



Dakshata



3-Days Training Update cum Skills Standardization Training for Improved Practices around the Time of Child Birth

Training Outline

Session and Time	Activities	Training/Learning Methods	Resource Materials
Day 0			
Preparation of the training hall	<ul style="list-style-type: none"> • Prepare the hall with 2 skills stations (1) AMTSL with related IPP and 2) NBR) for OSCE. Number and label them • Ensure the seating arrangement is in a 'U' shape with adequate chairs for the learners, trainers and two to three extra for observers • Ensure the LCD, screen system is well adjusted and functional on all days • Ensure all the training material including those for skills stations and the learners' folders for the day's sessions are in the room • Prepare the sessions from the facilitators' guide (FG) and training outline (TO) and get familiar on the flow of information and the material to be used with their sequence for each day. Prepare the sessions to introduce them, present objectives, conduct the session as per the instructions in the FG and TO. Prepare to make the sessions interactive as suggested in them. 	Trainer preparation of reading the facilitator's guide and prepare for training readiness	<ul style="list-style-type: none"> • CSS logistics checklist • Checklist for preparation of skill stations • See resources mentioned in session 1.1.
Day 1			
Section 1: Introduction to the concept of quality of care and role of SCC in it			
1.1. Registration, welcome and opening session (20 mins) Learner's introduction and expectations Setting training norms Goal, objectives and agenda of the training	<ul style="list-style-type: none"> • Welcome the learners to the training. • Register the learners on the attendance sheet. Tell them to complete the information required clearly and sign in the column of day one. • Ask learners to introduce themselves by telling their name, designation, qualification, years of experience and their work site. • Facilitate the group to state at least one expectation from the training. Co-trainer will note them on the flip chart sheet. • Facilitate the participants (learners and trainers) to set the norms for the 3 days training so that it runs smoothly without disturbances. Co-trainer will list the norms on a separate flip chart sheet. • Give a brief background for the need of the training, the training and assessment methodology and present the goal and objectives of the training from the PowerPoint presentation PPT 1.1. Do not discuss the objectives at this point. Link 	Interactive presentation and facilitation	<ul style="list-style-type: none"> • Registration Form/attendance sheet • Flip chart, stand and markers • Pre-written 'parking lot' on the flip chart • Pre-written Goal and objectives on the flip chart/Presentation 1.1

Orientation to the training package	<p>them with participant's expectations and express the expectations beyond the scope of the training. Briefly discuss the agenda and plan for the day</p> <ul style="list-style-type: none"> • Give the training folder to the learners and tell them to write their names clearly on each set of documents in it. • Tell them to write their names in big letters on the name tags and wear them. Tell the serial number of each learner from the attendance sheet and tell them to note it in their note book for future reference. <p>Orient the learners to the material in their folders and explain that it will be used as and when required during the sessions throughout the three days.</p>		<ul style="list-style-type: none"> • Learner's Folder (Folder, Agenda, Spiral Note Pad, Pen, Name Tag, Pencil, Eraser, Sharpener, Safe childbirth checklist, Pre/Post training knowledge assessment questionnaire, Pre/post-training OSCE sheets)
1.2. Pre-training knowledge assessment and Pre-training OSCE (45 mins)	<ul style="list-style-type: none"> • Introduce the session by telling the learners that before we begin the training, it will be good to know their existing knowledge and skills regarding the topics to be covered during the three days. This will help the trainers to understand where to stress during the update and skills standardization. • Assess learner's pre-training knowledge using the questionnaire and skills using OSCE sheet for each learner. • Tell the learners to write the number provided to them or their names on their OSCE and knowledge assessment sheets. • Explain the process of knowledge assessment and OSCE as simultaneous activities. • Conduct the individual OSCE for all participants. • The trainer at each station will tell the situation of the simulated client and the participant to demonstrate the concerned skill at the station • Mark the steps as instructed in the OSCE answer key. • Score the skill assessment. This observation will help the trainer to focus and stress on the steps while demonstrating the same skills later. • Simultaneously ask the participants to complete their knowledge questionnaire and the remaining OSCE stations 3 and 4 at their seats. The answer sheets of the knowledge questionnaire and OSCE can be scored by the co-facilitator when one facilitator is conducting the next session. • Score the OSCE and knowledge assessment marks in the respective matrix sheet as per the serial number of the learners as described in the session 	Simultaneous activity by learners, observed by trainers	<ul style="list-style-type: none"> • Knowledge assessment questionnaire for each learner • OSCE sheets for each learner • Office bell • Knowledge assessment and OSCE matrix • Knowledge assessment Questionnaire and OSCE answer keys for the trainer

