

Maternity Care Today

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For the majority of women, Pregnancy and child birth are normal life event requiring minimal intervention. The care during this period in life is crucial for making it a fulfilling experience for the woman, family and society. Today the need for this care, to be safe, of high quality and participatory, is the concern of all involved in this field.

Care indicate commissioning the service within the context of managed care network and includes a range of provision for routine and specialized service. The network is a linked group of health professionals, institution for primary, secondary, and tertiary care, Social organization, working together in a coordinated manner. They work to ensure an equitable provision of high quality and clinically effective care.¹ There is a demand to improve quality of care that will provide emotional satisfaction to the couple, their relatives and care providers. Women are involved in planning their care with information, advice and support from appropriately qualified professionals.

Another aspect of designing the care is to start with the care of the woman from the pre-pregnancy stage through pregnancy, intrapartum and postnatal period including follow-up of selected few who had maternal illness during pregnancy. The fundamental of high quality care is treating women with respect and dignity. In addition to care network there are some other recommendations for high quality health care like using a life-course approach, universally adopting clinical standards, guidelines, manpower planning and mandating the reporting of outcome.²

Maternity matters stresses on service modeling and care pathway for improved service outcome. Reporting and recording of the service outcome is the need of the day using Clinical Governance which is a framework to make organizations accountable for improving the quality of their services. For the past two decades Maternity Dashboard had been in use and it is a tool to record "data

at a glance".³ This format aids in clinical governance and can be employed to monitor organizational performance.

Model of care cannot be considered in isolation, as the care mix and available workforce mix will impact upon what is available and appropriate for the woman being cared for. Talking of care, majority of pregnancy and child birth go through a normal process, the availability of a midwife who is a specialist of normal maternity care service will enhance the capacity of the workforce. Mr Ban Ki- moon, Secretary General of the United Nation writes in The State of The World's Midwifery 2011 "Using fresh data, information and analysis, the report identifies common challenges within and among countries while highlighting promising approaches to strengthen midwifery services around the world". It adds on "Ensuring that every woman and her newborn have access to quality midwifery services demands that we take bold steps to build on what we have achieved so far across communities, countries ,regions and the world".⁴

To conclude let me say that "A life-course approach to women's health care should be adopted utilizing every interaction a woman has with the health service, in particular Maternity Service, irrespective of age, to promote health and lifestyle rather than the firefight against disease and ill health". Time demands radical and appropriate shake-up of Women's health services promoting prevention rather than intervention.

REFERENCES

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