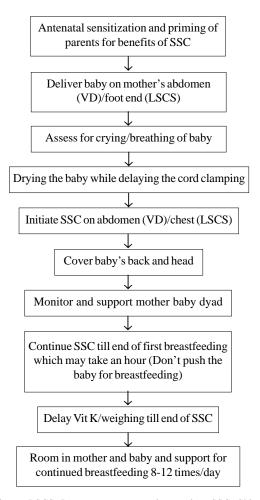


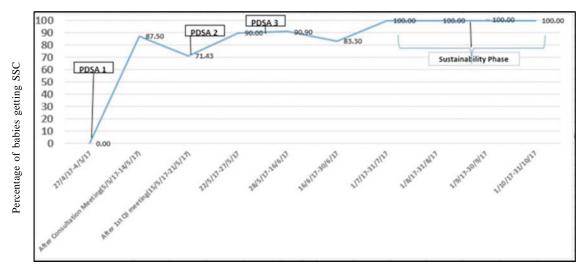
OBG: Obstetrics and Gynecology; SSC: Skin-to-skin contact: OT: Operation theater

Web Fig. 1 Fish Bone analysis.



VD: Vaginal delivery; LSCS: Lower segment cesarian section; SSC: Skin-to-skin contact.

Web Fig. 2 Algorithm of providing Skin-to-skin contact.



SSC: Skin-to-skin contact.

WEB FIG. 3 Run Chart.

WEB TABLE I PDSA CYCLES UNDERTAKEN AND THEIR OUTCOMES

PDSA	Duration	Problem identified	Action taken	Babies receiving SSC *(%)	Remarks
PDSA 1	5/5/17-20/5/17	Lack of awareness about benefits of SSC and EIBF among doctors and nurses. Lack of Policy.	Consultation meeting organized. Knowledge sharing and sensitization done. Policy regarding SSC and EIBF made.	87.5 (14/16)	Sensitization of healthcare staff and clear policy helped in initiation of practice of SSC
PDSA 2	21/5/17-14/6/17	1. Mothers were not sensitized and were non-compliant.	1. Mothers counseled using standard counseling template at admission to LR and during transfer to OT	90(18/20)	Counseling improved maternal compliance Clarity on position of pediatrician smoothened process.
		2. Confusion regarding position of pediatrician around OT table while initiating skin to skin contact and baby on mother	2. head end position was favoured for pediatrician and across mother's chest for baby		
PDSA 3	15/6/17-30/6/17	Short duration of SSC; no assigned person to continue SSC	Lactation nurse identified to double up as transition tnurse till mother shifted out of OT	83.3 (20/24)	SSC given to over 80% babies but duration continued to be a problem

^{*}Babies Who Received SSC, Babies eligible to receive SSC.