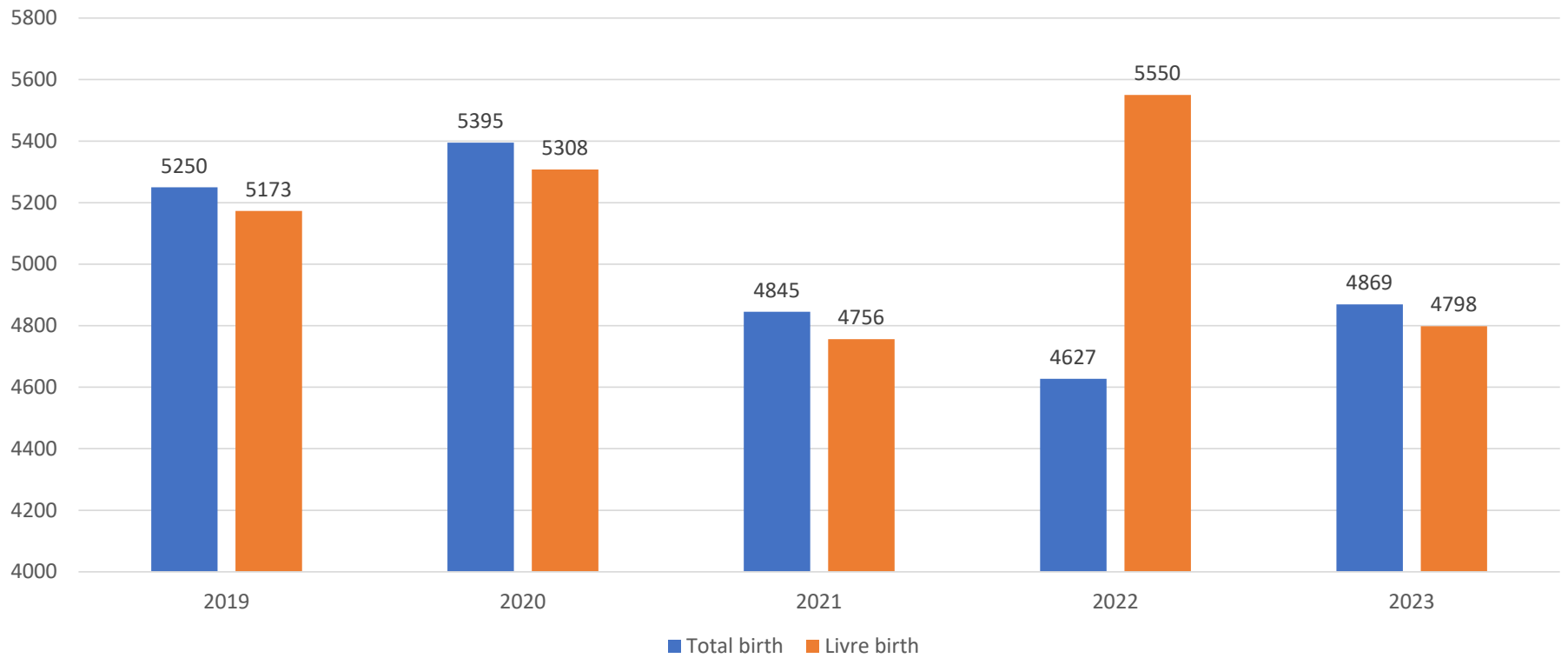
**ស្ថានភាពបុគ្គលិកសុខាភិបាលទាក់ទងនឹងការថែទាំម្តាយ. ទារកនិងកុមារ**

ផ្នែក	វេជ្ជបណ្ឌិត.ឯកទេស	បុគ្គលិក	សរុប
សម្ព័ន្ធ	៨នាក់(ឯកទេស២)	៤០(ឆ្មបមធ្យម,បរិញ្ញាប័ត្រ)	៤៨
កុមារ.ទារក	៩នាក់(ឯកទេស៣)	១៨(គិលា.បរិញ្ញា១)	២៧

