Establishment of a Midwifery Obstetric Unit in Seshego hospital
Mantsi Annah Mathabatha, GNLA Fellow
Maphuti Rosina Khumalo, Leadership Mentor; Magdeline Kefilwe Thopola, Faculty Advisor

INDIVIDUAL LEADERSHIP DEVELOPMENT

**Goals:**

**Model the Way**
- Kick started our project through: delivery of elevator speech; presentations and scheduled meetings with CEO, nursing and district MCH managers as well as colleagues
- Inspire a Shared Vision
- Selection and assigning of tasks to project team
- Facilitated scheduled meetings with triads, team members, colleagues and leadership

**Challenge the Process**
- Present project plan to different stakeholders to gain support.

**Enable Others to Act**
- Conducted situational analysis and pilot study of the project to determine the feasibility of the project.
- Empowering of student midwives.

**Encourage the Heart**
- All stakeholders who were involved in conceiving of the idea and participated in the project were acknowledged.

**Outcomes:**

- Improve maternal and neonatal health through leadership.
- Efforts to increase access to evidence-based MOU to address barriers to quality improvement.
- Professional advancement

INTERPROFESSIONAL TEAM LEADERSHIP PROJECT

**Background:** Our QI Project focused on improving maternal and neonatal care through evidence-based practice and involvement of multidisciplinary team in health care.

**Purpose:** To establish functional MOU through acquired leadership skills

**Methods:** Situational analysis used as yard stick of identification of challenges encountered in maternity unit.
- Bench marking assisted in retrospective data collection at an MOU.
- Pilot study was conducted to assess the feasibility of establishment of the MOU.

**Outcomes**

**Implications for advancing Interprofessional Practice in Caring for mothers and babies**

Fostering increased provision of evidence-based, individualized, quality maternal and neonatal care.
- Implementing the culture of safety and respectful care to all women.
- Collaboration purposes.

Discussion:
- Establishment of MOU decisions to be guided by best available evidence of pilot study, principles of effective care, informed preference of women and their families, reduction of inappropriate referrals.
- Increase women’s access to appropriate midwifery care timeously thus reduce maternal and child morbidity and mortality rates.

**Sustainability Factors:**
- Need analysis pertaining to resources and equipment.
- Need to develop performance measurement, reporting and improvement

**Next Steps:**
- Increase community’s awareness of MOU care through media.
- Project team to serve as catalysts empowering others through workshops and seminars.
- In-service training on interpersonal and communication skills to create friendly environment.
- Align small tokens with proffering of best midwifery care.

**NUMBER OF NORMAL VAGINAL DELIVERIES CONDUCTED DURING THE PILOT STUDY**

<table>
<thead>
<tr>
<th>DAY</th>
<th>G1P0</th>
<th>G2P1</th>
<th>G3P2</th>
<th>G4P3-G5P4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>