
A number of activities related to the Calmed programme have taken place at the beginning of 2017.
Here is a summary for the major visits/events.

1. **All India Congress of Obstetrics and Gynaecology (AICOG) in Ahmedabad, India** – This was a large conference attended by over 11 thousand registrants, during January 2017 (25th to 29th). I participated in a panel on Maternal Mortality Reduction and shared details of the Calmed programme. I met many academics, government officials, NGOs, clinicians, trainees and paramedical staff, shared views and suggestions.

   It was a privilege to share platform with many distinguished speakers including Sir Arul (Past President of FIGO, BMA and RCOG) and Prof. Dileep Mavalankar (Director of Indian Institute of Public Health) – they are supportive of the Calmed programme which received good exposure.

   It was a pleasure to receive interest and support from a number of distinguished senior Obstetricians from India, specially for a maternal and child health academy concept – these included Dr. Mala Arora, Dr. S. Basu, Dr. Hema Diwakar, Dr. Sheela Mane, Dr. Upendra Vasavada and Dr. Parikshit Tank. I shall continue the dialogue with them.

2. **Meeting with Gujarat Government Officials** – I was fortunate to meet Chief Secretary, Dept of Health and Family Welfare, Dr. Jagadip Singh, NHM Director Dr Prakash Vaghale, and Assistant Director Dr. Rakesh Vaidya for the purpose of explaining the last three years of Calmed VTT programme introduction in Gujarat and a suggested way to carry the momentum forward, in the form of a Maternal and Child Health Academy. I also requested sharing of already published data from the five target districts covering our Calmed Pilot programme for
3 years – 2014-17. Dr. Singh and Dr. Vaghale agreed to support our request. My sincere thanks are due to PDG Ashish Desai, Rtn. Dr. Upendra Vasavada, PDG Lalit Sharma and Dr. Ishita Mishra for facilitating this meeting.

3. **Visit to Indian Institute of Public Health** – we were welcomed by Director Prof Dileep Mavalankar. His department is now located at an impressive building with potential for extension. I was accompanied by Rtn Dr. Upendra Vasavada. We had discussions with Dr. Kranti Vora, Dr. Bharati Sharma, Dr. Bhabesh Modi. Additionally we were joined by Dr. Siddharth Nirupam of UNICEF. Discussions centred on role of Indian Public Health Institute Foundation, current programme and future aims which included maternal and child health care improvements. It was impressive to share glimpses of their work, including midwife training (Nurse Practitioners in Midwifery), support from Gujarat Government, international academic collaboration, international visiting faculty. It was interesting to see substantial elements of community Obstetrics and Community Gynaecology in their focus.

![Image of people at Indian Institute of Public Health](image_url)

**Dr. Mavalankar** agreed to send a forward concept note incorporating Obstetrics, Gynaecology, Public Health and Social Medicine as topics for education and research at the Academy level. Discussions should take place about linking this with clinical care in a Medical College (there are 19 Medical Colleges in Gujarat). Opportunities for collaboration with Obstetrical Societies (SOGOG) and Ahmedabad Obstetric and Gynaecologic Society (AOGYS) and Medical Associations should be explored. Funding support was not discussed in detail, but once the structure of the Academy is determined, approaches can be made to local business groups, Government, Rotary and external agencies.

4. **Rotarians and Professionals in Gujarat** – it is a privilege to acknowledge help given by many Rotarian friends, specially PDG Mohan Shah, PDG B Dholakia, Dr. Bhadarka, Dr. Hasmukh Chauhan, Dr. Nimish Pandya and many other staff members. A special thank you to many Rotarians from RC Ahmedabad Airport who welcome me and listened to the details of Calmed programme with interest in the late hours following their regular meeting. I participated in a National Polio Immunisation day in Ahmedabad – special thanks to my friend PDG Joitabhai Patel and PDG Lalit Sharma for their generous hospitality.
I also inducted a couple of new members (husband and wife) to the Rotary Club of Ahmedabad Midtown.