# Progress Maternal Healthcare

# Delivery

Chart Title



# Report Rate

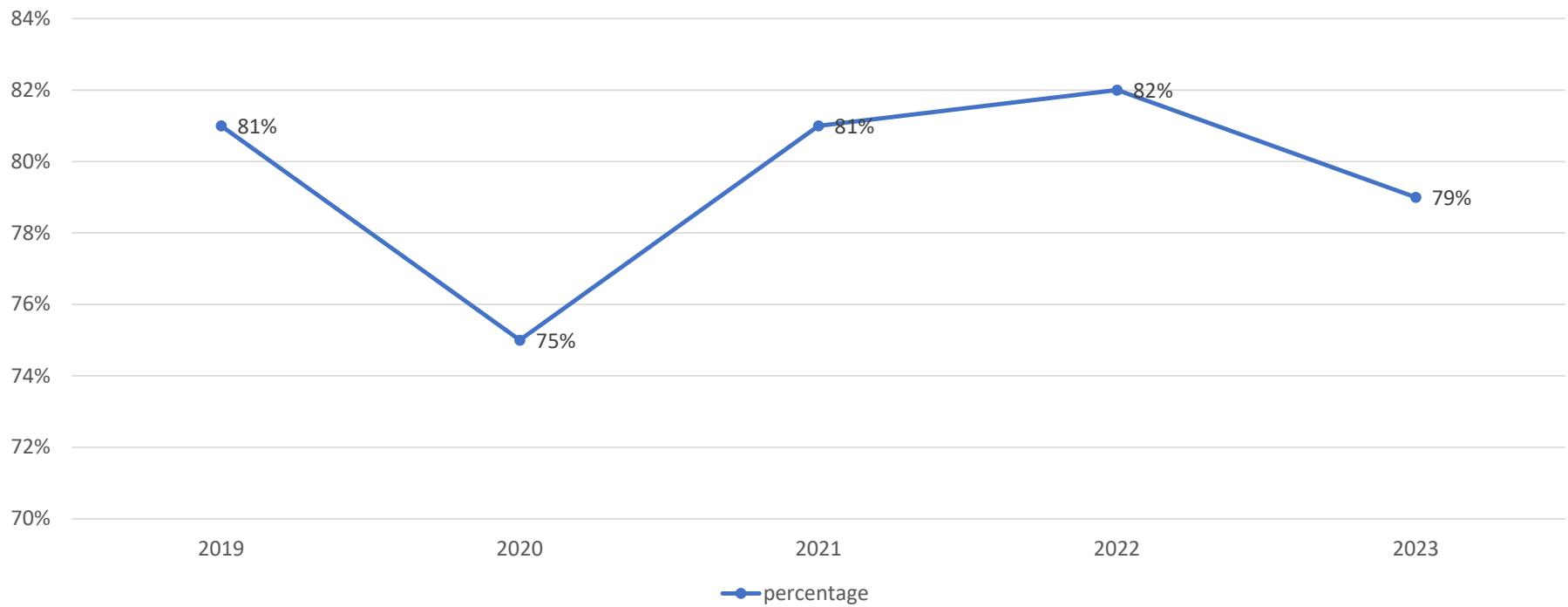
		2019	2020	2021	2022	2023
Stillbirth rate	$(C/A) * 1000$	13/1000 LB	16/1000 LB	13/1000 LB	17/1000 LB	15/1000 LB
Perinatal mortality rate	$((C+F)/A) * 1000$	24/1000 LB	16/1000LB	25/1000LB	30/1000/LB	26/1000LB
Neonatal mortality rate	$(G/B) * 1000$	11/1000 LB	11/1000LB	12/1000LB	13/1000LB	16/1000LB
C.Section rate(all LB)	$(I/A) * 100$	30%	29%	35%	33%	31%
Assist delivery rate(All LB) (Ventouse)	$(J/A) * 100$	3%	3%	4%	3%	4%
Low birth weight rate(LB)	$(K/B) * 1000$	86/1000 LB	93/1000LB	107/1000 LB	101/1000 LB	80/1000LB
Preterm rate (LB)	$(L/B) * 100$	7/100LB	8/100LB	9/100LB	6/100LB	6/100LB





