



World Health
Organization

Essential newborn care course

TRAINER'S GUIDE



Trainer's Guide

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PART 1

Organization and administration of the ENCC

1. Introduction

1.1 Why is this course needed?

An unacceptable number of babies around the world die in the first week of life with the highest number dying within the first 24 hours of birth.¹ Many of these deaths occur to babies born too early and too small, or with infections, or to babies asphyxiated around the time of delivery. Studies have shown that many newborn lives can be saved by the use of simple low technological interventions. Interventions such as:

- supporting breastfeeding,
- providing adequate warmth,
- ensuring good hygiene and cord care,
- recognizing early signs of danger and providing prompt treatment and referral,
- giving extra care to small babies, and
- having skilled health workers attend mothers and babies at delivery and in the immediate postpartum period can all increase a newborn baby's chances of survival.

The Essential Newborn Care Course (ENCC) aims to ensure health workers have the skills and knowledge to provide appropriate care at the most vulnerable period in a baby's life. Health workers are taught to use WHO's Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice (the PCPNC Guide) – and particularly the sections concerned with newborn care – that provides up-to-date evidence-based information and management of babies with a range of needs in the initial newborn period.

1.2 Who is the course for?

The course is intended for 12 to 24 (maximum) health workers already working or intending to work in a primary-level health facility with mothers and babies between birth and at least the first seven days of life.

Apart from the doctors, other health workers are assumed to:

- have completed a secondary level of education and
- have some level of health-care training.

1.3 Duration of the course

The ENCC takes four or five days to complete (a minimum of four days to cover the core topics) and is designed to be flexible; it can be scheduled to suit the needs of either the course organizers or the participants. The following examples of the different course timetables show the variety of options that can be used:

- Four to five consecutive study days;
- One or two study days a week spread over four or five weeks;

¹ Neonatal Survival 1. 4 Million neonatal deaths: When? Where? Why? *Lancet*, March 2005.

- *Eight to 10 half days over a period of days or weeks; or
- *Individual sessions that can be taught over a number of days or weeks.

*It is recommended that the clinical practices be included as part of the study days or weeks in the third option and that the Clinical Practice–Task Sheets are used as soon as possible after the individual sessions under in the last option.

Examples of the various timetables can be found in Part 3 section 10 of this guide.

1.4 Where to hold the course

The course should take place close to one or more health facilities with:

- A minimum of 20 to 30 deliveries a day
- Easy access to postnatal wards
- A special care baby unit
- A paediatric outpatients clinic and/or health centre with a baby clinic
- Baby Friendly Hospital Initiative (BFHI) status.

The course should be taught in a fully equipped training facility (See section 2.4).

1.5 Funding the course

Before a course can take place it is necessary to ensure that funds are available to cover all the following expenses:

- Participants travel and other expenses (as appropriate)
- Trainers travel, other expenses and free or special compensation (if required)
- Payment for clerical support staff
- Travel to and from the health facility (as needed)
- Stationery, equipment and items for demonstration
- Refreshments
- Accommodation and meals (if not covered by daily allowances).

Printing costs should also be considered for course materials such as the Trainer’s File, Participant’s Workbooks, copies of the PCPNC Guidelines, and any supporting references and recording forms. If a number of courses are expected to be held it is more cost effective to print larger numbers of the course materials than needed for a single course.

If translation of materials is necessary funds need to be identified to cover this work. To ensure the translation is correct, extracts from the translated materials should be translated back into English and compared to the original text.

2. Planning and administration

2.1 Adapting the training materials

This is a generic training course. The course materials should be adapted before using them so that they are consistent with national treatment guidelines and policies.

If the PCPNC Guide is already being used in health facilities, the ENCC materials should be adapted in line with changes made to the Guide. If changes are necessary they should be completed before the translation of any parts of the course.

2.2 Selecting participants

The success of the course depends upon inviting participants who will benefit from the course and be able to use their updated skills and knowledge in their everyday work with mothers and babies. Some staff may also be required to pass on what they learn from the course to their colleagues; it is therefore recommended that:

- participants attend in pairs or in teams and
- at least two health workers are invited from the facility where the clinical practice (CP) sessions are held.

It is important to keep the numbers of participants between 12 and 24 to ensure that group work and CP sessions can be properly facilitated.

2.3 Selecting trainers and clinical facilitators

Trainers

The Essential Newborn Care Course is designed to be taught and facilitated by at least two trainers who:

- have completed the full TOT for the Essential Newborn Care Course,
- are already knowledgeable and skilled in the theory and practice of newborn care, and breastfeeding
- are familiar with and/or use the PCPNC Guidelines.

