			MSF Nut	rition T	rainin	g Package
	e 5 Session 16		Duration: 45 min	Reccomende		isite Sessions:
Admis	sion and Dischar	ge Criteria PLW		M1 - S1		
	al Objective:			M1 - S2		
		dmission and discharge crit	eria for pregnant and	M9 - S31		
	÷ , ,	nutrition programme.				
Targe	t Profiles:					
Must at	tend Su	pervisors, Nurses, Nutritior	n Assistants, CHW, Docto	ors		
Should	attend -					
Could a	ttend He	alth Promotor, Psychosocia	l worker			
Metho 1.	dology Overview Short introduction The facilitator expla treatment (SRH ser	with an exercise ains the admission criteria	on based on case studie used to decide if a PLW	needs to be admi		he delivery of care model for PLW: atient treatment (maternity, IPD, etc.) or in an outpatient
4.		ides feedback and does a w				
Time	Activities	<b>Description of Learni</b>	ing Activities		Method	Materials
5′	Activity 1: Introduction	Explanation of the learning session with a case study.		ction to the	Whole Group & pairs	Ppt: NP_M5_S16_AdmissionDischargeCriteriaPLW (objectives and example of case part)
10′	Activity 2: Admission and Discharge criteria	Facilitator explains the ad for PLW in a nutrition prog		harge criteria	Whole group	Ppt: NP_M5_S16_AdmissionDischargeCriteriaPLW (theoretic content part)
25′	Activity 3: Practice	Participants receive 7 card have to classify which deli for the case from those at	ivery of care model is m		In pairs	5 sheets of paper with one of the following written on each maternity, ATFC, TSFP, ANC/PNC (standard follow up) and discharge. Something to stick paper to the wall. NP_M5_S16_CaseStudiesCards
5′	Activity 4: Wrap up/take away	-Facilitator provides answ with the key messages. T			Whole group	NP_M5_S16_Takeaway_AdmissionDischargePLW NP_M5_S17_Takeaway_KeyContents



- (Ppt) NP\_M5\_S16\_AdmissionDischargeCriteriaPLW
- 5 sheets of paper/posters with one of the following written on each:
  - Inpatient maternity
  - ANC/PNC or ATFC
  - ANC/PNC or TSFP
  - ANC/PNC (standard follow up)
  - Discharge of nutrition program (follow up at PNC)
- To print and cut out:
  - NP\_M5\_S16\_CaseStudiesCards (1 copy of 7 cards per pair)
- Something to stick paper to the wall.
- To print or email: Takeaways
  - NP\_M5\_S16\_Takeaway\_AdmissionDischargePLW
  - NP\_M5\_S17\_Takeaway\_KeyContents

# Description of activities

#### **Activity 1: Introduction**

(Whole group/pairs/whole group, 5 minutes)

- (1 minute) Set Up
  - The facilitator will introduce the objectives of the module.
  - The facilitator will present a case using the PPT: NP\_M5\_S15\_Admission\_Discharge\_CriteriaPLW and will ask:
    - Is this pregnant woman malnourished?
    - Do you think she needs therapeutic nutritional care? Why/why not?
- (2 minutes) In pairs
  - $_{\odot}$   $\,$  The participants will work in pairs to answer the questions.
- (2 minutes) Whole group
  - The facilitator will ask the pairs to provide answers and will provide the correct answer if needed.

**Case study:** A pregnant woman who is under care in the Antenatal Care (ANC) service is being assessed for her nutritional and clinical status. These are the results:

- Age: 21 years old
- Weight: 43 kilos



- Height: 1,60 cm
- Good clinical status
- Psychologically stable

#### **Correct answer:**

• There is not enough information to know if the patient is malnourished and if she needs nutritional therapeutic care. To assess the nutrition status of PLW we need to measure the **MUAC.** 

### Activity 2: Admission Criteria into a nutrition programme (In-group, 10 minutes)

- The facilitator will use the Ppt to explain the admission criteria:

   NP\_M5\_S16\_Admission\_Discharge\_Criteria\_PLW criteria.
- Acute malnutrition in PLW is defined based on MUAC only. BMI is not used in pregnant women, as their weight changes throughout pregnancy, so BMI does not reflect their nutritional status. On the other hand, for Lactating women, BMI could be used but research suggests that MUAC is as useful as BMI in assessing risk of mortality, so in MSF we use MUAC for all PLW.
- Acute malnutrition is defined as MUAC < 230 mm.
- Screening for malnutrition by MUAC should be done at the first ANC/postnatal care (PNC) visit; if no ANC/PNC programme exists, screen all PLW in the health structure or nutrition programme where the PLW presents.
- The delivery of care model for PLW in a nutrition programme is the same for any other age or population group: inpatient and outpatient services which are linked and have specific admission criteria.
- Depending on the settings, PLW with acute malnutrition may receive nutritional treatment as part of a Sexual and Reproductive Health (SRH) programme (ANC/PNC, maternity) or in a nutrition programme (TSFP, ATFC), or in another kind of health facility (primary healthcare centre (PHC), outpatient department (OPD), adult inpatient department (IPD) etc)
- PLW can be admitted **directly into inpatient or outpatient care** according to the admission criteria.
- PLW with Severe medical complications will be admitted into inpatient care (maternity or IPD).
- Adolescent PLW (<19 years), regardless of their MUAC will receive nutritional treatment in outpatient care in order to support their maternal and foetal growth.

Criteria for admission into inpatient (maternity or IPD)	Criteria for admission in Outpatient treatment	Discharge
<ul> <li>PLW adults and MUAC</li> <li>230 mm</li> <li>AND/OR medical complication</li> <li>AND/OR she has no appetite (cannot eat the RUSF/BP5)</li> <li>She has already delivered and the baby needs admission for risk of malnutrition.</li> </ul>	<ul> <li>PLW adults: MUAC &lt; 230 mm</li> <li>PLW adolescents (&lt;19 years): Regardless of MUAC</li> </ul>	<ul> <li>Pregnant women:         <ul> <li>MINIMUM 42 days* in the nutrition programme after delivery</li> </ul> </li> <li>MND         <ul> <li>MUAC &gt; 230mm</li> </ul> </li> <li>MUAC &gt; 230mm</li> <li>AND             <ul> <li>No breastfeeding problems (child is gaining weight)</li> </ul> </li> <li>AND             <ul> <li>Stable physical and mental condition (with follow up arranged for ongoing problems if need be)</li> </ul> </li> <li>AND             <ul> <li>Stable physical and mental condition (with follow up arranged for ongoing problems if need be)</li> </ul> </li> <li>AND             <ul> <li>Tetanus Toxin (TT) vaccine up-to-date</li> <li>Lactating women                 <ul> <ul> <li>MUAC &gt; 230 mm (or until 6 months after delivery)</li> </ul> </ul></li> <li>MUAC &gt; 230 mm (or until 6 months after delivery)</li> </ul> </li> <li>No breastfeeding problems (child is gaining weight)</li> </ul> <li>No breastfeeding problems (child is gaining weight)</li> <li>AND         <ul> <li>Stable physical and mental condition (with follow up arranged for ongoing problems if need be)</li> </ul> </li> <ul> <li>Stable physical and mental condition (with follow up arranged for ongoing problems if need be)</li> </ul> <li>AND         <ul> <li>TT vaccine up-to-date</li> </ul> </li>

\*This period covers the post-partum period. It is also of relevance to women who do not breastfeed or have a stillbirth or early neonatal death and so are not then covered by the discharge criteria for breastfeeding women

#### **Criteria for referral from Inpatient to Outpatient:**

- Return of appetite
- $_{\odot}$   $\,$  Medical complications under control, no need for IM or IV medication  $\,$
- Outpatient care available and mother ready to go
- If the child was malnourished: criteria for exit from ITFC are fulfilled