# Other activity rate Skin to skin during C.Section

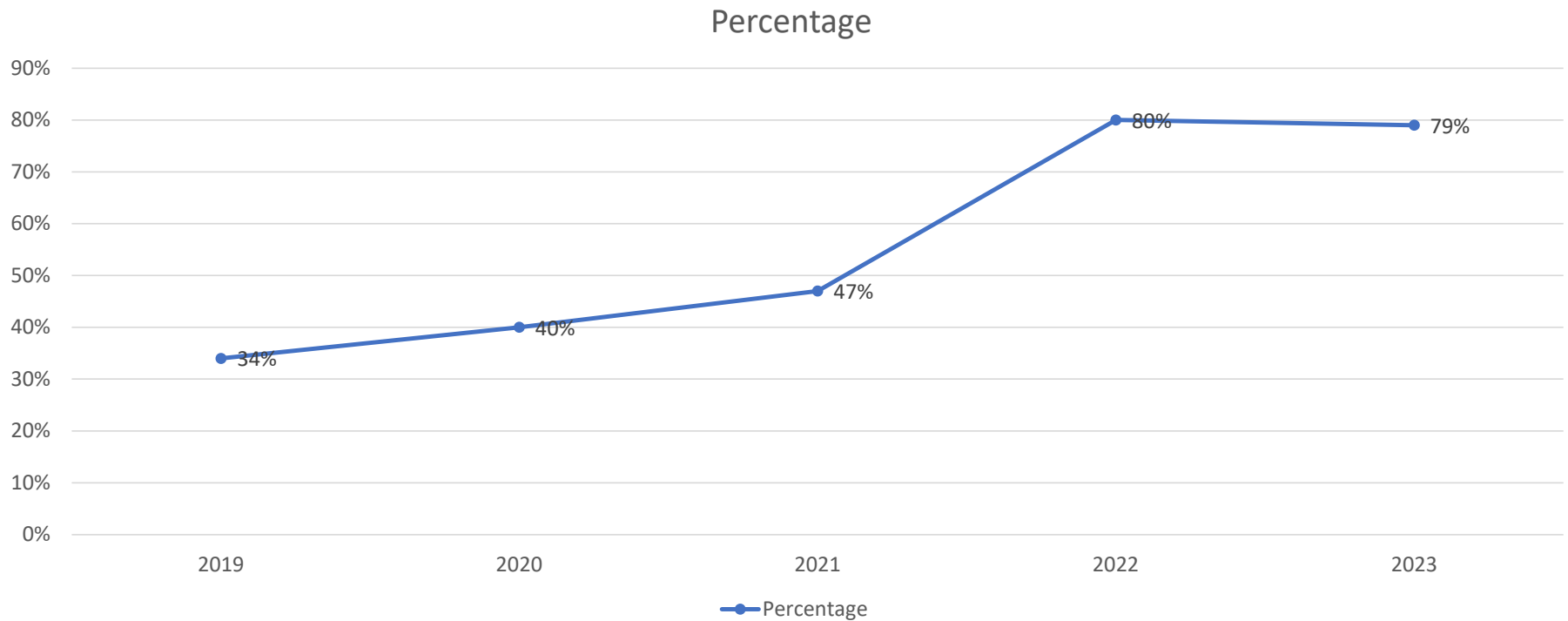
percentage



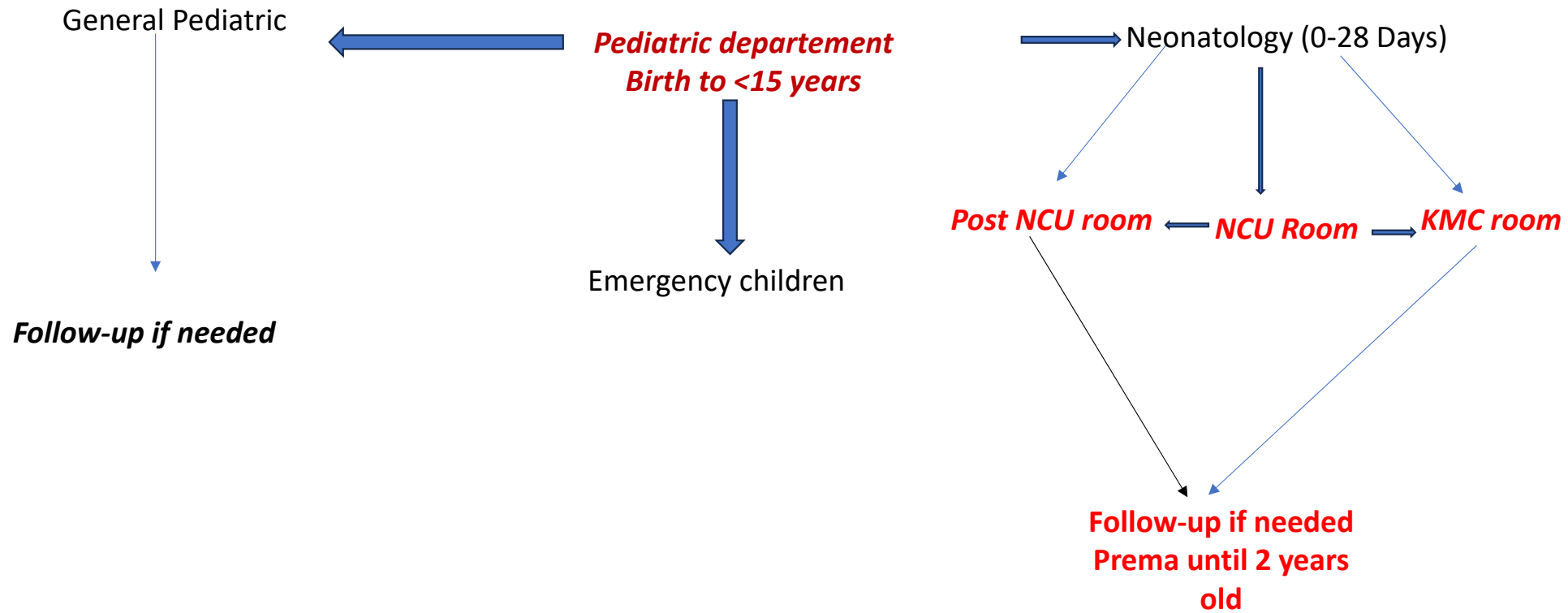


# Other activity

## Rate of KMC at maternity (2000-2499g)



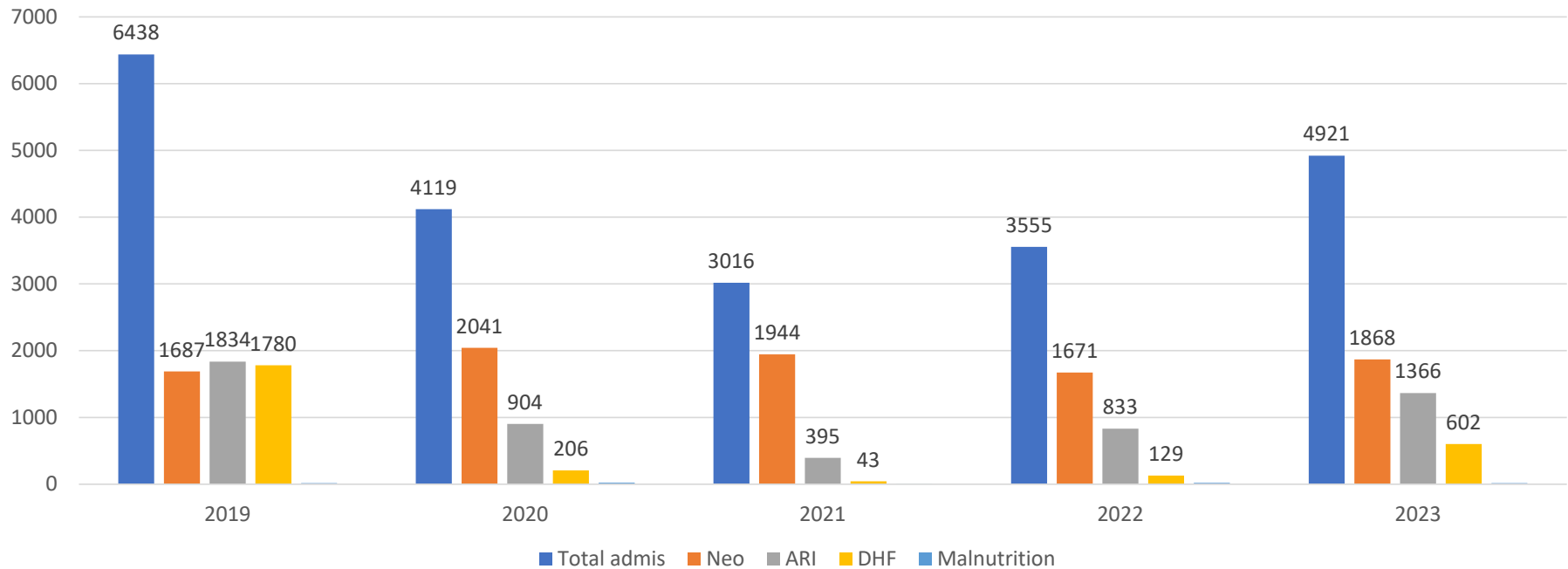
# Progress Neo-Child Healthcare



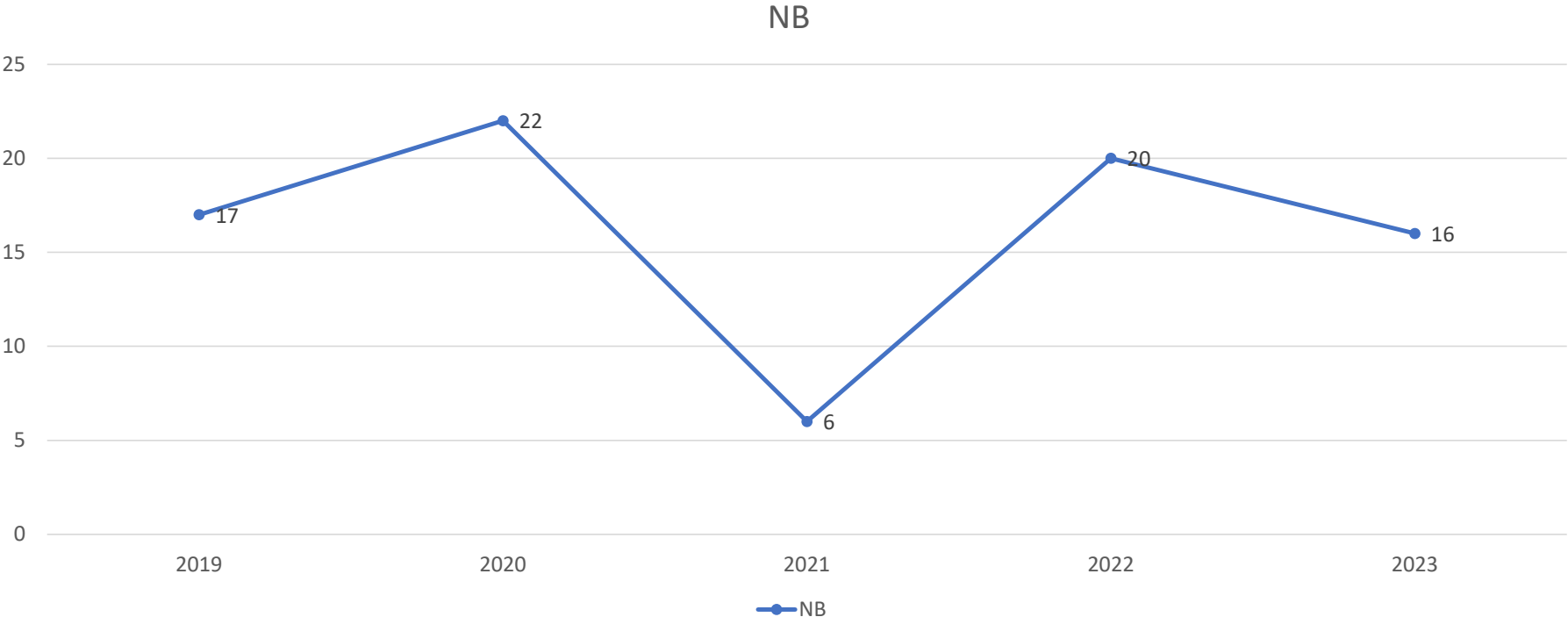
