



## ABSTRACT

In Sri Lanka a consistent upward trend in the percentage of institutional deliveries has been noted during the past few decades. In 2003, 91.9 percent of births were institutional deliveries. Presently thirty one percent of childbirths occur annually in secondary care level base hospitals. The quality of intrapartum care provided in secondary care level institutions is an important area to be studied. As the quality aspects of care have not received adequate attention, this study was undertaken to assess some aspects of quality of intrapartum care and to carry out an intervention to improve quality care provided by nurses and midwives.

In six base hospitals in the Western Province of Sri Lanka a baseline assessment was made on the structure, process and outcome, with regard to provision of intrapartum care. Physical facilities available for providing care and the baseline knowledge, attitudes and skills of nurses and midwives were assessed on intrapartum care: maternal satisfaction with care provided was assessed as an outcome indicator.

Based on the findings of the baseline assessment, an intervention was carried out to improve knowledge, attitudes and skills of the nurses and midwives in providing intrapartum care. A before-and-after study design was used to evaluate the effects of the intervention. The effectiveness of the intervention on knowledge, attitudes, and skills was assessed three months after the intervention, using the same instrument and procedure used for the pre-intervention assessment. The sustainability of the effects was assessed six months after the intervention using the same instrument and procedure. Post

intervention assessment of maternal satisfaction with care, was conducted at the same time in two different samples of mothers.

Baseline results showed that the availability of physical resources for provision of intrapartum care was satisfactory in all institution studied. The quantity of human resources including medical and para-medical personnel was also satisfactory in all six institutions. The pre- intervention assessment indicated that nurses and midwives had inadequate knowledge, attitude and skills in the provision care and only 40 % of parturient mothers reported that they were satisfied with the quality of intrapartum care received.

Post-intervention results showed a marked improvement in all aspects of care attempted to enhance by the intervention. The total knowledge level showed that significant increase had occurred from 40.9 % at pre-intervention stage to 69.2% at three months after the intervention, and to 72.1 % at six months after the intervention respectively. The attitude scores also showed a significant increase from 50.1 % at pre-intervention stage to 67.8 % three months after the intervention and to 70.2 % at six-months after the intervention.

Both nurses and midwives in the study showed significant increase in the skills of provision of care. Communication skills had increased from the 31.7 % pre-intervention level to 76.7% at three months after the intervention and to 83.3 % at 6 months after the intervention respectively. Skills in the recording observation on the partogram had

increased from the 31.7 % pre-intervention level to 76.7% at three months after the intervention and to 91.7 % at 6 months after the intervention respectively.

Maternal satisfaction with care had increased significantly from 39.9 % at pre-intervention stage to 64.9 % at three months after the intervention and to 67.6 % at six months after the intervention respectively.

The study revealed the need to improve the provider competence and the feasibility of carrying out effective multidimensional intervention to improve the quality of intrapartum care. The intervention used in this study may be replicable in similar settings. A combination of training and supervision together with other methods of quality assurance, such as perinatal audits, is more likely to lead to sustainable changes.