5. VTT visit to Bhuj- the third VTT visit took place from the 31st January to the 5th February, 2017. The VTT consisted of Rtn. Drs. Upendra Vasavada (from Mehsana, Gujarat), Dr. Ishita Mishra (from Mumbai) and myself.

We supervised 9 Master Trainers (including Dr. Prasanta Kumar Deka who is a staff member, Assistant Professor at the GAIMS). Due to short notice 4 invited master trainers could not join us. Master trainers trained 28 trainees (Medical officers, ANM and GNM) and 12 ASHA trainers, at the Gujarat Adani Institute of Medical Sciences (GAIMS). The training lasted 4 days with an extra day for ASHA trainers training.

Pre and post test scores of knowledge and skills showed highly significant improvement. There was good feedback from the trainers and trainees about the high quality of the training methods, and their positive impact in their practice. The Master trainers specially the Course Director Dr. Pratik Solanki and Deputy Course Director Dr. Parul Jani were very helpful. I believe Dr. Solanki has the ability to be a VTT member. My special thanks are due to Drs. Vasavada and Mishra for their untiring collaboration and support – they ran the whole show with commitment, dignity, and perseverance.

Dr. Kranti Vora from IIPH, Ahmedabad was a distinguished visitor – As an Obstetrician & Gynaecologist, she took interest in our training modules, use of simulators and videos. We discussed logistics of working together towards an MCH Academy in Gujarat.

Calmed Medal

Gujarat VTT – Bhuj, 2017
We presented all the master trainers (26) with medals for their commitment and efforts to promote Calmed model in their communities. Paul Harris Fellowship recognition was given to Rtn Upendra Vasavada (4 Sapphire PHF) and Dr. Ishita Mishra who is not a Rotarian. Dr. Gyaneshwar Rao’s special contribution was marked with a specially constructed plaque of Rotary Bandhu.

A lot of preparatory work was done very effectively, but with a late start. Special credit and heartfelt thanks must go to Dr. Gyaneshwar Rao, Prof Nimish Pandya (Superintendent and HOD Obstetrics and Gynaecology) and Prof Hasmukh Chauhan (HOD Paediatrics) gave much needed practical help – we are grateful.

The opening and closing ceremonies were attended by many Rotarian dignitaries, Government officials and VIPs, including the District Collector. Training materials, simulators and other equipment were handed over to the Rotary District 3051 via Dr. Rao.

Discussions took place about data collection, ongoing training programme and maternal death review (Maternal Death Surveillance Response-MDSR).

We experienced great Rotary friendship from many members of the District and Rotary Clubs including RC Bhuj Flamingo. Rtn Rasananda Rout and PDG Milind Vaidya deserve special mention. - we thank them for their hospitality.

Our thanks are due also to Mr. Ganesh Khandekar and Kishore Chavda from Adani and Dr. Dineshbabhi Dabhi, Chief District Health Officer in Bhuj.

6. Visit to Odisha - from Rotary contacts in Odisha, we were made aware of the urgent needs for maternal mortality reduction strategies in Odisha state (MMR 222, IMR 51) and of the great strides being made by the Government already (in Odisha 2020). A visit was arranged to get a first-hand knowledge of the status of maternal health in Odisha and discuss possible implementation of the Calmed model with adaptation suited to the local circumstances.

6.1. Meeting with Government Officials - I visited Odisha, met, and discussed the issues with Government Officials including the Principal Secretary Dr. Pramod Kumar Meherda, IAS, NHM Mission Director Ms. Shalini Pandit, IAS, Dr. Biswajit Modak, Senior Training Consultant, Dr. Mrityunjay Mishra, AD(MH), Dr. Binod Kr. Mishra (DFW) and Shri. Saumyasree Mahapatra (Consultant Maternal Health).

Principal Secretary Dr. Meherda showed considerable interest in our Rotary programme and then we had the opportunity to explain the Calmed Rotary programme in detail to NHM Mission Director Ms. Shalini Pandit.

Mission Director asked me to summarise the added value benefits of Calmed Rotary programme introduction through Rotary Government collaboration, over the existing Government programmes.

I was made aware of the details of the programme “Odisha State strategy for accelerated reduction of Maternal and Infant Mortality, Odisha 2020”.