	<p>plan 1.2 in the FG; highlight the pass score. Also highlight the maximum and minimum scores achieved by green and red highlighter respectively.</p> <ul style="list-style-type: none"> • Display the pre-training score matrix at a common place for everyone to see. 		
1.3. Importance of ensuring quality care in labor room (30 mins)	<p>Make an interactive presentation on need for improving the quality of care in labor rooms. Use the PowerPoint slides.</p>	Interactive presentation	Presentation 1.3
1.4. Current practices in client management in labor rooms of worksite of learners (flow of client care) (20 mins)	<ul style="list-style-type: none"> • Ask learners about the activities they perform at the hospital for the woman in labour from admission till her discharge. Do not intervene during the flow of the discussion. Also elicit where each of these activities are performed in the facilities (go through the discussion guidance list prior to the session and memorize it) • Note down good and harmful practices on the flip chart. • Later, while conducting the respective sessions during the training, refer to the harmful practices and discuss how they can be converted into good ones. 	Brainstorming and discussion using flip chart	<ul style="list-style-type: none"> • Discussion points list • Flip chart, stand and markers
1.5. Understanding Stages of labor in relation to flow of client care (10 mins)	<p>Ask learners to define the stages of labour. Make an interactive presentation on stages of labour.</p> <ul style="list-style-type: none"> • Discuss true and false labour pains • Discuss all the four stages of labour and relate these stages with the flow of client care discussed in the previous session 	Interactive presentation	Presentation 1.5
Tea			
1.6. Introduction to the Safe Childbirth Checklist (SCC)– a simple tool to improve quality of care (30 mins) (20 mins+ 10 mins)	<ul style="list-style-type: none"> • Make an interactive presentation on the concept of the Safe Childbirth Checklist. • Ask learners to take out the SCC from their folder. • Give an orientation on the layout of SCC and explain the specifics of the WHO's SCC adapted by GOI, focusing on the importance of 4 check points/pauses: <ol style="list-style-type: none"> 1. On admission 2. Just before and during birth (or C-section) 3. Soon after birth (within 1 hour) 4. Before discharge • Ask learners to read each point of the checklist in turns so that they go through the 4 check points/pauses in 20 mins. Explain that these actions are essential practices to be performed at different stages of labour and delivery related care. • Link the SCC with four stages of labour and how to use it for providing quality care. 	<ul style="list-style-type: none"> • Interactive presentation • Checklist reading 	<ul style="list-style-type: none"> • Presentation 1.6 • Copies of Safe Childbirth Checklist