Clinical facilitators

The CP and group sessions should be facilitated by health workers who:

- are from the health facility where clinical sessions are held;
- are familiar with the PCPNC Guidelines;
- are experienced in the practical care of newborn babies and their mothers;
- can choose appropriate mothers and babies for participants to visit and organize visits to different departments within the health facility (see the CP special instructions for trainers and clinical facilitators in Session 9);
- supervise groups of four participants during the CP sessions and during class group work – clinical facilitators may be asked to supervise individual or small groups of participants at other times if CP sessions are organized between study days (see Timetable 4, section 10, in Part 3 of this guide);
- will discuss participant's experience from CP sessions; and
- have attended a half-day preparation session on group activities and clinical sessions (see checklist 3 – “Checklist for preparing clinical facilitators” – in Part 3 of this guide).

Clinical facilitators **MUST** be available for the full duration of a course.

2.4 Course facilities

Classroom requirements

This course requires:

- one main classroom to accommodate the entire class, trainers, facilitators and visitors, and
- a second smaller classroom for group work.

Each room should be large enough for two or three groups of four participants with their trainer/clinical facilitator to work without disturbing the other groups.

Classroom furniture

The classroom should have:

- at least one table for each group of four participants,
- an additional two tables, one for reference and course materials, the second for the trainer's use, and
- chairs should be easy to move so that they can be rearranged for group work.

The classrooms should be close to the clinical area.

Visual aid equipment required in each classroom includes:

- *PowerPoint projector
- A video or DVD player
- A flip chart and stand
- Wall space for posting flip chart sheets.

*Where it is not possible to have a PowerPoint projector in all classrooms for group work, it will be necessary that participants use their handouts.

Clinical practice facilities

If the health facility is not near the classroom, transport will be required for participants, trainers and clinical facilitators.

A room in the clinical area will be required near the area where the CP takes place. This room can be used for participants, trainers and facilitators to meet before the practice begins and for follow-up discussions during and after clinical visits.

Accommodation and meals

Participant accommodation with breakfast and evening meals should be close to the classroom and health facility.

During the teaching day, refreshments such as coffee, tea, soft drinks and water should be made available at break times, to be taken in or near the classroom. Drinking water should also be available at all times in the classroom.

2.5 Arranging the clinical practice sessions

This course covers a wide range of clinical situations. Its success depends upon the adequate CP opportunities within the health facility and the cooperation of the staff, mothers and babies. If the course takes place in an unfamiliar area, advice must be taken from local contacts. The following steps should be taken to ensure that the health facility is suitable:

A. Visit the health facility before the course

This is essential in order to:

- Gain the support and cooperation of the director and staff of the health facility
- Verify that the health facility has appropriate amenities to support the training course

- Confirm that the health facility practices are consistent with the PCPNC Guide and the BFHI.

(See Checklist 2 – “Preliminary visit to a health facility before a course” – in Part 3 of this guide.)

B. Prepare the facility staff

Inform staff about the course and why it is being held in their health facility and what, if any, their role is to be.

(See Checklist 2 – “Preliminary visit to a health facility before a course” – in Part 3 of this guide.)

C. Involve facility staff in the course

Involve clinical staff from the host health facility as clinical facilitators (see section 2.3 above). The local knowledge and expertise of local clinical staff is a valuable resource.

Invite at least one or two staff to attend the full course (see section 2.2 above). Invite other clinical staff to attend some of the presentations if they have time. Leave a draft timetable at the health facility during the preliminary visit.

Clerical support

Clerical assistance will be required during the course for administrative tasks, photocopying, etc. If possible, involve clinical staff from the host health facility or training establishment (if different).

An outline of clerical tasks should be provided setting out:

- the nature of the tasks to be completed,
- how much time will be required each day, and
- who will provide the necessary paper and other materials.

2.6 Planning the timetable

The timetable has to be flexible enough to meet local, regional or national needs. It can be organized in a number of ways as described in section 1.3 and the model timetables in Part 3 section 10 of this guide. Times for the beginning and ending of each study day may differ from those in the model timetables. Clinical practice sessions in some health facilities will take place in the afternoons and in others will take place in the mornings.

- In Part 3 section 10 of this guide there are six examples of the ways the timetable can be organized. The first timetable is for a period of four consecutive study days with CP sessions held in the afternoons covering the full range of basic core competencies necessary to care for the newborn baby. It includes the CP as part of the training period. This timetable can also be utilized on one study day a week for four weeks or eight half days.
- The second timetable is also a four-study-day timetable but with the CP sessions in the mornings.
- The third timetable is for a five-day course with clinical practice sessions in the morning. This timetable is highly recommended because it provides enough time for ALL sessions to be taught and for longer discussions to take place.

- The fourth timetable is ideal for participants who all come from the same health facility and will be able to organize their CP and discussions in their own time with a clinical supervisor. This timetable is designed to be used on one day a week over a minimum period of three weeks. It can also be used over six to eight half days if preferred.
- The fifth and sixth 1- and 2-day timetables concentrate on specific areas and can be used to update participants.

Opening and closing the course

The course begins with an opening ceremony and ends with a closing ceremony where certificates are given to the participants who successfully completed the course. A local dignitary should be invited to open the course. A suggested outline of information that should be included in the opening presentation is provided in Checklist 9 – “Checklist of Opening session for Essential Newborn Care Course” – in Part 3 of this guide.

