



**Extending neonatal
care beyond the
barriers of distance
and disadvantage.**

**Annual Impact
Report 2023-24**



EXECUTIVE SUMMARY:

In-Depth Analysis of NICU Cases Supported by NFI

- Total NICU babies supported – 55, out of which 13 were Twin babies. Male 29: Female 26
- 46 babies were from Motherhood Hospitals, 6 from Rangadore Memorial, 2 from Happy Shine and 4 from Amma Hospital.
- E-NICU hospital -2 (Happy Shine & Amma Hospital).
- Families represented the low-income section, 32 BPL card holders, 5 PHH, 1 AAY, and 17 non-BPL however were within NFI identified income group. Most of them came from farming and daily wage backgrounds.
- The lowest birth weight is 600 grams and 26 weeks gestation. These were Twins born with multiple complications.
- Major clinical complications witnessed in the babies are Birth Sepsis, Respiratory Distress & Hyperbilirubinemia
- A total of 36 cases were rejected on the grounds of financial criteria not being met and delay in submission of proper documentation.
- 1 neonatal death due to various complex conditions.
- More than 500 donors within the NFI network.



**DO NOT GIVE UP!
FOR THE
BEGINNING
IS ALWAYS THE
HARDEST!**

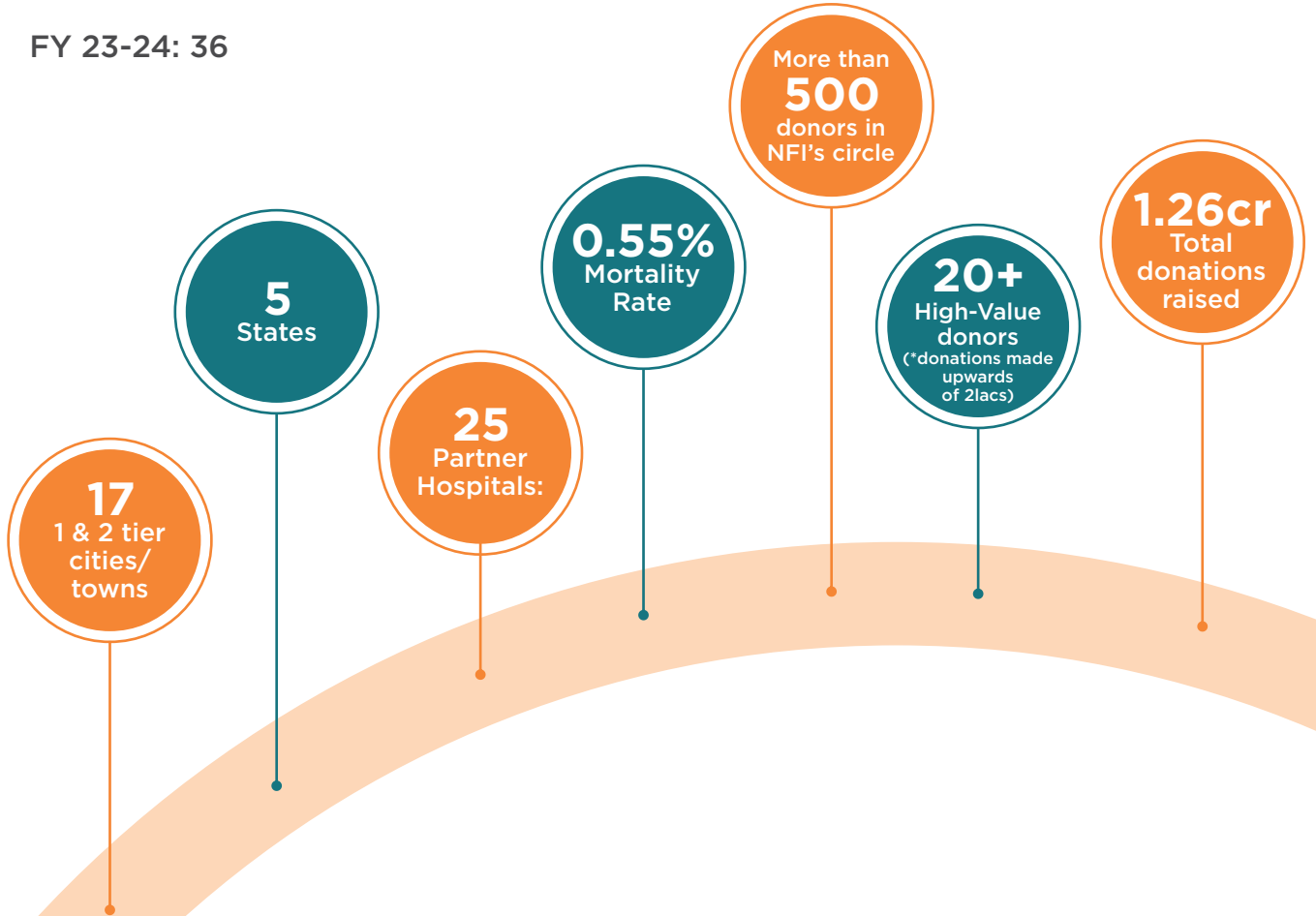
#walkwithnfi



OUR JOURNEY SO FAR...