Section 2: Care at the time of admission			
<p>1.7. Triageing based on history, examination and decision for level of care</p> <p>Importance of monitoring vitals during labour</p> <p>BP measurement, Hb estimation by Sahli's method, Urine protein and sugar estimation by Uristix</p> <p>Demonstration of critical assessment skills –</p> <p>a. Correct estimation of gestational age</p> <p>b. Appropriate assessment of uterine contractions</p> <p>c. Localizing and appropriate recording of FHR</p> <p>d. Handwashing and wearing gloves</p> <p>e. Conducting PV examination and removing gloves</p> <p>(90 mins)</p>	<ul style="list-style-type: none"> • Explain the concept of triaging based on history and initial clinical examination to decide on the prioritization and level of client care in a heavy workload facility. Discuss the three delays and explain that triaging helps address the third delay. • Explain the importance of prompt referral or action if services are available, linking it with third delay and how SCC helps in assessing the client for referral. Focus on the importance of referring client after appropriate initial management, with mention of clinical and management details on accompanying referral slip to the facility where the client is referred. • Ask the learners to see the recording of vitals (pulse, temperature, BP and respiratory rate) at the top of each check point to stress that if at one check point they are normal, they have to be checked again to ensure there is no deviation from normal. If there is deviation from normal, it indicates a problem and the woman and/or the baby need to be promptly managed accordingly • Using the presentation explain the importance of monitoring vital signs and link the discussion to the SCC at all four check points. • Show the videos on how to take the BP, hemoglobin estimation by Sahli's method and urine examination for protein and sugar estimation using Uristix and discuss key points. • Demonstrate ways to estimate fundal height and gestational age using model and discuss other ways to estimate them by–LMP and USG. • Demonstrate the correct technique for abdominal palpation during pregnancy, observing uterine contractions, localizing FHS and auscultating FHR on appropriate models using skills checklists wherever applicable. • Demonstrate handwashing and wearing gloves, conducting PV examination on appropriate model using skills checklists and removal of gloves. 	<ul style="list-style-type: none"> • Interactive presentation • Refer to SCC section for vitals and referral • Videos on BP, HB, Urine protein and sugar • Demonstration on models using skills checklists 	<p>Presentation 1.7.1 and 1.7.2</p> <ul style="list-style-type: none"> • Videos on BP, Hb, urine protein and sugar estimation • Anatomic models, Fetoscope, tray with cotton swabs and antiseptic in a bowl, sterile/HLD gloves
Lunch Break			

in care of the mother and the baby (10 mins)	<p>care. Ask the learners to read the danger signs mentioned on the SCC check point one.</p> <ul style="list-style-type: none"> Using the PPT slide, discuss the role of birth companion during the hospital stay of the woman who has come for delivery. Emphasize that the presence of a birth companion before, during and after the delivery is very important for emotional support and care of the woman and later for both the mother and her baby. She must be made aware of the danger signs for the mother during labour and for both the mother and the baby after delivery. 	with SCC	1.10
1.11. Summary and review of day's activity (5 mins)	<ul style="list-style-type: none"> Ask questions on the key points covered during the sessions of the day and wait for their responses. Clarify any doubts if the learners have on any technical issue. Ask the learners to review the training of day one, they may write on their notepad, one thing they liked, one new thing they learned and one thing about the training which they did not like. Give them 2 minutes for the feedback and take their papers for the trainers' information. 	Presentation by learners	Notepad, pen

Day 2			
Session and Time	Activities	Training/ Learning Methods	Resource Materials
2.1. Recap from Day 1, agenda of day 2 (20 mins)	<ul style="list-style-type: none"> Ask the learners to recap the key points of the previous day's activities. This can be done by few learners telling a key point from the sessions covered or through a game using a ball. Clarify doubts if any from previous day's session. 	<ul style="list-style-type: none"> Recap by learners 	<ul style="list-style-type: none"> Ball Day 2 agenda
2.2. Monitoring the progress of labor – plotting and interpreting partograph (60 mins)	<ul style="list-style-type: none"> Display the presentation slide of the partograph and explain that it is a simple tool to monitor labour and take decisions on appropriate actions to help the woman deliver with positive outcomes. Explain each section of the partograph and how to fill it using the animated partograph slide. Discuss in detail the significance of using partograph for monitoring labour, its interpretation and making decisions on assistance and interventions. Ask the learners to take out the three partograph case studies and three blank partographs from their folders. Conduct the partograph plotting exercise using case study-2 on the flex partograph. Facilitate active participation by asking each learner to plot the given finding on the flex partograph. Give the case study 3 as home assignment to be discussed next morning. 	<ul style="list-style-type: none"> Interactive presentation Practice on case study 1 	<ul style="list-style-type: none"> Partograph interactive PPT 2.2 Flex poster of simplified partograph' (3' x 4') Whiteboard markers, Duster, Copies of three case studies with attached blank partographs for each learner, Pencil, eraser and sharpner