3. The Essential Newborn Care Course

3.1 Course materials

The materials needed by a trainer to teach the Essential Newborn Care Course are provided in the Training File and include the following:

- The Trainer’s Guide Parts 1, 2 and 3
- 14 session units divided into five modules;
- The Clinical Practice Workbook
- CD-ROM and/or overhead transparencies and video clips;
- A copy of the PCPNC Guidelines; and
- The Director’s Guide.

Participant’s Workbook

Each participant receives a workbook containing four module sections. These contain:

- Handouts that can be used for note taking in each session
- Worksheets to complete from each taught session
- Answers to the Worksheets
- Clinical practice instructions and task sheets
- The PCPNC Guidelines (note there may be only one copy available between two participants).

The Participant’s Worksheets can be used in different ways:

- During or after each session (if there is enough time)
- At the end of each day as a homework exercise
- After the course as a revision exercise.

3.2 Structure of the course

The ENCC consists of approximately 24 timetabled sessions with two additional optional sessions (see Model Timetables 1 and 2 in Part 3 section 10 of this Trainer’s Guide). Of the 24 sessions, 20 are classroom based and four are Clinical Practice sessions. The course is divided into five modules.

The first four modules are organized according to information that should be taught together. Each of the four modules takes between one to one and a half days to cover.

The content of each module is comprised of the following:

Module 1 – Care of the baby at the time of birth

A. Sessions:

- 1 – Introduction to PCPNC (Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice)
- 2 – Universal precautions
- 3 – Care of the baby at the time of birth
- 4 – Keeping the baby warm

B. Module 1: Simplified CP Instructions, Checklist and Task Sheet

C. *Clinical Practice: General information for trainers and clinical facilitators

D. PowerPoint slides/overheads/video clips: Module 1

* Information contained in the document “Clinical Practice: General information for trainers and clinical facilitators” is general to ALL the clinical practices in Modules 1, 2, 3 and 4.

Module 2 – Examination of the newborn baby

A. Sessions:

- 5 – Breastfeeding the newborn baby: Ensuring a good start
- 6 – Communication skills
- 7 – Examination of the newborn baby

B. Module 2: Simplified CP Instructions, Checklist and Task Sheet

C. PowerPoint slides/overheads/video clips: Module 2

Module 3 – Care of the newborn baby until discharge

A. Sessions:

- 8 – Resuscitation of the newborn baby
- 9 – Routine care of the newborn baby

B. Module 3: Simplified CP Instructions, Checklist and Task Sheet

C. PowerPoint slides/overheads/video clips: Module 3

Module 4 – Special situations

A. Sessions:

- 10 – Breastfeeding and the newborn baby: Overcoming difficulties
- 11 – The small baby
- 12 – Alternative methods of feeding a baby

B. Module 4: Simplified CP Instructions, Checklist and Task Sheet

C. PowerPoint slides/overheads/video clips: Module 4

Module 5 – Optional sessions

A. Sessions:

- 13 – Giving an injection
- 14 – Kangaroo Mother Care

B. PowerPoint slides/overheads/video clips: Optional sessions

Note that the sessions in Modules 1, 2, 3 and 4 provide the basic course materials. All sessions vary in length from 15 minutes to 90 minutes, with most sessions between 40 to 60 minutes long.

3.3 Length of the course

The ENCC is approximately 28 to 32 hours in length, which includes at least six hours of hospital-based clinical demonstration, observation and practice.

3.4 Order of the sessions

This course is arranged in modules to give it flexibility. Each module contains a number of session units that are arranged in a logical order for teaching. It is recommended that the modules be taught in order, i.e. Modules 1, 2, 3, and 4 etc. The order of the sessions within each module may vary however from course to course depending upon local needs, e.g. whether clinical sessions are held in the mornings or afternoons, if the course is to teach basic skills or a specialized area. Examples of the order of teaching sessions can be seen in the suggested timetables in Part 3 section 10 of this Trainer's Guide.

The CP sessions are designed to observe and practise skills learned by demonstration earlier in the classroom. It is therefore important that certain sessions are held before the clinical sessions take place. Module 1, however, can be more flexible. It contains three sessions which should be covered before the first CP, but it is possible to organize the day so that Session 2 – Universal precautions is taught before the CP and Session 3 – Care of the baby at the time of birth and Session 4 – Keeping the baby warm are taught after the CP. Both of these Sessions have components that can be completed before or during the CP. It is suggested that before going on the first CP the role play of a delivery is performed (from Session 3) and that the alternative session outline in Session 4 is followed. This has a 20-minute practical exercise in the clinical area.

3.5 Organization of the individual sessions

Each session booklet contains:

- A front page covering the session objectives
- A session outline with suggested times for each part of the session
- A checklist of materials and preparation needed for the session
- A list of supporting references.

The times suggested for session length and individual parts of each session are approximate and can be varied to suit the needs of the trainers or the participants, for example, if extra time is needed for discussion.

