Introduction

Maternal health encompasses the health of women of childbearing age from pre-pregnancy, through pregnancy, labour, and delivery, and the postpartum period. Maternal health care refers to promotive, preventive, curative and rehabilitative health care for women in the childbearing period (15-49 years). The goals of maternal health care is to insure that every expectant and nursing mother maintains good health, learns the art of child care, has normal delivery, and bears healthy children. The overall objective of maternal care is prevention of maternal morbidity and mortality, (Bassavanthappa, 2008).

Egypt has achieved a significant improvement in the past 20 years in matters related to maternal health. Ninety four percent of pregnant women have seen a medical provider for at least some type of care during pregnancy, and 74% of the deliveries have sought antenatal care. Also, 79% of births are assisted by medical personnel and most of the remaining deliveries are assisted by traditional attendants, while 72% of them take place in a health facility. Despite all these developments, there are still many gaps that demand further efforts, (United Nations Population Fund, 2008).

The term quality is used in many situations and it often means different things to different people. Many definitions were mentioned for quality as: "a degree of excellence", "customer satisfaction", "a degree or standard of achievement". Another definition of the quality of any product is its fitness for use and its freedom from defect, (Mostafa 2009).

Quality of care is a system that provides good care at an affordable price to all individuals with particular importance giving to quality of life,
and maintaining or enhancing the social and psychological well-being of patients and families and promoting conditions in the environment which are conducive to this quality of health care, (Al-Azzouny, 2003).

Quality of health care reflects judgment about the degree of excellence inherent in a specified unit of health service delivered to an individual or group of individuals. Quality of health care includes appropriate biomedical interventions, with appropriate consideration of the health and care of the whole individual and emphasizes the importance of the social context of health care delivery, (Carr, 2005).

Quality improvement of nursing care is defined as ongoing evaluation of nursing process of establishing optimum standards of nursing practice and planning of providing care that meets those standards. Quality improvement means that all employees in the institution are trying every day to do their jobs better, not merely trying to attain a minimum level of competence to satisfy quality assurance standards, (Bruzzer, 2005).

The purpose of quality improvement program is to evaluate, maintain, and improve the quality of patient care, The QI program will strive to ensure that patient care is optimal within the health association's resources, (Erikson, 2005).

Nurses can act as advocators and educators, creating healthy supportive communities for women and their partners in the childbearing phases of their lives. Nurses can enter into a collaborative partnership with a women and her partner, enabling them to examine their own health and its influence on the health of their future baby, the information provided by the nurse will allow the woman and her partner to make an
informed decision about having a baby, although the decision solely rests with the couple, *(Pillitteri, 2010)*.

**Magnitude of the problem:**

Every day, 1500 women die from pregnancy- or childbirth-related complication. In 2005, there were an estimated 536000 maternal deaths worldwide. Most of these deaths occurred in developing countries, and most were avoidable. Improving maternal health is one of the eight Millennium Development Goals adopted by international community at the United Nations Millennium Summit in 2000. In Millennium Development Goal 5 (MDG5), countries have committed to reducing the maternal mortality ratio by three quarters between 1990 and 2015. However, between 1990 and 2005 the maternal mortality ratio declined by only 5%. Achieving Millennium Development Goal 5 requires accelerating progress. According to **WHO, (2009)**, maternal mortality rate in Egypt per 100.000 live births was 44.6, and the maternal mortality rate in Kalyubia governorate in 2009 per 100.000 live births was 46.87.

Recognizing that quality of maternity care is not a luxury; rather it is an expression of making services cost-efficient by meeting women’s health needs in an appropriate way. Additionally, much empirical evidence indicates that under use of existing services, which is tangible problem in many settings in low-income countries, is directly related to substandard quality of maternity care *(Bergstrom, 2003)*.

The care of childbearing and childrearing woman is a major focus of nursing practice, because to have healthy adults you must have healthy children. To have healthy children, it is important to promote the health of the childbearing woman and her family from the time before children
are born until they reach adulthood. Both preconception and prenatal care are essential contributions to the health of a woman and fetus and to a family’s emotional preparation for childbearing and childrearing. Nurse plays a vital role in promotion and maintenance of maternal health to ensure cycles of optimal childbearing and childrearing. (Kitchener, 2005).