2.3. Principles of timely identification and management of prolonged and obstructed labor (30 mins)	<ul style="list-style-type: none"> • Explain the duration of normal labour, discuss the definitions of engagement, prolonged labour and obstructed labour. • Present the scenario of prolonged labour and show the findings plotted on the partograph. Relate partograph findings in diagnosing prolonged labour and the decision on the action for it. • Similarly present the scenario of an obstructed labour and relate the findings on the partograph to diagnose it and make a decision for appropriate action. • Discuss symptoms signs and management of prolonged and obstructed labour. • Emphasize that augmentation of labour should be done only if indicated at centers equipped for managing obstructed or prolonged labour. Explain indications and contraindications for augmentation. Discuss that augmentation should only be done under expert medical guidance. • Refer to the SCC and highlight that the 'cross' for routine augmentation will remind them that it has to be done for women who have the specific indication for it. 	Interactive presentation and discussion	Presentation 2.3
Tea			
Section 3: Essential practices just before, during and after delivery			
2.4. Preparing for safe delivery: a. PPE b. Trays relevant for safe delivery as per MNH toolkit (ND and newborn trays, and newborn resuscitation tray) c. Importance of pre-filled oxytocin in sterile syringe (30 mins)	<ul style="list-style-type: none"> • Initiate discussion on preparation of safe delivery environment and its benefits using presentation 2.4. • Discuss the importance of using PPE for infection prevention and demonstrate what and how to use the PPE. • Facilitate discussion on instruments trays the learners currently use at their facility at the time of labour. • Refer to the essential supplies section in the SCC check point two and ask learners about the essential supplies needed for mother and baby at the bed side. List the items as described on presentation slide. • Demonstrate the content of trays for normal delivery (ND), newborn tray and newborn resuscitation tray. • Ask learners to take out the handout and inform them that they have the contents of the other trays required in the labour room in this handout. Discuss the importance of availability of these trays. • Highlight the importance of keeping pre-filled oxytocin syringe on the delivery trolley in preparation for safe delivery. 	<ul style="list-style-type: none"> • Interactive presentation • Demonstrate PPE • Demonstrate delivery and baby trays • Explain other trays using job-aid 	<ul style="list-style-type: none"> • Presentation 2.4 • Set of PPE • SCC • ND and newborn trays, NBR tray with their contents • Handouts of seven trays as per MNH toolkit.
2.5. Normal delivery and Active Management	<ul style="list-style-type: none"> • Using the presentation, discuss management of third stage of labor and AMTSL 	Interactive presentation and discussion	<ul style="list-style-type: none"> • Presentation 2.5 • GoI AMTSL

of Third Stage of Labor (AMTSL) (10 mins)	<ul style="list-style-type: none"> • Discuss and probe questions to enable the learners remember the 3 steps of AMTSL. • Use GoI poster on AMTSL in summarizing the steps. 		poster
2.6. Essential New Born Care (ENBC) (10 mins)	With the help of the presentation, discuss the steps of essential newborn care and their importance. Stress the importance of the first 'Golden Minute' and the simultaneous tasks to be done during the first minute after birth.	Interactive presentation and discussion	Presentation 2.6
2.7. Management of 2 nd and 3 rd stage of labor. Demonstration and skills practice a. Conducting normal delivery (ND) b. ENBC and AMTSL c. Newborn Resuscitation (NBR) (120 mins.)	<ul style="list-style-type: none"> • Tell learners to move to the skill stations; divide them in two groups according to their number (five learners per group and one trainer at each station). Station 1: Demonstrate correct technique of conducting normal delivery, ENBC and AMTSL on models using integrated skills checklist. Station 2: Demonstrate correct technique of normal delivery and management of a baby who is not breathing (NBR) using skills checklists • Describe steps of key steps of each procedure during the demonstration reflecting to the skills demonstrated or shared during the pre-training OSCE. • Clarify any doubts related to the procedures at each station. • After the demonstration, allow the learners to practice the skills on the models at both the stations by rotation using the respective skills checklists and provide constructive feedback for improvement. Ensure that the two groups get a chance to see the demonstration and practice at both the stations. 	Demonstration of skills followed by supervised skill practice using models and skills checklists	<ul style="list-style-type: none"> • Skills stations for 1. ND, ENBC and AMTSL and ND and 2. NBR • Skills checklists • Anatomic models, trays, instruments, IP materials as per the checklist for mother and baby at the time of delivery
Lunch break			
2.8. Review of care of mother and newborn soon after birth a. Regular assessment of clinical condition of mother and newborn (routine care) b. Early initiation of breast feeding c. Prevention of hypothermia (15 mins)	<ul style="list-style-type: none"> • Make an interactive presentation on care of mother and newborn immediately after birth. Explain that the first two hours after delivery are the most critical for survival of the mother and the baby as most of the complications occur during this period. Explain that PPH one of the leading causes of maternal deaths usually occurs during this period. • Emphasize that careful and frequent observation of the mother and baby helps identify problems early and enable prompt and appropriate care. • Refer to the SCC check point three and stress that the mother and baby must be observed every 15 minutes. The baby's breathing is assessed every 5 mins during this period after delivery to check for problems. • Using the SCC, discuss the need for MgSO₄ for the mother and antibiotics for 	Interactive presentation and discussion	<ul style="list-style-type: none"> • Presentation 2.8 • SCC