#### Notes:

- It is necessary to do an assessment of the psychosocial state of the mother to avoid putting children under 6 months at risk of harmful care practices.
- For a woman who was in the nutrition programme during her pregnancy, there are two main options when she delivers:
  - 1. She starts to breastfeed but if still malnourished she is discharged as pregnant and newly admitted as a lactating woman into the PLW nutrition programme

2. She does not breastfeed/has a still birth/early neonatal death and so is followed up in the nutrition programme for a minimum of 42 days (6 weeks, the post-partum period). If she is still malnourished at that point, she should be referred to a nutrition programme for adults. For practical purposes, a woman who has been in the programme for 3 months (SINCE DELIVERY) without

nutritional recovery should be categorised as a non-responder (all attempts MUST be made to find out why she is not responding to treatment)



### Activity 3: Practice (In pairs, 25 minutes)

(In pairs, 25 minutes

- (5 minutes) Set Up
  - Participants are organised into pairs.
  - $_{\odot}$   $\,$  The facilitator organises the room with 5 areas with 5 posters hanging on the wall.
    - 1) Inpatient maternity or IPD
    - 2) Outpatient treatment in ANC/PNC
    - 3) Outpatient treatment in ATFC/TSFP
    - 4) ANC/PNC (standard follow up)
    - 5) Discharge from nutrition programme (follow up in PNC)
  - (15 minutes, in pairs) Activity
    - Each pair receives 7 printed case cards:
       NP\_M5\_S16\_CaseStudiesCards
    - They must classify the patients according to the type of needs they have and the service that is most appropriate for those needs and justify why.
    - $\circ$   $\;$  Facilitator asks participants to stick each case on to the correct service on the wall.
  - (5 minutes) Whole group
    - The facilitator asks the participants to justify each case and provides the correct answers if needed.

#### Case 1: Pregnant woman in India

- A 18-year-old pregnant woman is being followed-up at the ANC service
- She does not present any medical complications and has a good appetite
- There is no nutrition programme available
- Her MUAC is 235 mm

#### **Question:**

How do you classify this patient according to the different categories on the wall?

**Correct answer:** She is adolescent PLW without medical complications → **Outpatient treatment in ANC/PNC** 

#### Case 2: Pregnant woman in Nigeria

- A 20-year-old pregnant woman comes spontaneously to the triage at the hospital.
- She has difficulty breathing and fever
- Her MUAC is 186 mm

#### Question:

How do you classify this patient according to the different categories on the wall?

**Correct answer:** She has AM with medical complications → **Inpatient maternity** panel

#### Case 3: Pregnant woman in Ethiopia

- A 24-year-old pregnant woman is being followed-up at the ANC service
- Her clinical condition is ok
- Her malaria test is positive
- Her MUAC is 230 mm

#### **Question:**

How do you classify this patient according to the different categories on the wall?

**Correct answer:** She is not malnourished, she will be treated for the simple malaria at the ANC**→ ANC/PNC panel** 

#### Case 4: Lactating woman in South Sudan

- A 30-year-old lactating woman is being assessed for her nutritional status at the PNC service
- Her baby is 4 months old
- Her clinical condition is ok
- A nutrition programme is available (ATFC and TSFP) in this area
- The MUAC is 210 mm

#### Question:

How do you classify this patient according to the different categories on the wall?

Correct answer: She has AM→ Outpatient treatment in ATFC/TSFP

#### Case 5: Lactating woman in Niger

- A 22-year-old lactating woman was admitted into the IPD the because she had AM with medical complications.
- After 4 days in the IPD, the MUAC of the mother today is 192 mm and she is clinically stable with a good appetite.
- Her 3-month-old infant was also malnourished and was admitted into the ITFC with some problems being able to breastfeed and pneumonia. The child still is not putting on weight, even with extra nutritional support via supplementary milk

#### **Question:**

How do you classify this patient according to the different categories on the wall?