3.6 Additional course sessions

Daily review session

Beginning from the second day of a Course start with a brief review of the previous study day or half day. The participants should be asked if they have any questions or comments from any of the topics covered on the previous study day. This review may last between 10 to 30 minutes.

Replacement session

These sessions have been put into some of the suggested timetables (see Timetable 2). They can be used if any session during the course has been missed, not completed, is problematic or if there is a session that needs more explanation or more practical demonstrations.

Practice review session (see section 3.9 “Clinical Practice information”)

3.7 Course CD-ROM

The course CD-ROM contains:

- Module 1
- Module 2
- Module 3
- Module 4
- Module 5
- Clinical Practice and Classroom Workbook
- Participant's Workbook
- Director's Guide
- Trainer's Guide Parts 1, 2 and 3
- PowerPoint Viewer 2003

Overhead transparencies can be printed from the CD-ROM if required.

Video clips

There are a total of 24 short video clips in the following sessions:

- 5 – Breastfeeding and the newborn baby: Ensuring a good start
- 7 – Examination of the newborn baby
- 8 – Resuscitation of the newborn baby
- 9 – Routine care of the newborn baby
- 10 – Breastfeeding and the newborn baby: Overcoming difficulties
- 11 – The small baby
- 12 – Alternative methods of feeding
- 14 – Kangaroo Mother Care

The video clips have been put into the Microsoft PowerPoint presentations, which accompany these sessions. The clips have also been incorporated into the appropriate slide according to the session outline.

IMPORTANT information about the video clips

- PowerPoint slide, overhead and video clip files (directory) are in each of the 5 modular sections on the CD-ROM.
- Each file contains:
 - The individual PowerPoint presentations for that module.
 - The individual video clips that provide a link to the video clips in the PowerPoint presentation.

Do not delete any of the individual video clips from these files on the CD-ROM. If you do, you will not be able to view the video clip in the powerpoint presentation.

- To view the video clips using Microsoft PowerPoint, examples of viewers that can be used are Windows Media Player, Quick Time and Real One Player.

If you do not have Quick Time or Real One Player on your computer, both of these programmes can be downloaded using the following Internet website addresses:

- Quick Time: <http://www.apple.com.au/quicktime/download/win.html>
- Real One Player: <http://www.real.com/player/>

When you open the Real website look on the right side of the screen and download the basic free player.

The CD-ROM also contains a copy of Microsoft PowerPoint Viewer, which can be used to open the PowerPoint presentations if you do not have Microsoft PowerPoint on your computer.

How to activate the video

The video clips should play directly from the PowerPoint slide. A slide containing a video clip will require one click of the mouse to bring the title onto the screen; a second mouse click to activate the video clip; and a third click to continue to the next slide.

Reference materials

Titles of available and recommended reference material are listed on the front page of the sessions. A copy of all the reference material should be made available throughout the course.

- Integrated Management of Pregnancy and Childbirth. Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice
- Managing Newborn Problems: A guide for doctors, nurses and midwives. Dept. Reproductive Health and Research. WHO, Geneva
- Care of the Umbilical Cord: A review of the evidence (WHO/RHT/MSM/98.4)
- Basic Newborn Resuscitation: A practical guide (WHO/RHT/MSM/98.1)
- Thermal Protection of the Newborn: A practical guide (WHO/RHT/MSM/97.2)
- Breastfeeding Counselling: A training course (WHO/CDR/93.4)
- HIV and Infant Feeding, 1998 (WHO/FRH/NUT/CHD 98.1-3)
- Hypoglycaemia of the Newborn: 1997 Review of the Literature (WHO/CHD/97.1)
- Mastitis, causes and management, 2000 (WHO/FCH/CAH/00.13)
- Training courses in: Breastfeeding Counselling; HIV and Infant Feeding counselling (WHO/UNICEF. WHO/CDR/93.3-5 and WHO/FCH/CAH/00.2-4)
- Kangaroo-mother care: A practical guide. RHR, WHO Geneva 2002
- Standards for maternal and newborn health. RHR, WHO Geneva (in preparation)

3.8 Teaching methods

Information on how to use different teaching methods in the sessions is described in “A quick guide to teaching sessions” in Part 2 of this Trainer’s Guide.

The course uses a variety of teaching methods, which include:

- Lecture presentations
- Demonstrations
- Pair and group work
- Role play
- Clinical observation and practice
- Discussions
- Case study exercises.

It is advisable to vary the methods used during a teaching day in order to maintain the attention of the participants. Each session includes full teaching instructions.

3.9 Clinical practice information

The CP element is a vital part of this course. It is designed to give participants the opportunity to observe and practice skills seen and learned earlier in the classroom with mothers and babies in the delivery room, ward areas, special baby care units and clinics.