Total number of NICU babies supported: 55

FY 23-24: 36



Latest Hospital Partners



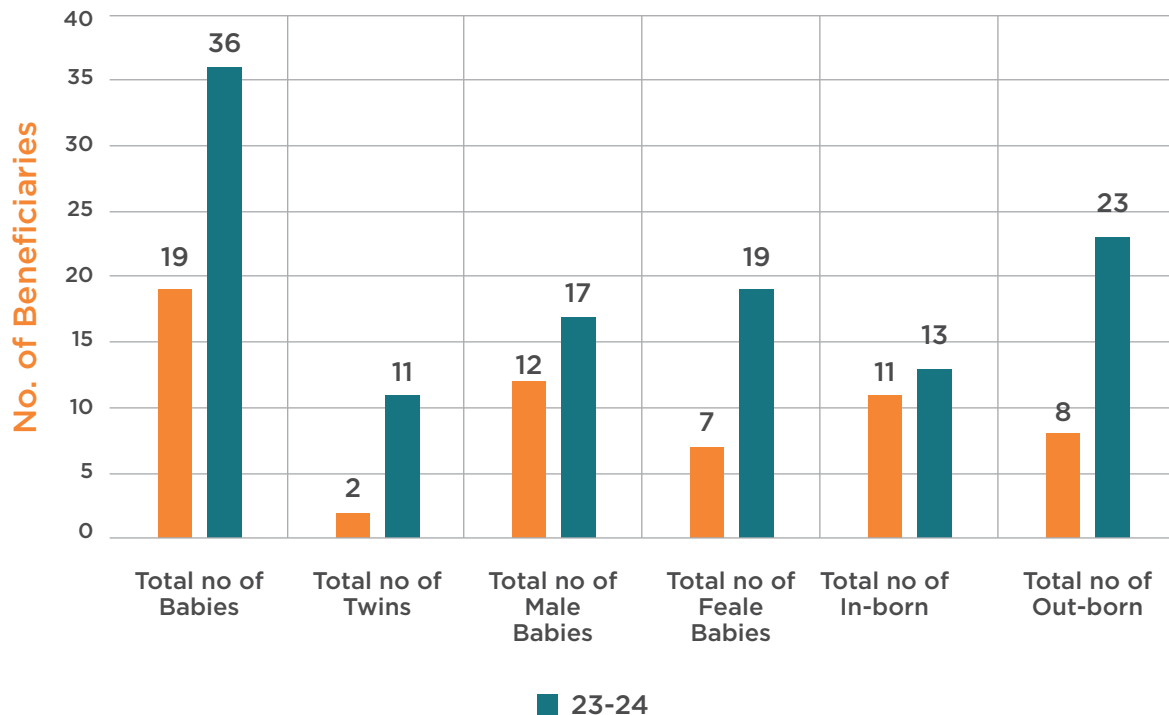
CONSOLIDATED BENEFICIARY DATA

FY 2023-2024

Total No. of Babies:	36
Twins Babies:	11
Male Babies:	17
Female Babies:	19
In-Born:	13
Out-Born:	23



NFI - Consolidated Data



VOLUNTEER GROUP INITIATIVE (BEN - I)

- 30 + Newborn Kit (Knitwit blankets, nutrition leaflet, Greendigo baby suit) is handed over to NFI Beneficiaries
- Continuous counseling of the parents during the NICU stay and beyond