**Correct answer:** The mother has the criteria to be referred out to the outpatient treatment, but the child needs to stay in the ITFC,  $\rightarrow$  **Infant admitted in the ITFC and his mother will be with him receiving her nutrition treatment** 

#### Case 6: Lactating woman in Bangladesh

- A 27-year-old lactating woman is being treated for AM at the ATFC
- Her MUAC is 240 mm
- The baby is 6 months old and gaining weight correctly
- The TT of the mother is up to date
- She (the mother) is in good clinical condition

#### **Question:**

How do you classify this patient according to the different categories on the wall?

**Correct answer:** the mother meets the criteria for discharge, she is `cured' as her MUAC is >230mm → **Discharge panel** 

#### Case 7: Pregnant woman in Sudan

- A 23-year-old pregnant woman is receiving nutritional treatment at the ATFC because she was admitted with a MUAC of 180 mm
- After two months of treatment, her MUAC is 240 mm
- She is at her 8<sup>th</sup> month of pregnancy
- The TT of the mother is up to date
- She (the mother) has good clinical condition

#### Question:

How do you classify this patient according to the different categories on the wall?

**Correct answer:** the woman should continue the treatment at the ATFC until at least 42 days after delivery + no breastfeeding problems, + MUAC > 230 mm+ TT up to date → **Outpatient treatment in ATFC** 

#### Case 8: Pregnant woman in Mali

- A 29-year-old pregnant woman is receiving nutritional treatment at the ATFC because she was admitted with a MUAC of 185 mm
- She delivered after 1 month of treatment at the ATFC.
- The baby is 1,5 months old now and he is in good condition and with good weight gain and the mother is breastfeeding well.
- The MUAC of the mother is now 220 mm
- The TT of the mother is up to date
- She (the mother) is in good clinical condition

#### Question:

# How do you classify this patient according to the different categories on the wall?

**Correct answer:** the woman should continue the treatment at the ATFC until her MUAC > 230 mm → **Outpatient treatment in ATFC** 

However, at the monitoring system, she changes the status from pregnant to lactating. She is discharged as pregnant as "**others**" and she is admitted as lactating: "**new** admission"

## Activity 4: Wrap Up

(Whole group, 5 minutes)

- (5 minutes, whole group) Facilitator does a wrap up providing overall feedback on the session.
- Acute malnutrition (AM) in PLW is defined based on MUAC only (MUAC < 230mm).</li>
- Screening for malnutrition by MUAC should be done at the first ANC/PNC visit (and at every subsequent visit); if no ANC/PNC programme exists, screen all PLW in the health facility or nutrition programme where the PLW presents
- PLW can be admitted **directly into inpatient or outpatient** according to the admission criteria they present with
- PLW with Severe medical complications will be admitted into inpatient care (maternity)
- Adolescent PLW (<19 years), regardless of their MUAC will receive nutritional treatment in outpatient care in order to support their maternal and foetal growth.
- In settings where there is no nutrition programme in place (TSFP, ATFC), all AM PLW should receive nutritional treatment at any general or specialised health facility (OPD, ANC/PNC, maternity)
- The **discharge criteria** for PLW considers all the following aspects:
  - 42 days after delivery for pregnant women (covering the post-partum period)
  - MUAC > 230 mm (or until 6 months after delivery if MUAC criteria is not reached)
  - No breastfeeding problems (child is gaining weight)
  - Stable physical and mental condition (with follow up arranged for ongoing problems if need be)
  - TT vaccine up-to-date
- It is necessary to do an assessment of the psychosocial state of the mother to avoid putting their infant at risk of harmful care practices



# Takeaways

Facilitator gives handout for participants to take away or emails them the PDFs to use on their phones.

- NP\_M5\_S16\_Takeaway\_AdmissionDischargePLW
- NP\_M5\_S17\_Takeaway\_KeyContents



When the ward is quiet, for example after lunch, the medical team can practice using the admission criteria using the cards of the case studies and the printed "quick tips" (takeaway)

It is recommended that the nutrition admission criteria for PLW for an ATFC, TSFP and for an maternity are hanging on the wall of the admission area.