There are four 90-minute clinical practices:

- Clinical practice 1 – Care of the newborn baby at the time of birth
- Clinical practice 2 – Examination of the baby
- Clinical practice 3 – Routine care of the newborn baby
- Clinical practice 4 – The baby with special needs

General points

The CP should take place at a convenient time for the health facility and in facilities where participants are most likely to meet the full objectives of the individual practices (see the objectives on the first page of each CP information and task sheets that are detailed after the sessions in each module).

Clinical practices need to be organized well in advance of the course and the clinical session. This ensures that appropriate mothers and babies can be selected for participants to visit or to coincide with a care activity. Clinical practice group work is restricted to four participants, although many of the CP activities are suitable for participants to work in pairs or individually, supervised by one trainer or clinical facilitator.

Clinical practice instructions and task sheets

For more information about the Clinical Practice it is important to read:

- “Clinical Practice: General information for trainers and clinical facilitators”, which is the first document in the Clinical Practice Workbook.

The clinical practice instructions are contained in Task Sheets and can be monitored using the Checklists.

There are two sets of Clinical Practice Task Sheets and Checklists in Modules 1, 2, 3 and 4:

- A simplified combined version, which is recommended for courses of 4 or 5 consecutive days (examples Timetables 1 and 2 in Part 3 section 10 of the Trainer's Guide), and where Clinical Practice sessions are limited in time. These are in a file called “Simplified CP instructions, Checklist and Task sheet”, which comes after the sessions in Modules 1, 2, 3 and 4.
- Individual instruction and Task Sheets and Checklists are recommended for courses taught over a longer period of time; for example, one day or half a day a week, or the sessions are not taught in the order suggested in the first two timetables (see Part 3 section 10 in the Trainer's Guide). These documents are very useful where clinical work can be spread over a longer period of time than in a 4- or 5-day course. The individual Task Sheets and Checklists are Parts 2 and 3 in each session folder.
- If the optional sessions are taught, the individual CP task sheet and checklist should be used.

Clinical practice checklists

Clinical practice checklists can be used to monitor the progress of participants during the CP sessions and practical demonstrations. The checklists can be used to provide a numerical score to assess the participant's achievement either in a particular skill or for overall performance.

KEY to scoring Clinical Assessment Form

√	Tick the BOX if a correct answer is given or a skill is performed well
X	Cross the BOX if a wrong answer is given or a skill poorly performed
R	Put an R in the BOX if participant is to repeat the task
O	Circle the BOX if there is a problem

A grid for facilitators to make additional comments is provided following each checklist.

There is a clinical checklist for each practical skill as described in the previous section (“Clinical practice instructions and task sheets”).

Alternative clinical practice arrangements

If a course is timetabled for one or half a day a week, CP can be arranged during the time between the study days. This would either be in the participant’s own time or during their normal clinical duties. A clinical facilitator should be asked to work with an individual or a group of up to four participants in the same way as for participants on a consecutive day course. A suggested outline for the individual study days is provided in Part 3 section 10 of this guide. The CP should be at least 90 minutes in length and should include time for discussion.

During discussions between participants and the clinical facilitator the following points should be included:

- How the practices covered in the clinical session may influence their own future practices.
- Any particular aspect of the CP that they wish to share with the group on the next study day.

Special clinical practice arrangements: Attending a delivery

In the first clinical practice one of the tasks is to attend and observe a delivery. It is not possible to predict the time a baby will be born, which means some groups of participants may not be present for a delivery during the short time allowed for the clinical practice session. The following suggestions are therefore made to ensure all groups of participants see a delivery and immediate newborn care:

- If a delivery is predicted to take place during the practice review session the group of participants and their clinical facilitator should attend the delivery.
- If participants are staying close to the health facility, arrangements can be made for them to stay in the hospital until later in the evening on the first day. In this way they can attend any deliveries that take place (with the mother’s permission).
- Any groups who have not seen a delivery by day 2 of the course should attend any deliveries that take place during CP2

Practice Review sessions

The practice review sessions should follow each CP. They are primarily aimed at discussing practice issues. The sessions do not have a set outline, although participants are given topics related to the CP and for discussion during the practice review session. During the fourth practice review session participants are expected to complete their plan of action.

The practice review sessions should include:

- The set topic for discussion
- Issues arising from the CP
- Short case studies from the clinical area or previous experience illustrating the CP themes
- Issues arising from the topics covered on that study day.

The trainer(s) leading the session should prepare an agenda.

It is recommended that the class be divided into two sections if there are 16 or more participants. Each section of the class should be in a separate room with a trainer and group clinical facilitators. This ensures that each participant has the chance to join in the discussion and share experiences.

3.10 Evaluating and monitoring the course

Participants evaluate the course by completing:

- An evaluation questionnaire, which can be completed either at the end of each study day or at the end of the course. This formative evaluation is particularly useful if filled in daily because it gives the trainers and clinical facilitators the opportunity to discuss issues raised and make any necessary changes.
- This evaluation sheet should be kept as simple as possible. Two examples of formative evaluation sheets are provided in Part 3 section 11 of the Trainer's Guide.

