

# MINISTRY OF HEALTH

## WEST POKOT COUNTY

### MOTHER'S WAITING HOME-KIROR

**Description:** Mother waiting home ( KIROR) is a home outside their home and a home outside the health facility

<b>1. Title of Best Practices: Reduction of maternal mortality through mother's waiting home- /Kiror</b>	
2. Region of Operation in County: West Pokot County	
3. Description	[Expected Outputs] (BEFORE: what were the health challenges?)  High maternal and perinatal deaths, long distance to health facility.  Maternal complication such as ruptured uterus, sepsis, postpartum Haemorrhage, cephalopelvic Disproportion due to early marriage, Obstructed labour. Increased number of recto vaginal Fistula and Vesical vaginal fistula.
	[Processes] (What was done? how was it started, prepared, implemented?)  Carried out maternal audit at the facility level. Conducted assessment at the facility level. Identification of human resource, infrastructure, Health products e.g patient linen, beds  Implementation of mother friendly services and delivery of mother-baby package at discharge.  Establishment of the waiting homes. ( Kabichbich, Ortum and Kapenguria Referral Hospital
	[Outputs] (AFTER: what was achieved? Describe tangible changes.)  Increased skilled deliveries Reduced maternal deaths from 18 in 2012/2013 to 11 in 2014/2015.

	<p>Reduction of maternal and perinatal deaths, reduced maternal complications,</p> <hr/> <p>[Key Inputs] (human resource, and financial inputs, health products, health infrastructure, capacity building of the health care workers)</p> <p>The health workers keep on monitoring their progress at the health facility level. Partners support in construction of the maternity waiting homes. (Health Right international), Provision of the mattresses and linen.</p> <hr/> <p>[Conditions] (What were prerequisite? What was necessary to implement?)</p> <ul style="list-style-type: none"> <li>• Motivated and functional CHVs and TVAs</li> <li>• Devoted health workers and active partner.</li> </ul>
4. Effectiveness	<p>[Evidence/Reasons]</p> <p>It has led to increase in the number of skilled deliveries due to proximity to the health facility.</p>
5. Efficiency	<p>[Evidence/Reasons]: Partners donated beds and government provided other necessities such as food and water, security</p>
6. Relevance	<p>[Evidence/Reason]</p> <p>It let to reduction of late referral to the hospital hence reduced maternal mortality. The practice is in line with the national and county priorities outlined in the County Health Sector Strategic Plan, Kenya Health Policy</p>

	and the Vision 2030.
7. Sustainability	<p>[Evidence/Reason]</p> <p>It is widely acceptable by the community and results to ownership. There is support from CHVs and spouses, TBs referring mothers from the community.</p> <p>Enhanced referral mechanism from the health facilities to the Kiro.</p>
8. Duplicability	<p>[Evidence/Reasons]</p> <p>This practice can be replicated in some health facilities where there is need</p>
9. Others (if applicable, tick and explain)	<p><input checked="" type="checkbox"/> Partnership:</p> <p><input checked="" type="checkbox"/> Political involvement:</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Community Involvement:</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Ethical Soundness:</p> <p><input type="checkbox"/> Others</p>