Rotary leaders present included DG Brig Narayan Nayak, PDG Dhirendra Padhi IAS and Dr. Santosh Mishra.

DG Nayak and PDG Padhi took lead in the discussions with the Government and facilitated putting Rotary’s stance in supporting a partnership programme based on Calmed. My sincere thanks are due to them and many other Rotarians from Dist 3262.

I could put across that Calmed is a high quality strategic programme, based on the principle of countering medical, public health and societal/cultural issues associated with maternal mortality in low resource settings. We are convinced that the state initiated programme will be more effective in achieving its objectives, through support from the Calmed programme. Sustainability will be assured through simulation training, mentoring and return visits. I commented on the successful outcome of Calmed in two states in India.

*It is recognised that there is room for improving the acceleration of changes.*

6.2. Visit to SCB Medical College and Meeting with Academic staff – We were pleased to meet and discuss relevant aspects of MCH care and our programme with Prof Lucy Das, Prof Shayama Kanungo, Prof Purna Chandra Mahapatra. I visited the BEmONC training centre and discussed details of the training with several trainees present.

The Medical Officers undergoing BEmONC training are all enjoying their experience through lectures, videos and hands on training through traditional methods. Curriculum was a standard BEmOC (WHO) curriculum. Time constraint did not allow me to look at the detailed methods of skills training with simulators.
It was emphasised that because of the trainees access to a busy maternity hospital (approx. 3000 deliveries per month), much of the hands on training was through direct participation and management with real patients.

6.3. Visit to the Government Training Centre, Bhubaneshwar – Led by Dr. Biswajit Modak, and accompanied by Dr. Santosh Mishra, we visited the training facilities – these were good for introduction of Calmed Rotary VTT programme, with lecture rooms, break out rooms, office space, dining/refreshment areas and adjacent hostel accommodation (not visited). The location was central. In comparison, equivalent facilities in Cuttack would be less attractive.

6.4. Visit to Skills Laboratory, Nursing Training Centre, Bhubaneshwar – I was able to visit the premises and hold discussions with the Trainers (Nursing Tutors) – it is an excellent training centre for ANM, LHV and equivalent base level training.

6.5.1. Our Proposals - Our visits and discussions clearly demonstrate the great initiatives put in place by the Government of Odisha in moving towards it’s Odisha 2020 goal. The state has achieved IMR of 40 – congratulations to all concerned. We believe the position on MMR (near 222) leaves room for improvement towards the target of 70 in the SDG era – indeed it can be improved substantially, through Calmed programme introduction.

6.5.2. A partnership model is needed for a pilot programme. Furthermore, Rotarians and the Rotary Foundation (TRF) can work with the Government of Odisha in adding further initiatives including simulation training and resources through the Calmed template, working in a manageable target area (covering a population of 1 to 2 million) selected by the Government for its need.

6.5.3. The aims will be to work together to
   a. provide comprehensive RMNCH+A and Emergency Obstetric cover throughout the target population, through creation of a cadre of competent Training leaders who passed tests of knowledge, skills, and training ability, during the Rotary vocational training team visits.
   b. improve overall outcome and add sustainability of impact
   c. reduce disparity between areas of high and low mortality.
   d. add quality improvement through hands on professional skills training, leadership training and leadership mentoring (telephone/skype or telemedicine) creating a confident effective workforce, capable of managing emergencies in obstetric and new born care. The aim will be to create a technical support team for maternal and child care.
   e. support advanced training modules additional to BEmONC, as adopted by the Government, suitable for training leaders of the emergency obstetric team – examples include abnormal presentations including Breech, Episiotomy repair, advanced management of post-partum haemorrhage, twin delivery, vacuum extraction WHO Check list, obstetric emergency resuscitation team, Anti Shock Garment (NASG). The aim will be to create a low cost comprehensive labour ward simulator – “virtual labour ward”.