The clinical practice checklists provide information on participant's practical skills and ability to use them appropriately.

4. Plans of action and follow-up activities

After attending a training course it is important to know if participants have benefited from the course. Plans of action and follow-up activities are particularly valuable. It is recommended that:

- Participants are encouraged to develop a simple plan of action during the course.
- The plan-of-action should outline how they will apply skills learned or how they will pass them on to colleagues.
- On the last day of the course participants should finalize their plans of action during the "Practice review session" so that a copy can be taken back to their workplace.
- When letters of invitation are sent to health facilities, information is included that participants are expected to produce a plan of action that they will bring back to the workplace on their return.
- Follow-up activities may include:
 - Course organizers/trainers visiting participants 6 or 12 months after the course to find out how much of the plan of action has been followed and work out how to overcome any problems.
 - Course organizers/trainers contacting ALL participants by letter/questionnaire 6 to 12 months after the course.
 - The Director/manager of a health facility meeting with the participant at regular intervals.
 - Feedback to colleagues in the participant's own workplace.

The follow-up activities may vary from place to place depending upon the reasons participants have been chosen to attend the course or what is

expected from them when they return to their workplace. In all cases the follow-up activities should be realistic, practical and possible to achieve.

PART 2

A quick guide to teaching sessions

1. Introduction

This “quick guide to using the teaching sessions” gives you an overview on how to prepare for teaching the sessions in the Essential Newborn Care Course.

2. The Training File

The Training File contains all you need as a trainer to take participants through the course (see Part 1 section 3 of this Trainer's Guide for a detailed list of what the file contains).

The contents of the Training File are loose-leaf so you can add notes to any part of the file or the sessions as you work. These notes will help you in future courses as you develop your own way of teaching. As you work through the sessions, and before you begin to teach, highlight or underline important points with a coloured highlighter to help you to remember key information.

Using this file

When you teach a session you have a number of options. For example, you can:

- take the complete file with you every day to the course
- take the parts of the file you need for a particular day – such as the individual session booklets, CD-ROM, etc. – and leave the sections you do not need in the original file.

It is strongly recommended that you put the sections of the file you need for a particular day in a smaller separate ring binder file so that you do not lose any pages or booklets. You are also strongly advised to put the Training File back together at the end of each day and before preparing for the following day.

3. Preparing for and giving a presentation

Preparation: Study the session content

You will find brief instructions in the text of each session. These give you details of when to use video clips, slides or overheads, suggested questions, and when to introduce role play or group work.

Before you give a presentation, read the session through carefully; study the overheads and video clips and any other materials in the session unit. Look carefully at ALL the instructions you are given.

Note the use of visual tags to help you

Instruction to facilitator are in green text.

SHOW Slides/overheads or other material to be shown to the class.

USE PCPNC Use PCPNC Guide.

MAKE THESE POINTS

ASK Questions to ask to the class

DEMONSTRATE

TELL Instructions or messages for you to give to the class.

DISCUSS Specific points for discussion with the class.

How to give the presentation

The session is ready for you to teach. The session booklet can be used as your session notes. As you become more familiar with the contents you may find that writing down the key points will be enough to remind you of the sequence of information. Go through the text, mark it and add your own notes to remind you about points to emphasize or points of special local importance. Try to think of ways to present the information naturally. Keep any notes you make with the session for future reference.

The front page of each session has an outline with key headings to also remind you of the order of the information in the session.

When first teaching the ENCC course, it is recommended that you follow the prescribed sessions instructions. Once you are thoroughly familiar with the content, you do not have to give the presentation exactly as it is written. However, it is important that you follow the logical order of ideas in the presentation. This is necessary even if you are an experienced teacher and knowledgeable about the topic you are presenting.

Make sure you cover ALL the points in the session, including information from answers to suggested questions. The content is consistent with information in the PCPNC Guide and should not be changed except to be updated or to bring it in line with national guidelines. **DO NOT GIVE EXTRA INFORMATION.**

Note any role-plays, demonstrations or other parts of the session that may need to be organized in advance. Make sure you have ALL the materials in the checklist on the front page of the session before you begin.

Prepare your slides or overheads (ADD NATIONAL ISSUES)
Look carefully at the slides/overheads for the session.

Before the session, make sure that:

- the screen is well placed for everyone to see the images clearly
- the PowerPoint slides/overheads are clearly focused and large enough to be easily seen and/or read by participants
- the room is sufficiently dark.

Read the instructions in the session that accompany the PowerPoint slides/overhead. These will tell you if you need to show only part of the slide to begin with. Explain the PowerPoint slides/overheads carefully as you show them. They are aids to learning and without some explanation they do not mean very much. Explanations are provided in the session texts.

When you point to the screen to indicate a specific part of the PowerPoint slide/overhead use a pointer, stick or pencil. If you use overhead transparencies, you can either point to the screen or point out the place you want to indicate on the projector – which has the advantage that you remain facing the participants and can remain seated.