## ***Structure Pediatric department***

# Discharge in pediatric ward 2019-2023

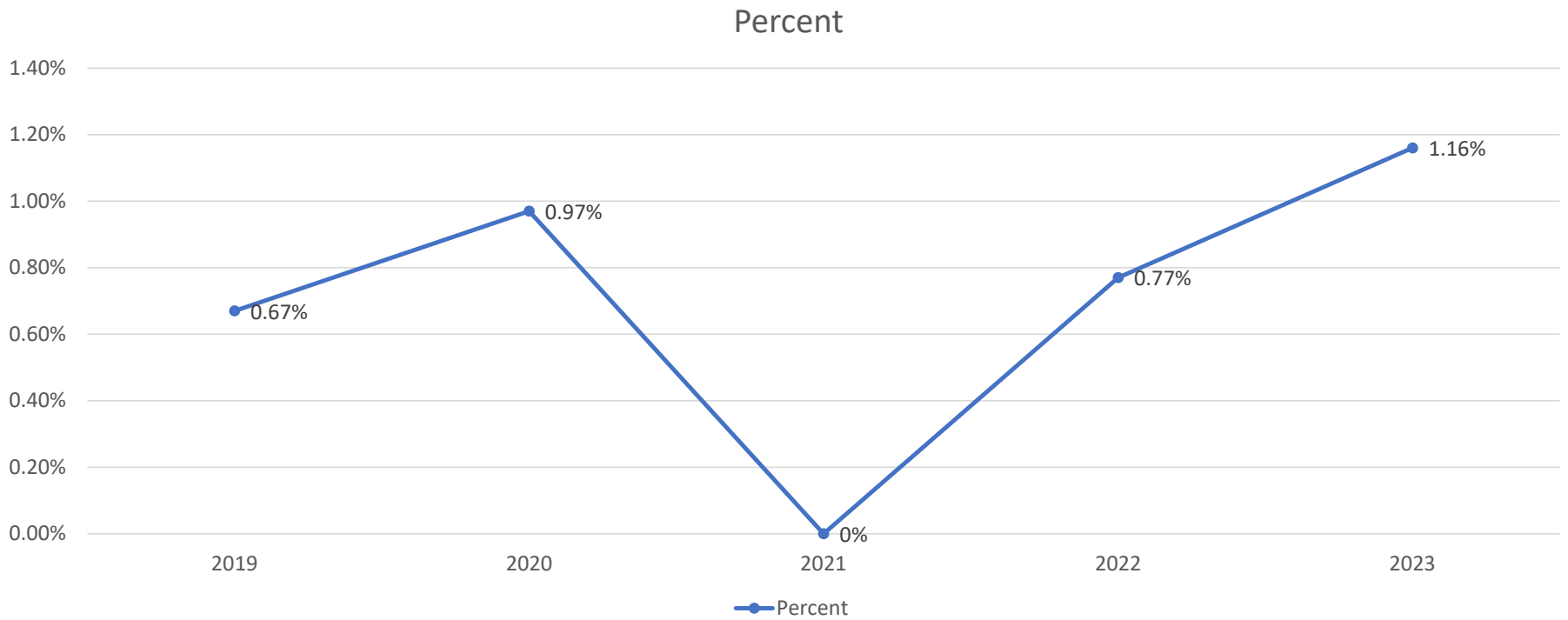
Chart Title



# Severe Malnutrition

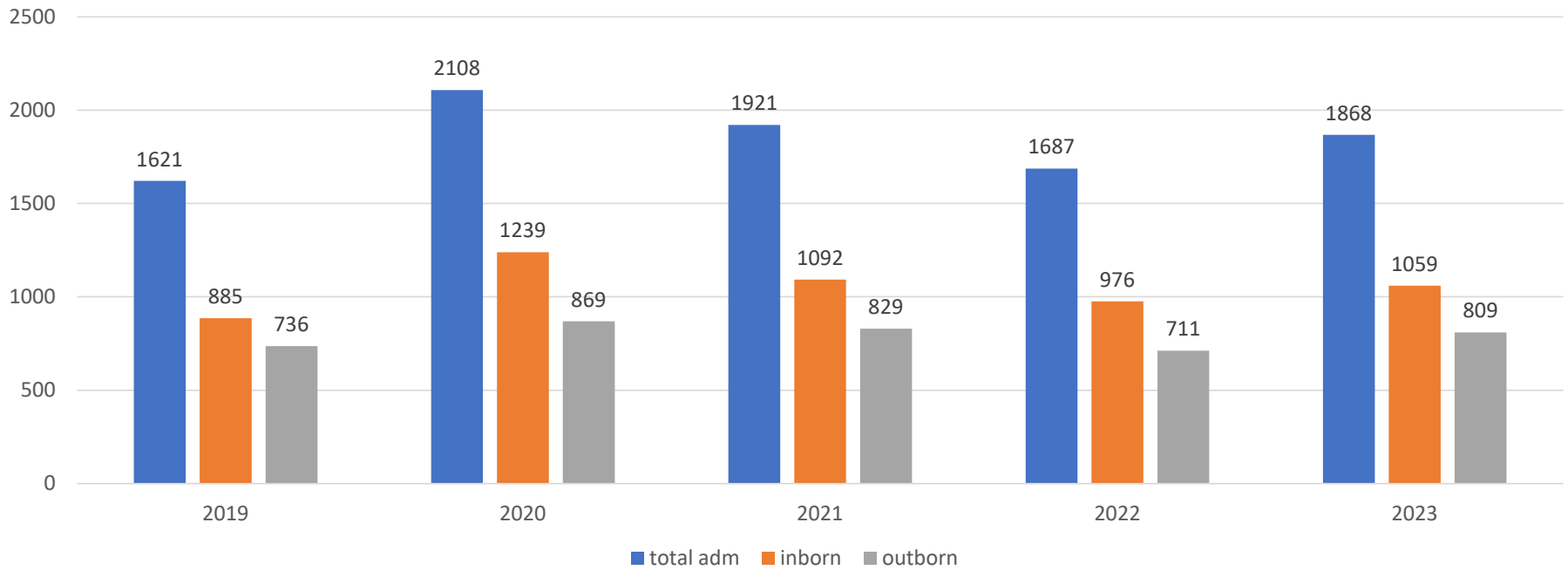


# Lethality rate of DHF 2019-2023



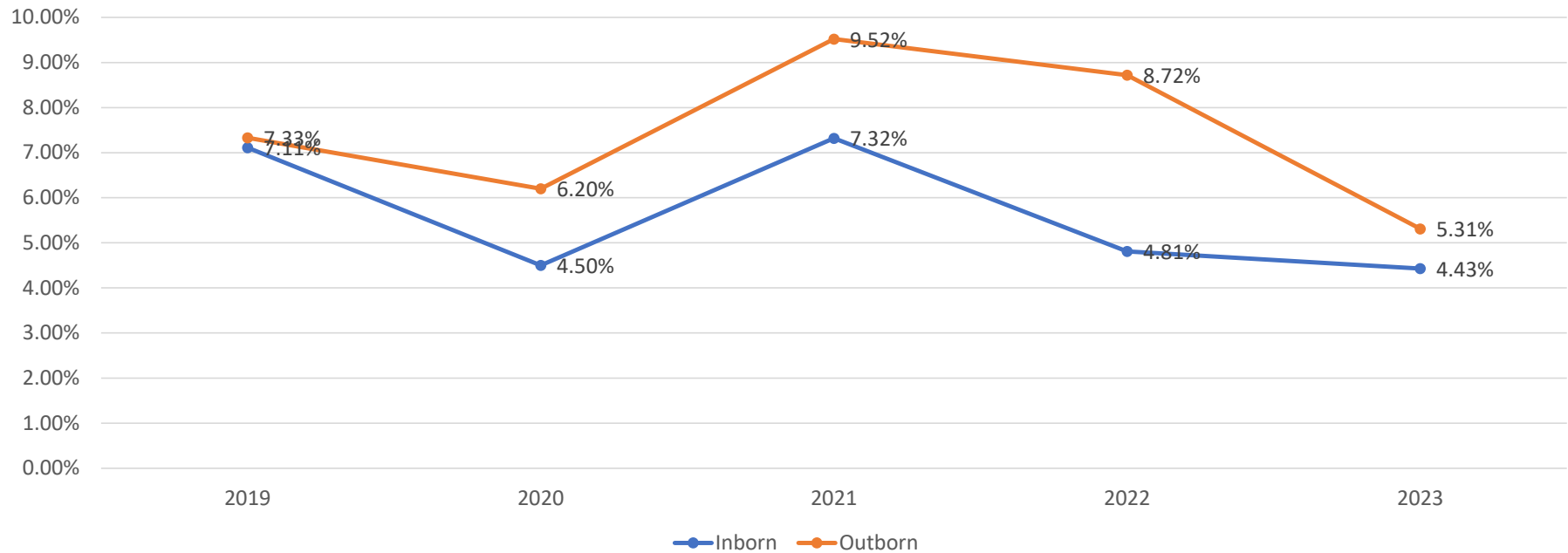
# Neo admission

Chart Title



# *Compare lethality rate inborn and outborn Nb of death cases in or outborn/total admis in or out born*

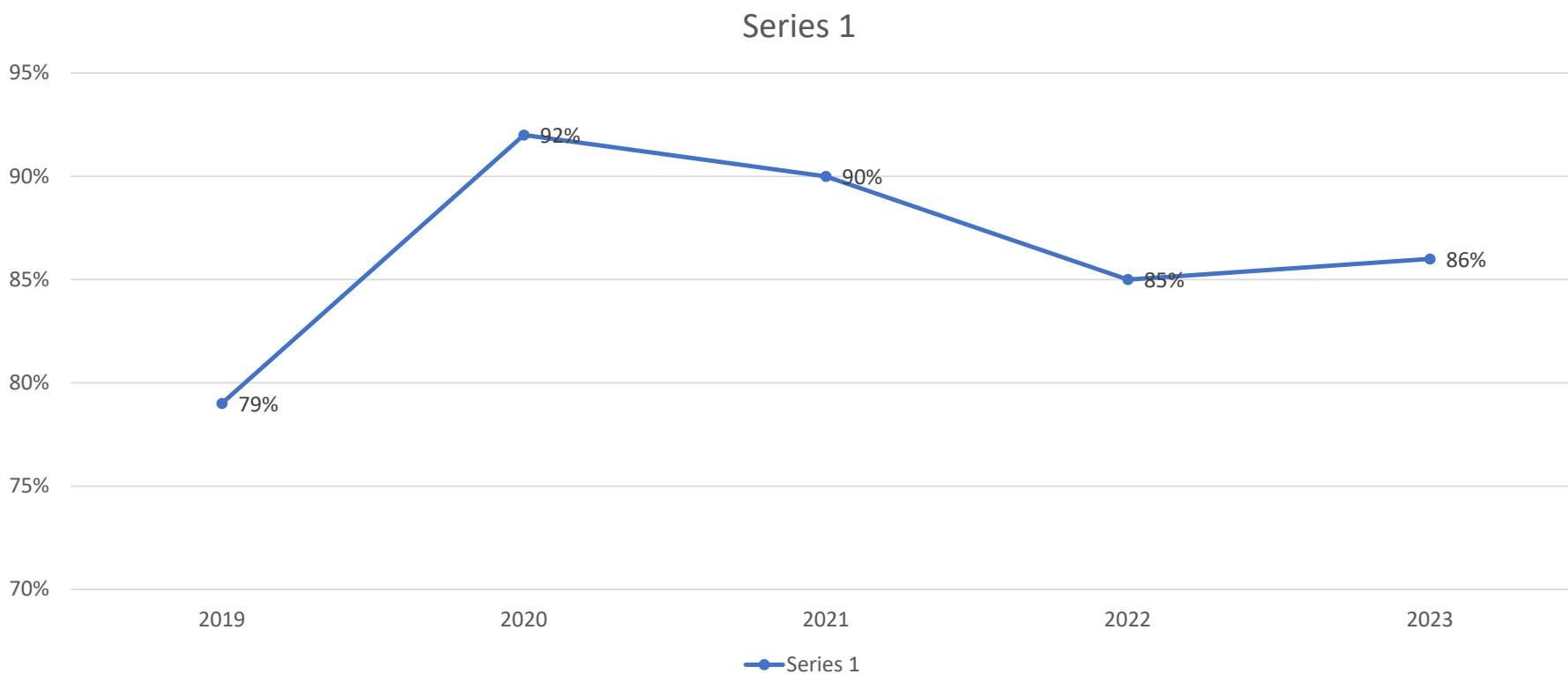