	<p>both mother and baby. Ask the learners to read the conditions of the mother and the baby when antibiotics need to be given.</p> <ul style="list-style-type: none"> • Explain the importance of colostrum and initiating breast feeding within an hour of delivery. • Discuss the importance of skin-to-skin contact and rooming-in to prevent hypothermia of newborns. 		
2.9. Preventing complications in newborn (30 mins)	<ul style="list-style-type: none"> • With the help of presentation, discuss the major complications that can happen in a newborn. • Ask learners to recall from previous sessions, different interventions that help in preventing and reducing chances of these complications in newborns. • Summarize the session by referring the learners to the SCC check points 2, 3 and 4 on sections related to newborns. 	Interactive presentation and discussion	<ul style="list-style-type: none"> • Presentation 2.9 • SCC
2.10. Prevention, Identification and management of newborn infections a. Antibiotics and referral b. ARP for newborn (30 mins)	<ul style="list-style-type: none"> • Discuss using the presentation and SCC, assessment of newborns for the need of: • Antibiotics-their indications, drugs, doses and routes of administration • Special care to prevent hypothermia and hypoglycemia • Conditions for referral and the initial management prior to it with documentation on the referral slip for the information of the higher facility staff regarding the condition and medications provided with indications. • Explain how to manage for newborns born to HIV + mothers and the preventive drug and dose and ARP for newborn. 	Interactive presentation and discussion referring to SCC	<ul style="list-style-type: none"> • Presentation 2.10 • Safe childbirth checklist
2.11. Prevention, identification and management of postpartum hemorrhage (PPH) a. Prevention of PPH-AMTSL b. Initial management of shock and PPH c. Bimanual and aortic compressions d. Condom tamponade (60 mins)	<ul style="list-style-type: none"> • Ask the learners to share the most common complication which they encounter at the health facilities in women during postpartum period. Elaborate that PPH is the leading cause of maternal death and by performing simple steps of AMTSL, it can be prevented in approximately 70 percent cases. • Facilitate the learners to recall and list the steps of AMTSL in their correct sequence and importance in preventing PPH. • Using the presentation, discuss <ol style="list-style-type: none"> 1. Identification and management of shock and postpartum haemorrhage (general and cause specific) 2. Correct technique of uterine massage • Show the Gol's video module 5 on PPH. • Refer to the SCC section on PPH in check points 3 and 4. • Demonstrate use of uterotonics in PPH and the steps of bi-manual uterine compression, aortic compression and condom tamponade on the model. Stress on the key points of these procedures. • Inform the learners regarding the Gol's posters on PPH management as job aid 	<ul style="list-style-type: none"> • Interactive presentation • Video on PPH (SBA module 5, aortic compression & condom tamponade) • Demonstration and practice on models using checklists 	<ul style="list-style-type: none"> • Presentation 2.11 • Video on PPH (SBA module 5) • SCC • Skills station with anatomical models, instruments trays, IP material • Skills checklists

	for their reference later at their work site.		
	Tea		
2.12. Summary and review of the day's activities (10 mins)	<ul style="list-style-type: none"> • Ask the learners to summarize the key points covered during the sessions of the day and on their experience of practice of skills on models using checklists. • Ask learners to write at least one point which they felt was good during the day and they learned something new and one point which they did not like. Collect the feedback from the learners to review later for information. • Ask the learners to pick up a chit of the topic covered during the day from the bowl for home assignment and prepare key points of it for recap the next day • Give case study 3 to the learners as home assignment which will be reviewed next day morning in the recap session. 	Presentation by learners	<ul style="list-style-type: none"> • Pre-prepared chits of topics of the day's session in a bowl as assignment for next day's recap session • Bowl • Note pad, pen