1st Birthday Celebration Baby of Devika

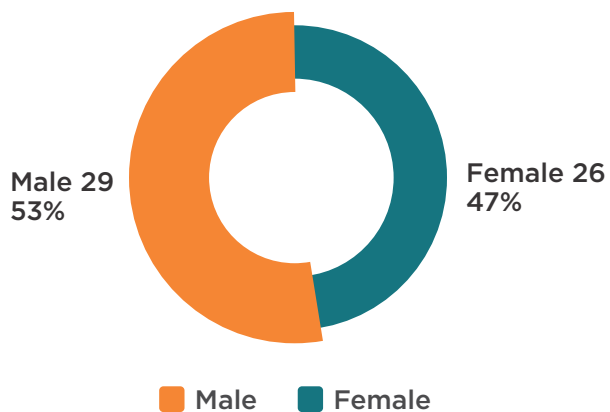
NFI KIT



CONSOLIDATED BENEFICIARY DATA

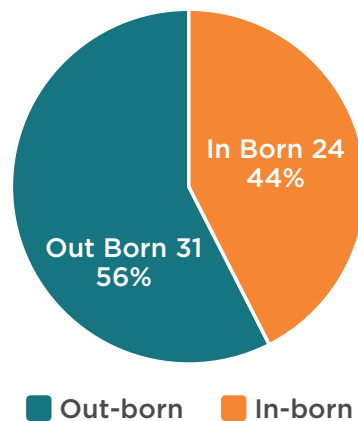
Gender

Male babies: 29
Female babies: 26



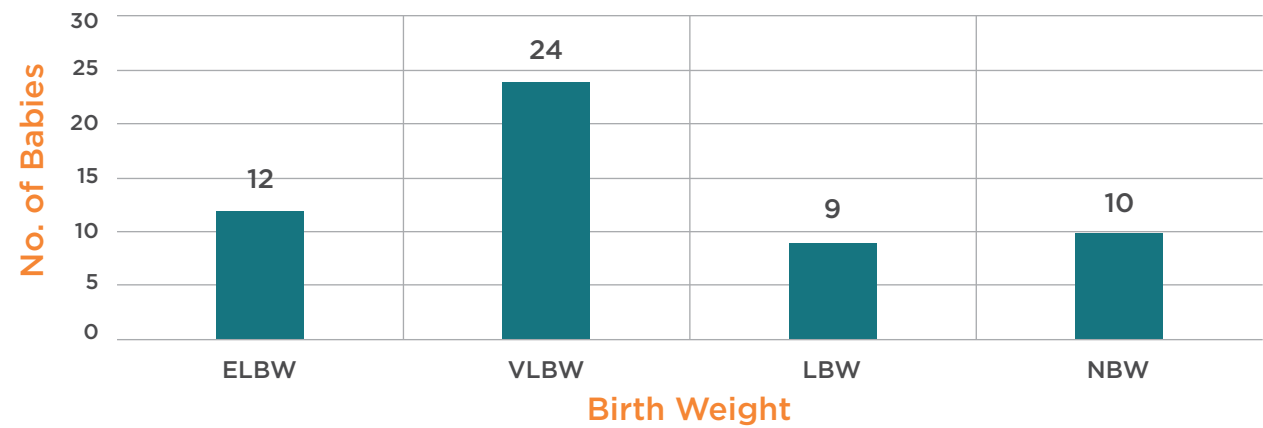
Born: In/out

In-born: 24
Out-born: 31



Birth Weight

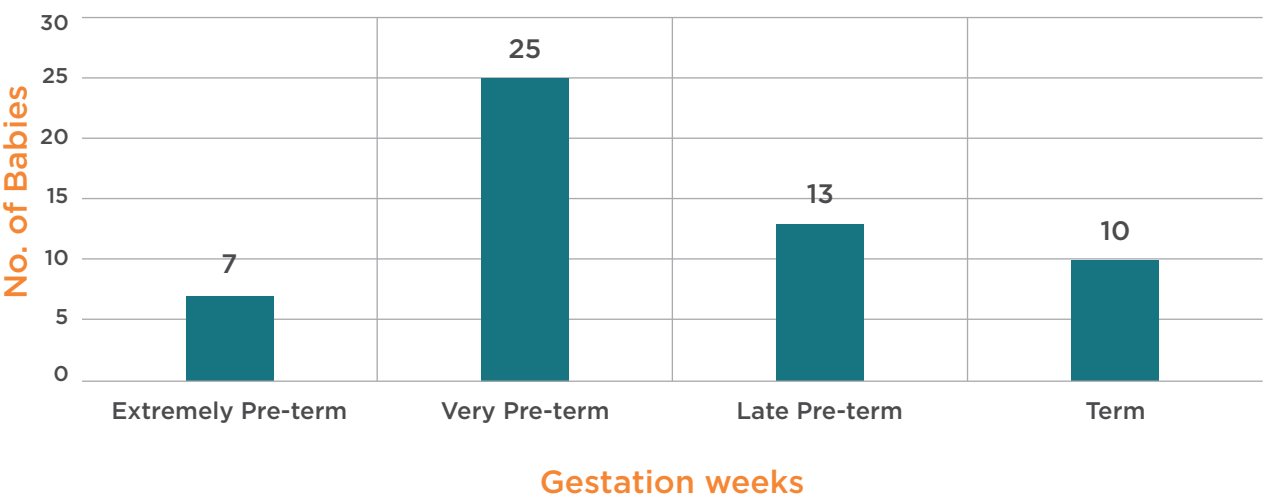
Male babies: 29
Female babies: 26



*Lowest Birth Weight - 600gms

Birth weight	Range in (Kg)
Extremely Low birth weight (ELBW)	< 1kg
Very Low Birth weight (VLBW)	1.01 - 1.5
Low Birth weight (LBW)	1.5 - 2.5
Normal Birth weight (NBW)	2.5 - 4

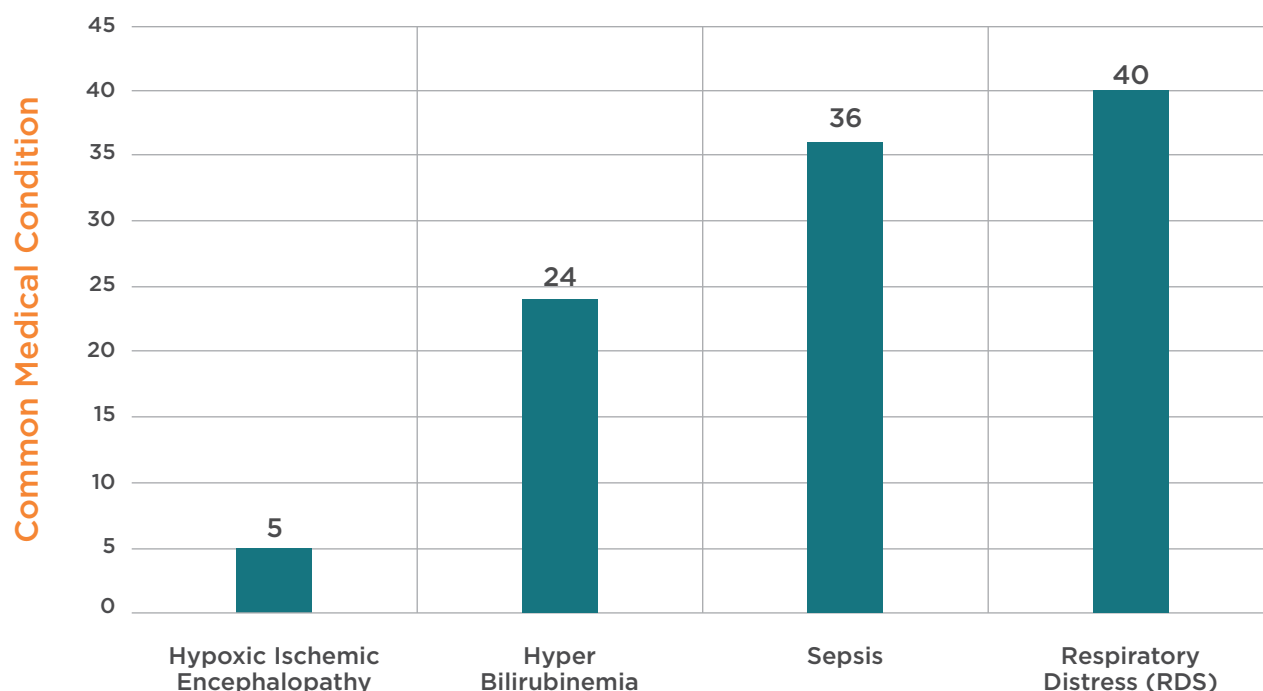
Gestational Age



*Lowest Gestation - 26 Weeks

Gestational Age	Weeks
Extremely Pre-term	Less than 28 weeks
Very Pre-term	28 to less than 32 weeks
Late Pre-term	32 to 37 weeks
Term	38 to 40 weeks

NFI - Consolidated Data



Hypoxic ischemic encephalopathy (HIE)	A type of brain dysfunction (brain injury) that occurs when the brain experiences a decrease in oxygen or blood flow. HIE can occur before birth, during labor and during delivery
Hyperbilirubinemia	A condition in which there is too much bilirubin in your baby's blood.
Sepsis	An infection involving bloodstream in new-born infants less than 28 days old
Respiratory Distress	Occurs in infants whose lungs have not yet fully developed