When you are teaching it is better not to turn your back on the participants for more than a short time. Keep looking at them and maintain eye contact so that they feel you are speaking to them personally.

Make sure that ALL participants can clearly see the screen. Either stand to the side or sit down when you are showing PowerPoint slides or overheads. Ask the participants if they can see the screen easily. Look to see if any participants are bending to see the screen or a demonstration because you are in the way. If this happens, stop and adjust your position before you continue.

It is often helpful when presenting PowerPoint slides or overheads to ask participants to come to the screen to point things out to the others. This technique is recommended for Session 5 – “Breastfeeding the newborn baby: Ensuring a good start”.

Some slides are optional. Decide before the session whether or not to include them. An example is Session 8 – “Resuscitation of the newborn baby”, where some or all of the PowerPoint slides or overheads are used to reinforce the information given.

Remember that participants' handouts are copies of the slides from each session.

Involve the participants

To cover a lot of information in the limited time available on a course you sometimes have to use lecture presentations. It is helpful during lectures and other sessions to ask questions and to check that participants understand in order to keep them thinking about the topic. This more interactive approach helps to keep participants interested and involved, and is usually a more effective way of learning. Ask open questions (which you will have learned about in Session 6 – “Communication skills”) so that participants have to give an answer that is more than a “yes” or “no”. You will notice that most of the questions in the text are open questions.

More information about the questions

Suggested questions are provided for all the sessions. The questions have been carefully chosen so that participants can either answer from what they have already learned on the course or from their own experience. If participants have difficulty giving you an answer, you may find it helpful to ask the question again in another way. Encourage participants to give an answer even if it is not the correct one. Accept all the answers you are given and thank participants for the suggestions they make. When someone answers correctly, you may want to “expand” on his or her answer to make sure that everyone else has understood. Answers or notes are provided with the text of each question. Alternative questions may be asked BUT YOU MUST STILL COVER THE INFORMATION CONTAINED IN THE ANSWERS OR NOTES.

When you ask the class a question, ask participants to give you their answers one at a time rather than all at once. Do not allow the same people to answer all the questions; try to encourage quieter participants

to respond. Ask someone by name who has not spoken before to answer or walk among the class and ask participants in different parts of the classroom. When you ask a question look at the entire class and avoid asking only participants sitting in the front row for the answers!

If you think you are running out of time, you can leave out some questions but make sure you give the information to the class.

Teaching methods for presentations

Discussions

Discussions are encouraged in all sessions but they should be kept to the subject area covered by the session. The discussion should not become dominated by either a trainer or an individual participant, or become focused on another issue, leaving discussion on the original topic unfinished.

You must be very strict with the timing of discussion. It is easy to forget how long discussion has taken. If you know the subject being discussed will come up again in another session, tell participants they will have another opportunity to discuss the topic (make a note of the topic so that you do not forget). You can also decide to have more discussion on a particular topic in the Practice Review session.

Role-play

Read the instructions carefully. Make any local changes you need before the role-play. Ask participants BEFORE the session to take part in the role-play. If possible, ask them the day before. Explain carefully what you want them to do and give written instructions to help them to remember what to do – this is especially important if there are any spoken lines to remember.

If you feel that participants are not ready to do a role-play themselves, do the role-play yourself with another trainer. This helps participants to understand what role-play is about and they can see that making mistakes does not matter, so they will feel more confident to try themselves next time.

Ask participants to speak loudly and clearly. Always thank them after the role-play has finished.

Develop lists and schema

In some sessions you and the participants together have to develop lists for a topic, on boards or flipcharts. Plan these lists carefully before the session. Make sure that you have enough flip chart paper and appropriate pens.

In some sessions you are asked to put headings on a board or flip chart in advance. It is important to follow this instruction because it takes a lot of time to mark up headings during the session.

Reading

In some sessions you are required to ask participants to read a section of text to themselves either during the class or as homework on the day before.

If it is difficult for participants to absorb information when they read it to themselves, as an alternative you can ask them to read it aloud. Each participant takes it in turn to read one sentence or section of the text. You can discuss the ideas and ask questions after each point. You will find that

this technique is used in many sessions. If there are numerous points, ask different participants to read each point. You can start with participants sitting in a particular row in the class, beginning with the participant sitting at one end of the row reading the first point and continue along the row until the last point is reached. In this way you do not have to keep choosing new participants to read a point, which takes more time.

Lecture presentations

Many participants will be familiar and comfortable with a lecture. For this reason, it is useful to begin a course with a lecture-style presentation. In sessions that use this teaching method, questions are used to encourage class participation. Most of the sessions in this course are very interactive; but on the first day, you may find participants are slower to contribute than later in the course.

Remember to ask participants to use their handouts to write down notes from the session.

Session length

The majority of sessions are 50 to 60 minutes in length; some sessions are 90 minutes, such as Session 3 – “Care of the newborn baby at the time of birth”. It is suggested that you read through the 90-minute sessions and decide where you could stop the session for a 5-minute break before continuing. During the break you could have a class activity involving some form of active movement. For example, ask participants if they know of any “warm-up” activities that could be used.