	Day 3		
Session and Time	Activities	Training/Learning Methods	Resource Materials
	Section 4: Essential practices at the time of discharge		
3.1. Recap of Day 2, Review partograph exercise, agenda day three (40 mins)	<ul style="list-style-type: none"> • Welcome learners to the final day of training. • Recap one or two key points of the topics on their home assignment chits of sessions from previous day. Encourage learners to use the SCC for this activity. Compliment the learners for correct responses. • Clarify doubts if any from previous day's sessions • Review the partograph exercises given in the assignment. Ask the learners about any difficulty or questions related in filling and interpreting the partograph. • Present the agenda of day three. 	Recap by learners facilitated by trainers, review of partograph case study 3 and facilitation by trainer	Flex partograph, marker, duster, flip chart stand, case studies 2 and 3 of home assignment, Day 3 agenda.
3.2. Assessing and managing post-partum complications in mothers a. Puerperal sepsis b. Delayed PPH (20 mins)	<ul style="list-style-type: none"> • Make an interactive presentation on maternal/puerperal sepsis. Describe the causes, symptoms, signs and management of sepsis. • Tell learners to refer to the SCC and read the indications for antibiotics in mother. Discuss the Gol recommendation of broad spectrum antibiotics (Ampicillin, Gentamycin and Metronidazole) • Using the presentation, make an interactive presentation on delayed PPH, its definition, symptoms, signs and management. 	<ul style="list-style-type: none"> • Interactive presentation and discussion • Refer to SCC 	<ul style="list-style-type: none"> • Presentation 3.2.1 on puerperal sepsis and 3.2.2 on delayed PPH • Safe childbirth checklist
3.3. Special care for pre-term and LBW babies:	<ul style="list-style-type: none"> • Ask the learners which complications do they expect in pre-term and LBW babies as per the discussions during 	<ul style="list-style-type: none"> • Interactive presentation • Video on KMC 	<ul style="list-style-type: none"> • Presentation 3.3 • Video KMC

<p>a. Thermal management including KMC</p> <p>b. Assisted feeding</p> <p>c. Infection prevention (45 mins)</p>	<p>the previous sessions. Discuss that these babies are prone for hypothermia, infections, hypoxia, poor sucking and hypoglycemia all of which are life threatening.</p> <ul style="list-style-type: none"> • Explain the importance of simple evidence based interventions such as KMC, assisted feeding and proper infection prevention practices that can help in protecting babies against these complications. • Show video on KMC and assisted feeding. • At the skills station, demonstrate KMC, expressed breast milk (EBM) technique breast feeding using breast model, KMC pouch and Preemi or Neo-Natalie. • Explain proper positioning and attachment of the baby to the breast for during breast feeding. Explain that this is important for breast feeding to be successful and effective and prevent soreness and cracks in the nipples and engorgement of breasts in the mother. Emphasize that the baby instinctively finds and takes the mother's breast. Hence, the baby must be delivered directly on mother's abdomen for skin-to-skin contact and warmth. • Stress the dual role of early initiation of breast feeding to reduce hypothermia, hypoglycemia and infections in the newborn. • Demonstrate assisted feeding through spoon feeding and orogastric/nasogastric tube. Show how to measure the length of the OGT to be inserted in the baby through the mouth and through the nose. • Refer to the check point 3 of the skills checklist to draw the attention of the learners to the section on special care of the newborn. Make them read it. 	<p>and assisted feeding</p> <ul style="list-style-type: none"> • Demonstration and practice on models on positioning and attachment for breastfeeding • Demonstration on KMC, EBM and assisted feeding (spoon feeding and OGT insertion) 	<p>and assisted feeding</p> <p>Skills station with breast model, KMC pouch, Preemi Natalie, Neo-Natalie, katori-spoon/paladai</p> <ul style="list-style-type: none"> • Orogastric tube • 10 ml syringe • SCC
<p>3.4. Postpartum family planning counseling (return to fertility, healthy timing and spacing of pregnancy, postpartum family planning options (30 mins)</p>	<ul style="list-style-type: none"> • Show the pie diagram from the presentation on causes of maternal deaths and explain that unsafe abortion from an unintended pregnancy is one of the important causes of maternal deaths. • Make an interactive presentation and discuss that postpartum family planning is a simple and cost effective intervention for saving lives of mothers and children. Stress the importance of quality PPFP counselling. • Discuss importance and benefits of postpartum family planning and counseling for it during different times from ANC, early labour and immediate 	<ul style="list-style-type: none"> • Interactive presentation using job-aids • Role play 	<ul style="list-style-type: none"> • Presentation 3.4 • Job-aids of family planning-flip book and counseling kit • Samples of contraceptives • Role play scenario in presentation 3.4 and role play script • Skills