Length of Stay

The longest LOS: 56 days

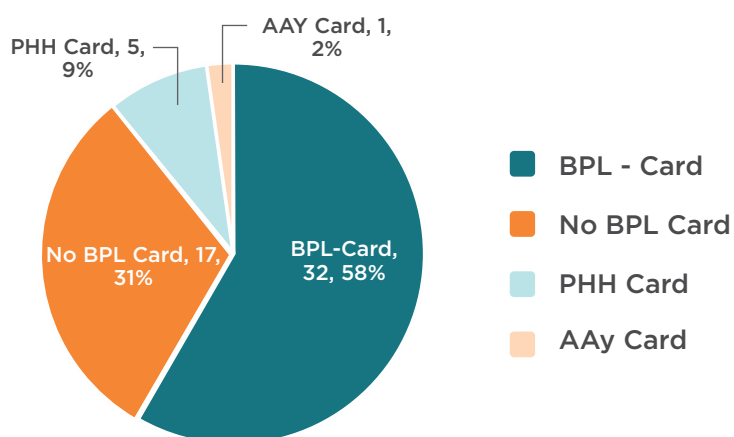
The Shortest LOS: 6 days

Baby	LOS (in days)
ELBW and VLBW	56
LBW	35
Baby with medical complication	25

The Average Length of stay - 32 days

SOCIO-ECONOMIC BACKGROUND:

Poverty Line Card



*BPL- Below Poverty Line

- Families that have BPL cards are the ones who are living below the poverty line as specified by the state government.
- BPL families receive 10 kg to 20 kg of food grains per family per month at 50% of the economic cost.

*PHH-Priority Household

Priority House Hold (PHH) ration card is provided for the people belonging to the rural households. The beneficiary in this category will receive food grains on a monthly subsidized price. Priority category has been divided into 2 subgroups.

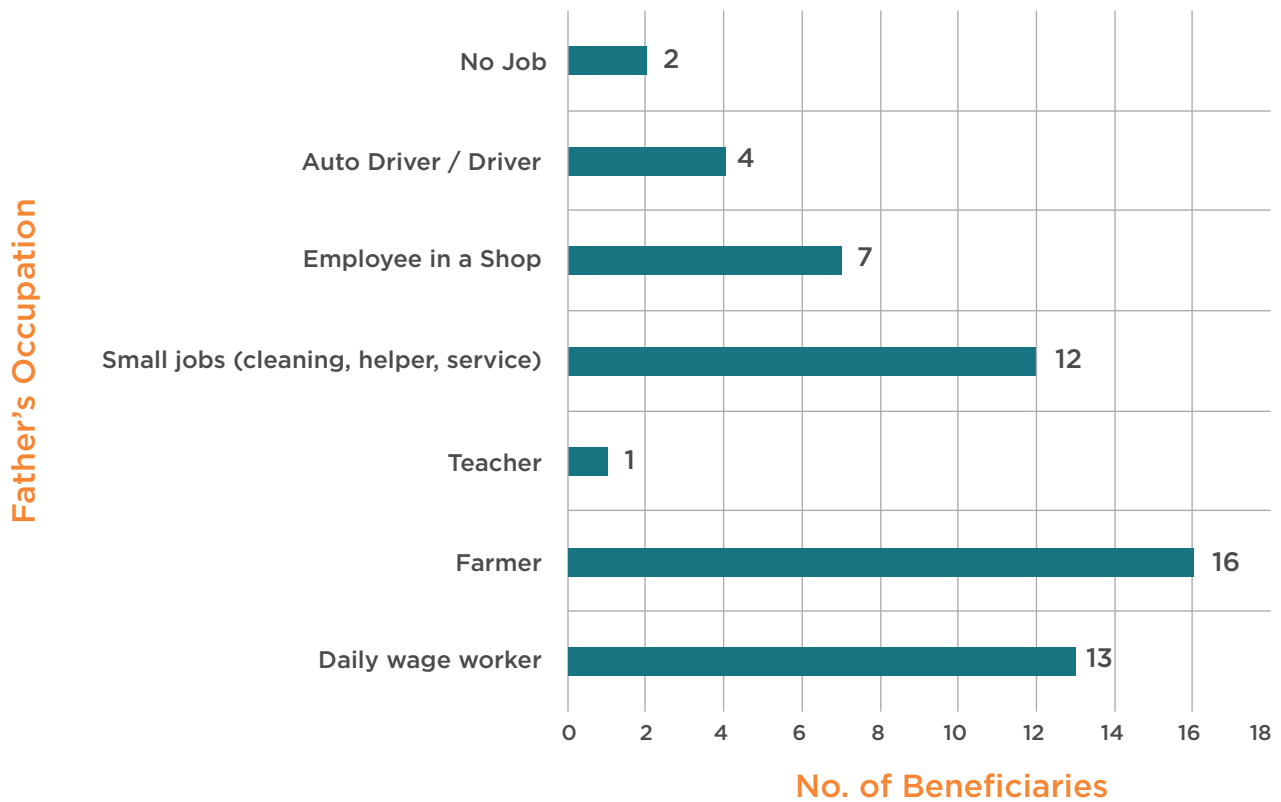
S.no.	Name of the Commodity	Price per kg
1.	Rice	Rs. 3 per kg
2.	Wheat	Rs. 2 per kg
3.	Coarse grains	Rs. 1 per kg

*AAY-Antyodaya Anna Yojna

Antyodaya Anna Yojana (AAY) ration card was issued to the families whose annual income is below Rs. 15000 and is liable to get food grains at a cheaper cost.

S.no.	Name of the Commodity	Price per kg
1.	Rice	Rs. 3 per kg
2.	Wheat	Rs. 2 per kg