Chart Title





# Rate of KMC at Pediatric ward (KMC ROOM)

Rate=Received KMC<2500g/Eligible KMC <2500g





# Parent education 2 times/week



Challenge

# Challenge for maternal-Newborn

- INC coatching at private sector and CPA2,CPA1,HC (like lethality rate between inborn and outborn)
- Newborn transfer from outside especially private sector no apply national guideline (Safe motherhood, INC)
- New staff not yet received training and coaching IMCI for neonate
- Criteria for transfer in utero from outside (private,CPA1,CPA2,HC) to hospital present NCU
- Transportation Baby sick from outside no transfer letter
- Transport system for baby to hospital have a NCU

# Challenge for Children

- Young generation not yet training ETAT (Emergency Triage Assessment and Treatment) to reduce death < 24 h admission
- Growth chart to assessment growth and development and other disease put in pediatric document
- IMCI training to apply at HC
- MCH Hand book to use for newborn and children when they hospitalization
- Nursing process training for Nurse or new nurse (in service training)

# Future Plan

- Continuous meeting neonatal death review every month in team EENC-HCT
- Strengthen resuscitation newborn ,KMC, Breastfeeding, Follow-up baby
- Feed back to RH or HC to improve baby transportation or in utero transport to provincial hospital
- Team working Pediatric - Maternity
- Motivation staff
- Data store to report for PHD or Hospital Director