	<p>postpartum period using the balanced counseling strategy. Balanced counseling strategy like triaging helps to provide counseling customized to the clients' needs and excludes counseling on methods not appropriate for or acceptable to the client. This helps provide key information acceptable to the client in a short time.</p> <ul style="list-style-type: none"> • Through a role play by the trainers, using PPFP counselling flipbook and counseling kit, briefly demonstrate, explain and discuss: : <ol style="list-style-type: none"> 1. Healthy timing and spacing of pregnancy 2. Return of fertility 3. Choices of postpartum family planning methods 		checklists for PPFP counseling and PPIUCD counseling
3.5. Discharge counseling on danger signs for mother and baby and seeking care (20 mins)	<ul style="list-style-type: none"> • Facilitate discussion on areas for counselling at the time of discharge. Facilitate a group discussion on the danger signs for the mother and baby. Ask each learner to read each danger sign from SCC and relate it with the cases they have witnessed in their experience. • Discuss the importance of counselling the mother, family and the birth companion regarding the danger signs in the mother and baby and where to seek medical care for each promptly. 	Refer to SCC and discussion	Safe childbirth checklist
	Tea		
3.6. Respectful Maternity Care (RMC) (20 mins)	<ul style="list-style-type: none"> • Ask the learners about their understanding on RMC and what type of care they expect for themselves or their family and friends. • Show the RMC video or through a role play, highlight the actions a good provider must do with the client to make her feel satisfied and discuss the importance of RMC in improving quality of care. Explain client's rights for health care. 	Role play, Video RMC (MAF) and discussion	<ul style="list-style-type: none"> • Video (MAF) • Presentation 3.6 • Poster client's rights • Role play script
3.7. Do's and Don'ts of all four stages of labor (30 mins)	<ul style="list-style-type: none"> • Play a game on good and harmful practices of all stages of labour. Place the written chits in a bowl. Tell each learner to pick one chit and read it aloud and say whether this is a good or harmful practice and why. Other learners will not prompt. After each chit is presented and categorized, check for consensus among the learners for it and discuss the practice and their intention regarding performing it in future. • Discuss how the harmful practices can be converted into good ones. 	Game	<ul style="list-style-type: none"> • Do's and Don'ts written chits • Bowl
	Section 5: Creating a quality enabling environment in Labor rooms		