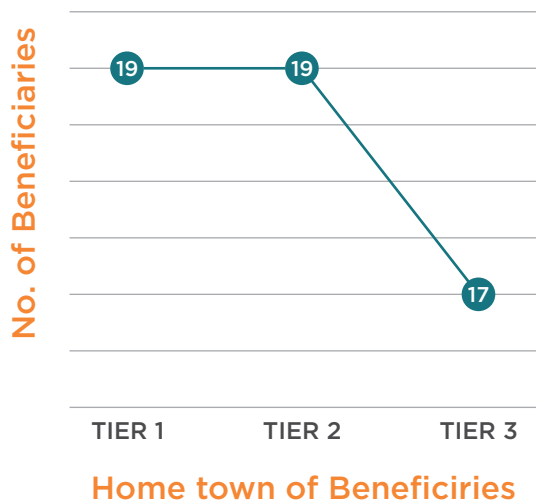
NFI - CONSOLIDATED DATA



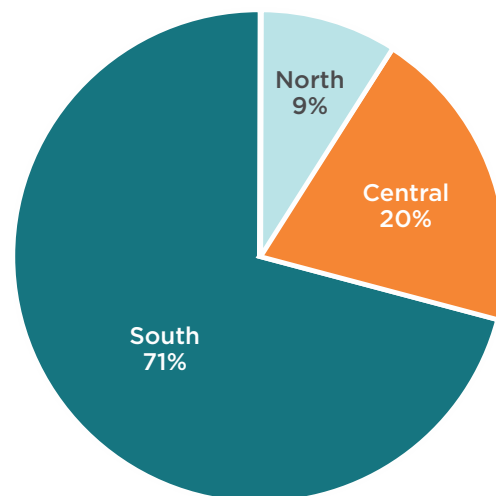
*Avg monthly income - 12-15k

GEOGRAPHICAL DISTRIBUTION OF THE BENEFICIARIES

Category of Cities / Towns

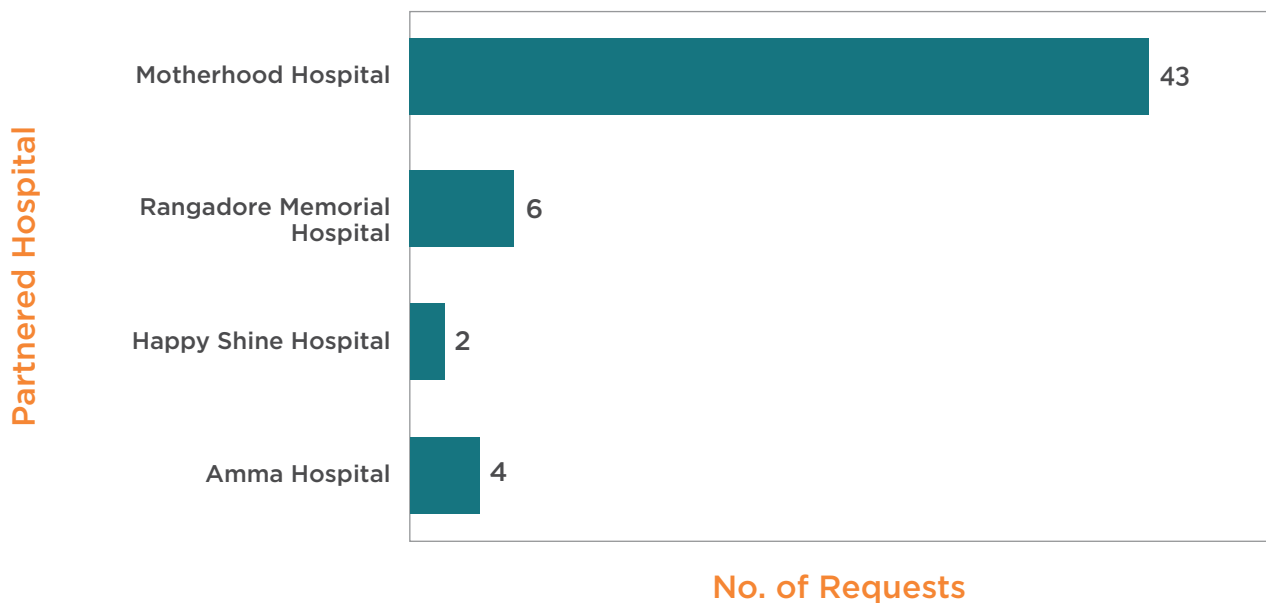


State Wise Distribution



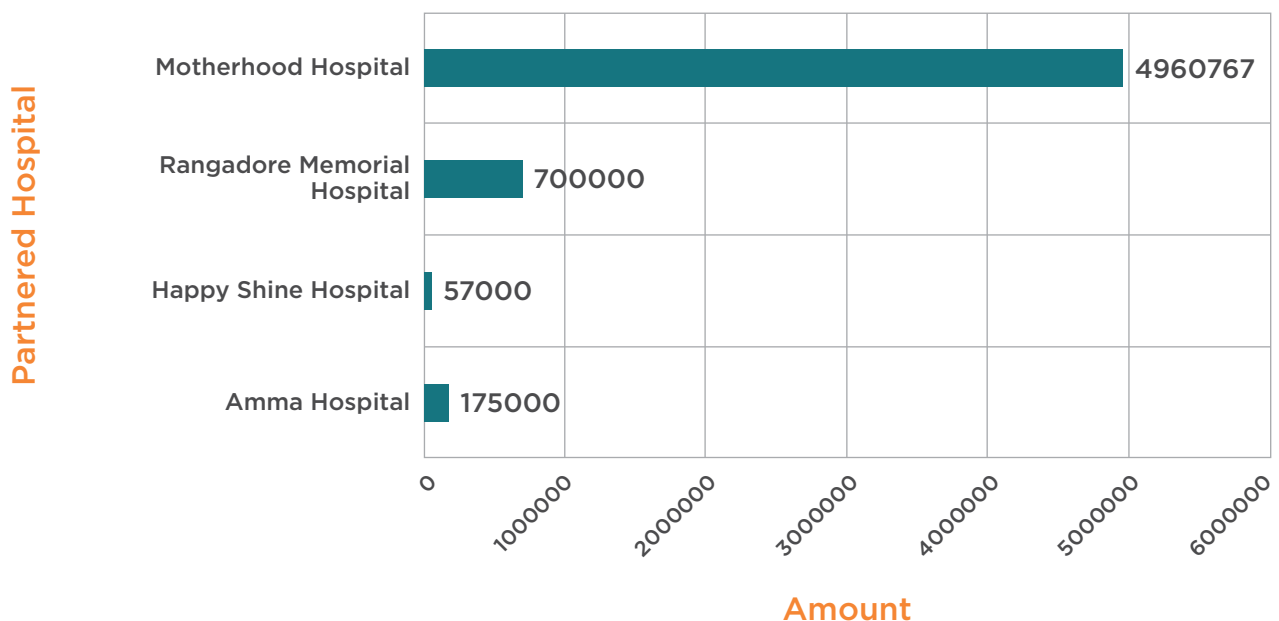
BENEFICIARIES FUNDED PARTNER HOSPITAL WISE:

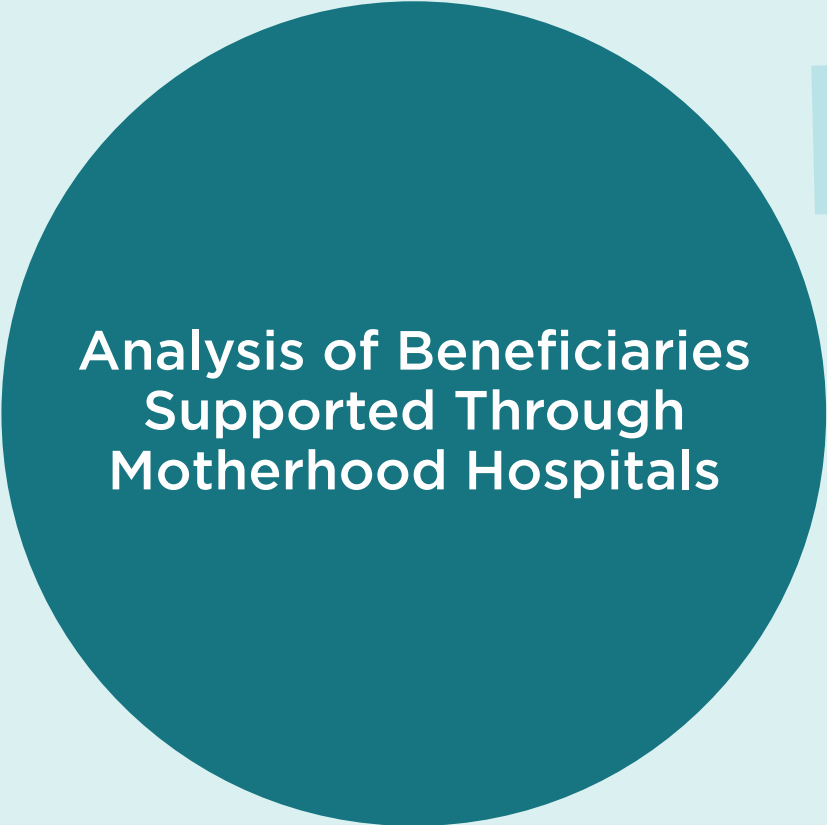
Requests for NFI



HOSPITAL WISE FUNDS DISBURSED

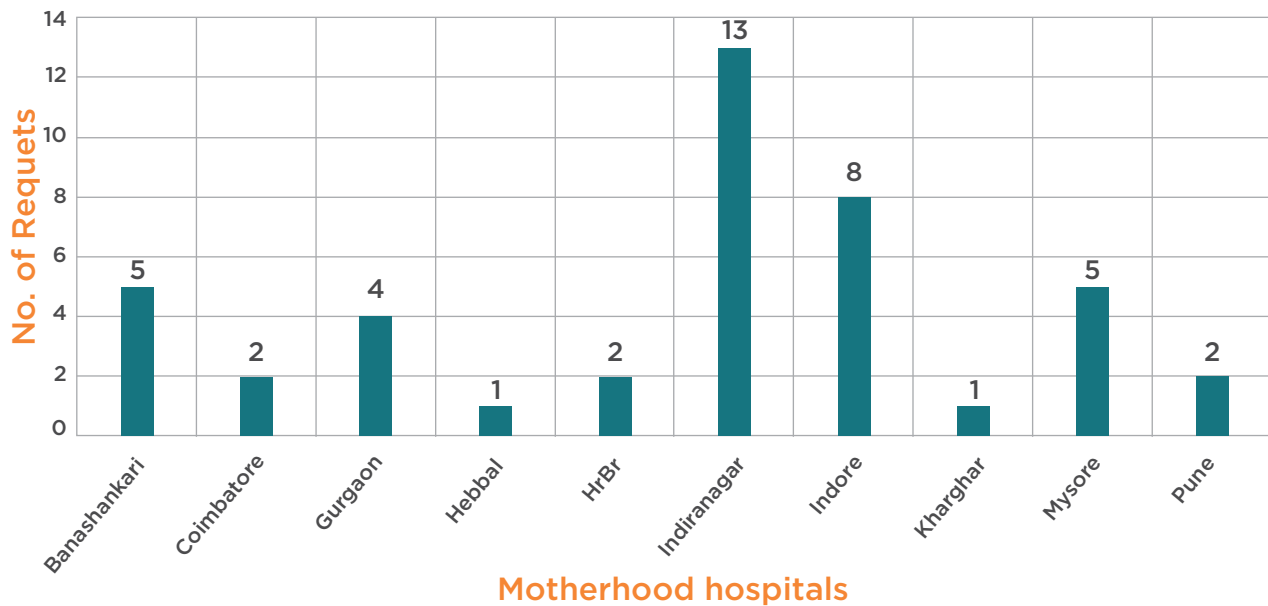
Funds





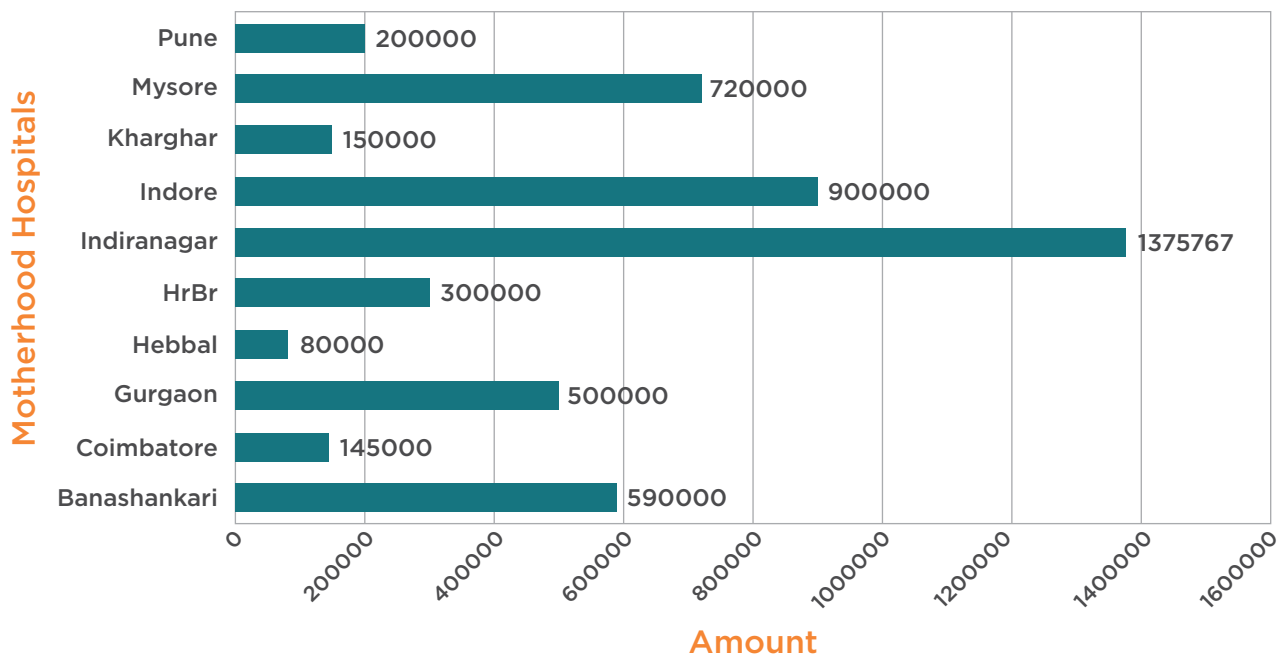
Analysis of Beneficiaries Supported Through Motherhood Hospitals