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6.6. Actions to be taken over a 3-year period –. We propose that

1. Government identifies a target District(s), population 1 – 2 million, which will be comprehensively resourced to correct deficiencies in terms of manpower, other resources including equipment, transport, and communication, to provide universal access to best possible care for every pregnant woman in this catchment area. The improvement will be phased in throughout the target area over a 2 -3-year period, as determined by the Government of Odisha.
2. For the first batch of VTT training, Government identifies 20 to 30 doctors who had had BEmONC training, and with perceived abilities to train others. They will be trained in advanced module of BEmONC training (total 6 days) using additional modules and advanced simulators- tested for knowledge and skills which are scored.
They then train a group of 30-40 Nurses and basic Doctors for 4 days and ASHA trainers for 1 day, identified by the Government.
3. Return training visits at 15 and 30 months will consist of training by local (Lead Trainers – please see Para 3.4) of doctors and nurses from the target areas.
4. Retraining will also be undertaken by the Lead Trainers under Government orders ,in a timed framework ,so that the whole target area is covered.
5. Government issues orders for leave, travelling and other allowances, cost of training including administrative support, hire of accommodation, audio-visual and other facilities.
6. Government issues orders for ASHA training cascade to cover the entire target area, in a timed framework., if any deficiency is identified.
7. Government appoints a Liaison Officer for our Calmed VTT programme implementation, in partnership with the Government, local professional groups, and Rotary.

7.Resources available from Rotary -

1. Funding for the Vocational Training Team preparatory work in the U.K., international and local travel, accommodation, subsistence and return visits.
2. Cost of equipment for training, all simulators, training videos, printing manuals, charts - these will be donated as legacies of the programme
3. Cost of programme transfer including giving flash drives for selected trainees.
4. Cost of developing additional programme – training Ambulance crew with emergency care with resuscitation, Antishock garment etc. (Optional)
5. Cost of additional programme implementation in the target area – Antishock garment, Anaemia Camp (Optional)

8. Benefits of the Programme – value added concept

We believe that implementation of the proposed programme will add values as follows:

a. Services of senior Obstetricians as VTT members including return visits- they will assist adaptation of Government’s training programme with the Calmed template.
b. All the training materials including high quality simulators, videos, manuals, charts etc. will be left as legacies – essential for further training and retraining.
c. Ongoing support of Trainers including mentorship by the VTT members
d. Funding contribution towards introduction of Emergency Obstetric Service in the target area, subject to agreement (Optional)
9. Rotary Club Visit – I enjoyed fellowship with Rotarians in RC Bhubaneshwar New Horizon (a new all women club). I spoke about Calmed and VTT programme. This generated a lot of interest and questions. I thank them for their hospitality and generous gift. I shall carry with me genuine friendship from our Rotary friends of Bhubaneshwar New Horizon Club – wish you success.

10. Further information:

www.calmedrotary.org

http://www.youtube.com/watch?v=dRtd1vWgiD4

www.rotarysoutheast.org

7. 11. Acknowledgement: We would like to thank our many collaborators and senior Rotary leaders in District 1120 for constant support and guidance. Our particular thanks are due to PDG Chris Barnett, DRFC for his stewardship and support. A generous District Grant made the reconnaissance trip to Odisha possible. I thank Rotary leaders in District 3051, District 3262 particularly PDG Dhirendra Padhi, DG Narayan Nayak, Dr. Mishra, Prof Dileep Mavalankar, Dr. Krant Vora and many Senior Leaders of Indian Institute of Public Health, Gandhinagar and many other collaborators and supporters of Calmed. Our thanks are also due to Principal Secretary Pramod Kumar Meherda, IAS, Mission Director Ms Shalini Pandit, IAS, Chief Secretary Dr. Jagadip Singh, IAS, NHM Director Dr Prakash Vaghale, and Assistant Director Dr. Rakesh Vaidya. My sincere thanks are due to PDG Ashish Desai, Rtn. Dr. Upendra Vasavada, PDG Lalit Sharma, PDG Joitabhai Patel and Dr. Ishita Mishra for their valuable support. I thank President Purabi Das of RC Bhubaneswar New Horizon, President Anil Patel Patel, RC Ahmedabad Mid town and Rotarians from RC Ahmedabad Airport, Ahmedabad Midtown and Bhubaneswar New Horizon for their welcome and hospitality.

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