3.8. Infection prevention practices and biomedical waste management (30 mins)	<ul style="list-style-type: none"> • Make an interactive presentation and discussion on infection prevention and related practices. • Discuss principles of IP and bio-medical waste management • Discuss processing instruments by decontamination and disinfection. Demonstrate how to make 0.5% chlorine solution with one litre of water. • Discuss cleaning of instruments and processing by high level disinfection (HLD) or sterilization and storage of processed instruments • Discuss the types of waste and show the VIPP cards. Discuss segregation of waste using color coded bins by disposing the waste items written on the VIPP cards in the appropriate bin. • Using Gol video, discuss the protocols for cleaning labour rooms and its equipment, technique to manage spillage • Discuss waste disposal 	<ul style="list-style-type: none"> • Interactive presentation and discussion • Video • Demonstration using IP materials 	<ul style="list-style-type: none"> • Presentation 3.8 • Gol poster and video on cleaning labor rooms • VIPP cards • Color Coded bins, • Plastic tub, bleaching powder, plastic spoon, water 5 liters, plastic mug 1 liter • Flip chart and markers
3.9. Organization of Labor room as per Gol guidelines (85 mins) (15 mins for interactive presentation + 70 mins for group work and discussion)	<ul style="list-style-type: none"> • Using the presentation discuss benefits of keeping the labour room organized. Present the items to keep available and functional at all times in the labour room and their importance in emergency situations and providing quality care to save lives of women and newborns. • Show the before and after organization of labour room pictures and discuss the effects of both. • Divide the learners in two groups. Conduct a group exercise giving each group a scenario of their labour room and prompts in the form of items required in the labour room. Tell the groups to work together as a team in their respective groups to organize the prompts in the infrastructure shape of labour room provided to them. Give them 60 mins for this exercise and then each group will present their layout of the labour room with rationale for placing the items in it. Trainer to compliment the teams and discuss the gaps and suggest correction with rationale. One of the teams with most prompts kept properly may be declared as the winner. • Distribute Gol's guidelines on up-gradation of labor rooms and encourage the learners to read it for the latest recommendations on labour rooms. Present the key points of these recommendations. 	<ul style="list-style-type: none"> • Photographs based interactive presentation and discussion • Group work for organizing LR with prompts • Video 	<ul style="list-style-type: none"> • Presentation 3.9 (photograph based) • Video of organizing labour room (Gol) • Case scenario based group exercise
Lunch break			

3.10. Recording and reporting (30 mins)	<ul style="list-style-type: none"> • Discuss the importance of appropriate data recording and timely reporting and how to use the information for improvement and further planning for quality of services. • Orient the learners to the labour room register template, answer their queries on items to be recorded • Orient the learners to the monthly reporting format and answer their queries on items to be recorded. • Discuss who prepares the monthly reports at their facilities. Discuss the importance of orientation of the concerned person and the facility head regarding the reporting formats. 	Discussion with handouts	MNH toolkit- LR register, monthly reporting formats
3.11. Post-training knowledge assessment and OSCE Learners' feedback of training Sharing knowledge and OSCE results (45 mins)	<ul style="list-style-type: none"> • Tell the learners that we have come to the end of our training and would like to know what have we learned during the three days by the knowledge and skills assessment. • To see the effectiveness of training, conduct post-training knowledge assessment and OSCE for all the learners as described in the FG. • While the co-trainer is checking and scoring the results, ask the learners to complete the Learners' feedback form by responding to the questions in it. Take the completed feedback forms. • Share the results of the knowledge assessment and OSCE and discuss the correct answers of knowledge assessment and OSCE for those which were incorrect. Compare the pre-training and post-training results and the gain in knowledge and improvement in skills. Tell the learners how many scored 80% or more during the pre-training assessments and how many scored this percentage in post-training results of knowledge and post-training skills assessment. • Identify the learners who could not achieve the pass score of 80% and develop a post-training supportive supervision and mentoring plan for them at their work site later. 	Learners' activity observed by and presented by trainers	<ul style="list-style-type: none"> • Knowledge assessment questionnaire and OSCE sheets one per learner • Two skill stations with instruments trays and models • Learners' Feedback form one for each learner
Tea			
3.12. Action planning (20 mins)	<ul style="list-style-type: none"> • Discuss the action planning with learners through an activity on low hanging fruits 	<ul style="list-style-type: none"> • Group activity on low hanging fruits 	Instructions for activity, prompts, marker pens, flip-chart, post-its
3.13. Next steps, certificate distribution and closing (30 mins)	<ul style="list-style-type: none"> • Thank the learners for their active participation and discuss the next steps for them after they return to their work site. Encourage them to inform their facility heads regarding completing the training and updates and skills learned. Share the material 	<ul style="list-style-type: none"> • Facilitation and remarks by trainer/Government or facility official 	Certificates of participation for each learner.

	<p>provided during the training with the facility heads to ensure their support and enabling environment for you to transfer the learning into practice. With their support, improve the practices before, during and after delivery and convert the harmful or unnecessary practices to recommended best practices.</p> <ul style="list-style-type: none"> • Distribute the certificate of participation and close the training. 		
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