REQUESTS FOR FUND SUPPORT



FUND UTILIZATION HOSPITAL UNIT WISE

Funds

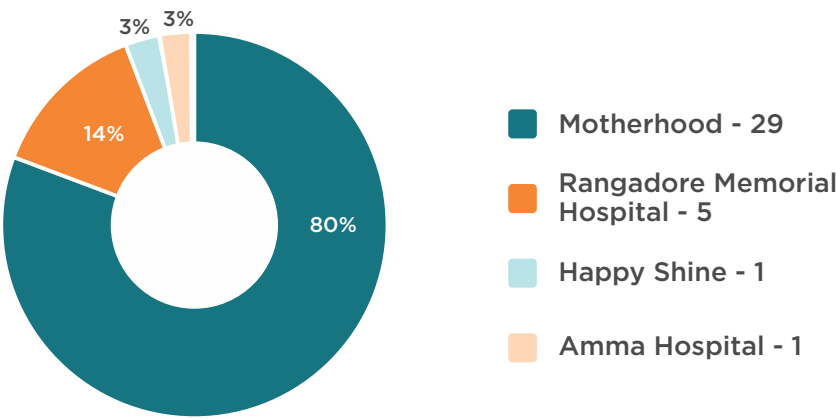


UNAPPROVED CASES

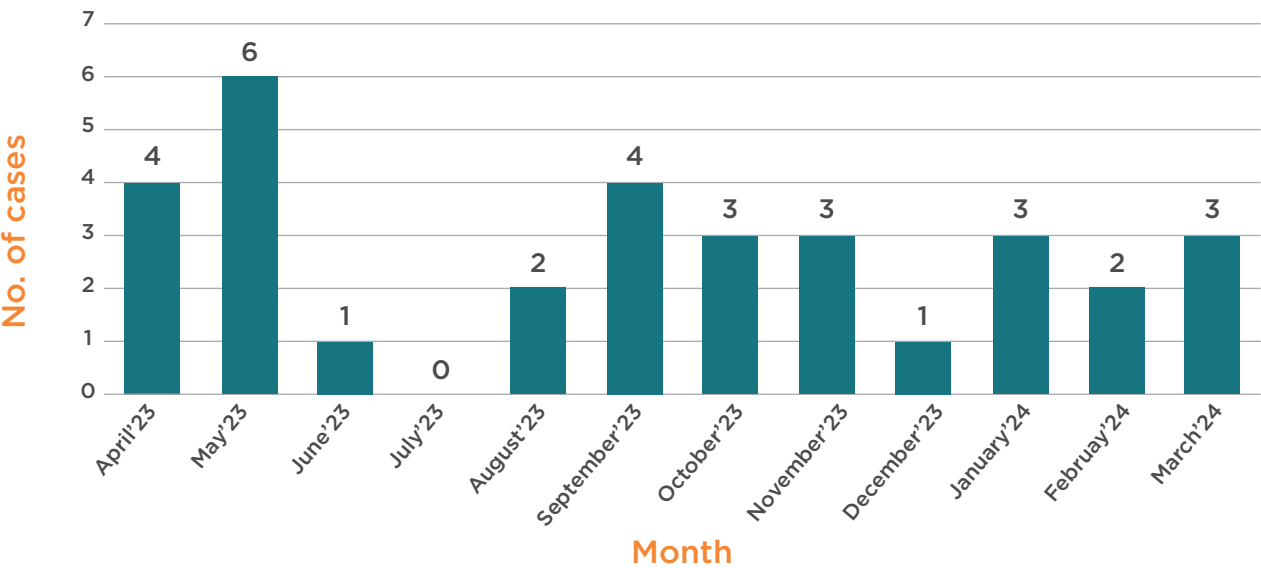
FY 2023-2024: 36



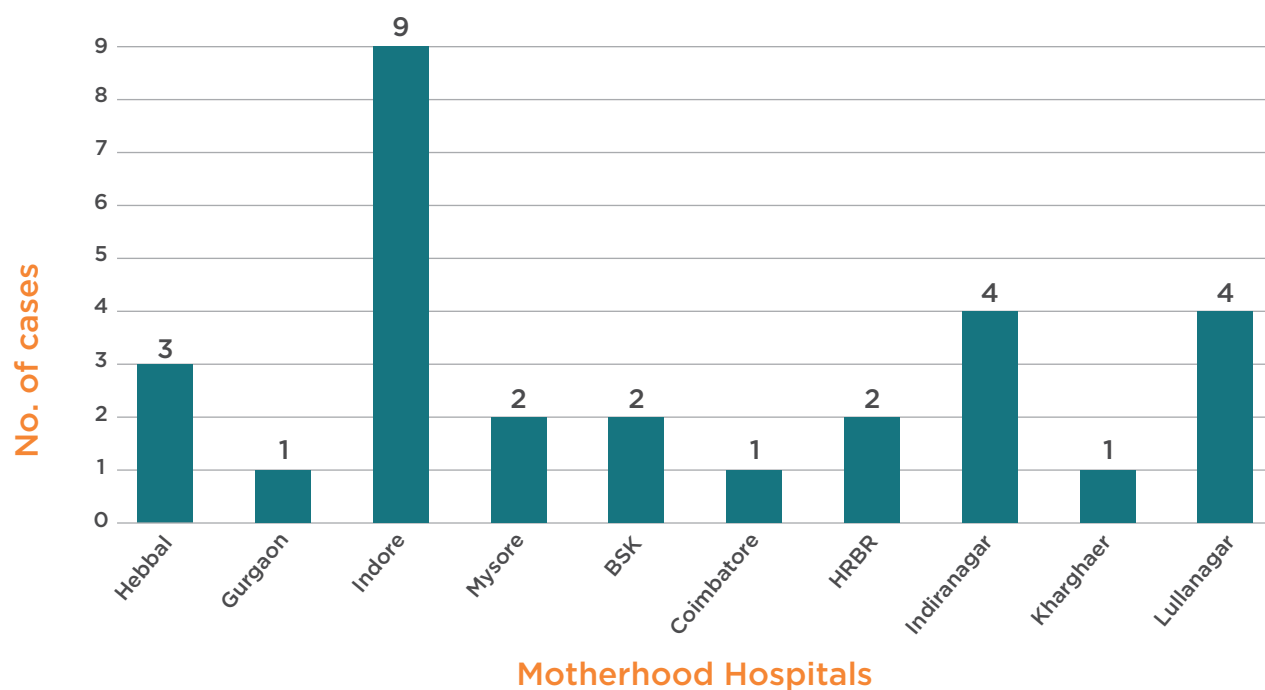
Unapproved cases



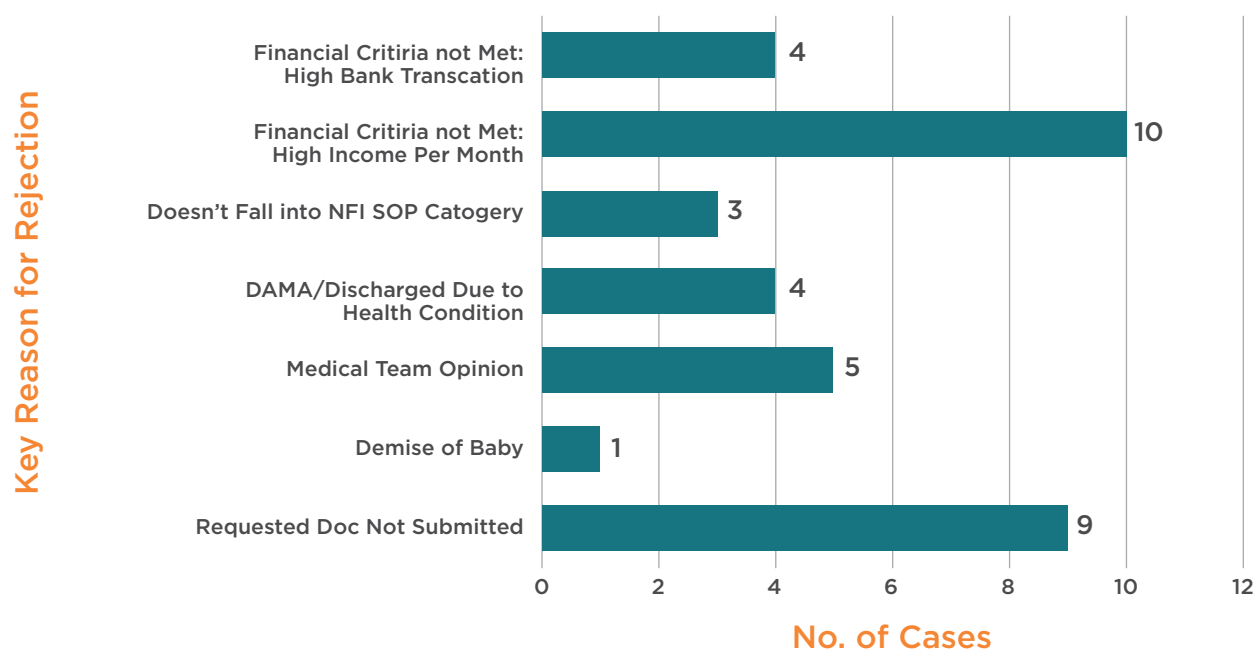
NFI - Unapproved cases FY 23-24



Unapproved cases - Motherhood unit wise



Key Reasons for Non-approval:



DRC SOP AMENDMENTS

Beneficiary Income Threshold Adjustment:

- Modified the existing beneficiary income threshold from INR 15,000 per month to INR 20,000 per month (2.4 Lakhs per annum), with a provision for a relaxation of INR 5,000, extending it up to INR 25,000, subject to the discretion of the DRC committee based on merit on a case-to-case basis.

The Expedited review for Birth Asphyxia with the following requirements:

- The beneficiary should be a BPL cardholder
- The Babies should be diagnosed with BIRTH ASPHYXIA
- Baby should be referred for TOTAL BODY COOLING treatment in NFI-empanelled hospitals.
- Clinical summary and referral letters from the referring facility and acceptance letters from the receiving letter are essential.

WAY FORWARD

- Impact number to cross 100 babies
- Identify more girl babies
- Increase in supporting babies from non-MH
- More empanelment – E-NICU + others
- Continuous training of SPOCs in partner hospitals on SOPs and documentation
- Introduction of Beneficiary income slabs region-wise (Tier 1 & Tier 2/3)
- Formulate the post-discharge monitoring program through Ben I / Volunteers
- Analyzing Maternal health (mothers' health condition during pregnancy) - for risk assessment and future program
- Introduce funding for tangible products (incubators, medicines, etc) in partner hospital
- Digitizing clinical data record management for future studies
- Nurturing Program for High Value Donors



Together we can make
a big difference!





Neonates

Foundation of India

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