Abstract

Gujarat state has made remarkable improvements in operationalizing First Referral Units in the state and Making them fully functional for averting maternal and child deaths in the state. The essential requirements for First referral units include provision for cesarean sectional delivery; availability of blood transfusion facility and availability of facility based newborn care. Although there are 163 centers operationalized, however only sixty seven percent of the centers are only equipped with all the three requirements. A major reason for FRUs to remain partial functional is due to lack of specialists’ manpower to provide emergency obstetric care. Despite having adequate numbers of Medical officers trained on Comprehensive Emergency Obstetric Care; Life saving anesthetic skills and Emergency Newborn care skills many of these officers are not posted at FRU centers after their trainings; shortage of staff is due to the trained staff working at Non-FRU centers or unavailable at FRUs due to miscellaneous reasons. The number of blood banks associated with FRUs is insufficient and guidelines were issued to set up Blood storage units at FRUs, however since the last four very few centers have obtained the FDCA authorized license, study revealed that many centers’ infrastructure work is pending since past four years. In order to bring down the maternal mortality rate and infant mortality rate, it is essential that these issues be strategically dealt by redeploying the specialists Staff working at non-FRU centers, adopting ways to increase the institutional deliveries, effective monitoring the performance of each center and staff posted at FRUs and introducing new innovative concepts such as the Surgeon Sahyog and Birth Waiting homes will help overcome the shortcomings and bring about overall quality improvement in the services provided at FRUs.