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AIIMS/PED/SCoE/2024/

दिनांक: दिसम्बर 2024

**State Centre of Excellence for Nutrition Interventions (SCoE4N)**  
**All India Institute of Medical Sciences, Raipur, Chhattisgarh**

## **Report**

# **एन.आर.सी टेलीमॉनिटरिंग मासिक रिपोर्ट**

**NRC Tele-Monitoring**  
**(October & November 2024)**



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## Tele- Monitoring in Nutrition rehabilitation center

### Background

State Centre of Excellence for Nutrition Intervention (SCoE4N), AIIMS was 2019 as management of children with complicated cases of SAM through the SMART Unit and lead for the technical guidance, development guidelines on strengthening Integrated Management of SAM (IM-SAM) children at Community & Facility level (NRC). Tele monitoring cells have been established under the State Center of Nutrition Intervention Excellence (SCOE4N). This cell will enable the team of well-trained doctors to visit 8-10 NRCs remotely every day to assess the patients (children with SAM admitted to NRCs), monitor the treatment and provide expert advice as necessary to improve the recovery rates. This will ensure a fortnightly visit to every NRC in the state and availability of experts for guidance on a daily basis.

### Key Findings:

- Tele monitoring of 46 NRCs has been completed in the month of October & November 2024.
- Out of the 46 NRC's supported through telemonitoring in the previous 2 months the following findings are:

### Indicators:

#### Human resource and capacity building (MO/Pediatrician, Feeding Demonstrator, Staff Nurse, Cook cum caretaker) Availability & Unavailability:

- It was observed that Adequate Staff nurses were not present in the NRCs, they were mostly placed/occupied in other ward, due to that Feeding demonstrator was overburdened as mentioned by them and night feeding was not practiced in most of the NRC's.
- There should be recruitment for vacant positions in the district, especially in the post of Feeding demonstrator, and adequate dedicated staff nurses should be done, liaisoning with the health department for the same will be done and letter to be issued.
- Daily rounds by MO/Pediatrician will be made ensured in all the NRCs for improving quality of care. Hence for better functionality a letter can be issued for the same.

#### Equipment and supplies (Digital Weighing scale, Infantometer, stadiometer, MUAC tape, Fridge, Measuring jars, water filter) availability & Functionality:



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- Unavailability and functionality of the anthropometric instruments/ measuring jars/ medicines in the following NRCs should be made available and functional as well. As to have more accuracy in the data. Also, DNC will follow up in those following NRC to ensure the availability of the same after liaising with BMO and other officials.

**Records and report (Admission criteria):**

- Adherence to the protocol for admission criteria of SAM children is not being followed in some NRCs, as enrollment of both SAM and MAM children was there as observed during telemonitoring session, for which Feeding demonstrator mentioned that in order to increase the bed occupancy status of the NRCs.
- The protocol for admission criteria in NRC should be followed as there was enrollment of both SAM and MAM children, which was oriented during telemonitoring session and will be followed up by the DNC posted in that district.

**Program efficacy (appetite test, regular examination, medicines, counselling) availability and unavailability:**

- It was observed that there was less enrollment of children in the NRCs in the month of October, for which Feeding demonstrator in that NRCs mentioned that it was due to festive season, but later enrolment was improved in the month of November.
- Unavailability of Potklor syrup and Magnesium Sulphate was seen in most of the NRCs, and the staff was not aware in preparing modified ORS to SAM children, Issues related to medications like dosage of MgSO<sub>4</sub>, PotKlor and MORS (Modified – ORS) were oriented to the staff nurses and feeding demonstrators during the telemonitoring sessions.
- Entry in the HMIS portal done by FD were seen incorrect and not routinely done (like daily weight gain, average duration of stay etc), which was supported via telemonitoring session, and same will be supported by District Nutrition Coordinators during supportive supervision visits.
- It was observed that technical support was required in the NRC's, so during telemonitoring session admission criteria, MUAC, oedema, 15% weight gain, bed occupancy criteria, appetite test, dosage of medicines, feeds was well briefed and discussed with the FDs and staff nurses.

**Feeding practices (feeding protocol), follow up, funds counselling & Play therapy:**

- Follow ups of the children getting discharged from NRC, was not done properly and timely, as parents were not able to visit NRC some due to geographical location or other issues, and FD mentioned that in such cases they were taking follow up in the NRCs by telephonic contact with AWW.



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- Accordingly, the follow-ups should be monitored by the FDs and encourage the parents to come to NRCs so that they can also get involved in the children's growth, development and nutrition.
- Developmental milestones, play therapy, kitchen gardening, counselling, and Supplementary suckling technique should also be focused, and was discussed during telemonitoring session.
- There is a need for supportive supervision in the following NRC's which was telemonitored in the month of October and November like: CHC Dongargarh, CHC Pondi uprora, CHC Gourella, CHC Bagicha, CHC Janakpur (Bharatpur), CHC Biharpur, CHC Pratappur, CHC Kusmi, CHC Kapu, DH Janjgir.

#### UNDER 6 Month:

- It was observed that protocol and admission for Under 6-month children has been initiated in some NRCs after telemonitoring and training sessions.
- Training related to IYCF/ MAA/ Under 6 management should be provided to better adherence to the protocol.
- Adherence to Feeding protocol should be followed, as well as adequate diet for lactating mothers should be provided and ensured at the NRCs.
- Encouraged Feeding demonstrator and Staff Nurses for continuous screening to enroll U6M children, breastfeeding, feeding criteria, nutrition for mothers, Supplementary Suppling Technique and play therapy during the telemonitoring session.
- Under 6 SAM children should be enrolled in the NRC's: As most of the NRCs, does not enroll Under 6 SAM children, for which a letter has been sanctioned from state as well as Orientation for the same has been started by lactational counsellor from State Centre of Excellence, AIIMS, Raipur to orient the FD and SN for the same.
- Screening of Under6 month children at OPD, IPD, at facility and home based visits and regular screening at field would help in screening and management of Under 6 Month SAM children.

#### RECOMMENDATIONS:

- **Admission Criteria:** should be followed as only those children who are identified as SAM or have any medical complications should be admitted to NRCs
- **Functionality of NRC:**
- Recruitment for vacant positions in the district should be done
- NRC should have daily rounds by Medical Officers/Pediatricians
- NRC staff should not be assigned anywhere else outside the NRC and Pediatric wards
- Night feeds should be provided in NRC, and it should also be monitored



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- Use of age-appropriate toys and Play therapy should be streamlined
- **Training:** Staff nurses and FDs should have refresher training on SAM management of under 6 months children
- **Data Accuracy:**
- No. functional beds in NRC should be collected from each district in accordance with calculating bed occupancy status and rates.
- From the following NRCs, telemonitored in the last two months

**BEST PRACTICES:**

- The best functional NRC's depending on the performance: Skills & Knowledge of the Feeding Demonstrator are: CHC Kartala, CHC Pathalgaon, CHC Khadgawa, DH Surajpur, CHC Bishrampur, CHC Rajpur, CHC Ramanujanj, DH Balodabazar and DH Bilaspur.
- During the telemonitoring sessions, mothers were aware of the child's nutrition status and showed a good participation in the counselling sessions conducted in NRCs.
- It was seen that all the FDs were aware of taking anthropometric measurements.
- A letter for U6M SAM management has been issued, and counselling for U6M SAM management has been started during our telemonitoring sessions. Enrollment of Under 6 Month children was observed in some NRCs and should be continued.

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