4. Preparing for and giving a demonstration

Demonstrations

The practical nature of this course means demonstrations are an essential part of many sessions. Instructions for demonstrations are given in a grey box. It is important that all participants can clearly see what is happening during a demonstration. You can achieve this by:

- Rearranging the chairs in a semi-circle around the demonstration (as in the first session on breastfeeding) and
- Demonstrating to small groups of participants (as in the clinical sessions).

You will find a checklist of materials required for a demonstration on the front page of the session booklets. In your demonstration you should use materials easily obtained in the health facility or the local market. Make sure you have all the materials well before the session takes place and, if possible, before the course starts.

You are expected to be competent in the topic you are to demonstrate. If you need more practice, do this before the course begins. You may have to simplify the explanations and instructions according to the needs of your participants; this is essential in the resuscitation practice and in the session on how to give an injection.

If local or national guidelines are normally followed for any topics, these should be used (or updated as necessary).

Study the instructions

You should already have seen the demonstrations in the course during the preparation week.

Before you give a demonstration, read through the instructions carefully so that you are familiar with them. Do this even if you have given the demonstration before so that you do not miss any important points.

You may find it helpful to practise the demonstration again before the class begins. If the demonstration requires a second person, practise carrying out one practice demonstration with them before the session.

Collect the equipment and prepare the place to give your demonstration. Make sure that you have all the equipment you need for the demonstration before the session. Prepare the place where you will give the demonstration, making sure you have enough space. You may want participants to rearrange their tables and chairs; plan how you will do this so that it can be done quickly before you begin.

If you have overheads to show as part of the demonstration, ask someone to show them when you need them. Make sure that you have a board or flip chart paper to write things down if required.

Giving the demonstration

Give the demonstration slowly, step-by-step, and make sure all participants are able to see what you are doing. If necessary, ask them to move closer to you.

As you give the demonstration, take every opportunity to let participants handle and examine the equipment that you use. Where possible let participants practise the skill taught either in the classroom or in the clinical practice sessions.

Prepare your assistant

You may need someone to help you to give the demonstration; for example, someone to pretend to be a mother. Ask a participant to help you. Ask for help a day or two before a demonstration, so that assistants have time to prepare themselves. Discuss what you want them to do and help them to practise. If necessary, write down on paper what you want the participant to do.

At the end of a lecture or demonstration

Always leave time for participants to ask questions and do your best to answer them.

Ask participants to read their handouts and complete the session questions in the workbook. Ask them to do this later, preferably on the same day. Tell them about any recommended reading from the supporting texts listed at the end of the relevant sessions in their workbooks.

Remember to ask participants to use their handouts to write down notes from the demonstration or session.

5. Working in groups

Working in groups makes it possible for the teaching to be more interactive and participatory; it gives everybody more time for discussion. Quieter participants have more of a chance to contribute.

Group work will be conducted with four participants, unless session instructions say otherwise. Group work is used in some sessions, in the clinical practice sessions and when discussing case studies. Either a trainer or facilitator facilitates most group work.

Read the specific instructions for the group sessions that you will lead and plan how you will conduct them.

Group and pair work

Group work can be organized in several ways; for example:

- Participants can turn their chairs to face the participants sitting behind them
- Participants can move their chairs to form a small circle in another part of the room.

Sometimes groups need to work in a larger area where other groups do not distract them. This requires the use of two rooms where the groups can spread out as necessary.

Working in pairs can be quickly achieved if participants work with the person sitting next to them.

Larger groups

In open discussions such as the Practice Review sessions divide the class into two larger groups if there are 16 or more participants. By dividing into groups each participant has the opportunity to speak and contribute to the discussion. A trainer or clinical facilitator should take each group.

Conduct discussions

Some discussions consist of simple questions which you ask the group, encouraging participants to suggest answers and to give their ideas in a way similar to that described for asking questions in sessions. It may help to write the main question on a board and the main points of answers on a flip chart. All the participants in a group should be encouraged to take part in the discussion.

If you notice some participants are not contributing, try to include them in the discussion or ask them specific questions.

The success of group discussion depends upon everyone contributing.

Case study exercises

Read the case studies carefully before you begin, looking particularly at the instructions. Make notes on any points you want to emphasize to the class.

Some case-study exercises are for the whole group together; others are for the class working in pairs. Many of the case-study exercises use discussion to feedback the answers; in others, the feedback has to be written down and then discussed in the group.

6. Clinical practice

Detailed instructions for the clinical practice sessions are given in Clinical Practice instructions and Task Sheets, as well as in the clinical checklists. Please make sure you read them before the clinical sessions.

7. Review meetings

Duration

- Practice review: 60 minutes
- Daily review: 15-30 minutes
- Facilitators Review: 30-40 minutes

7.1 Practice Review

Practice review sessions are held every day after the clinical practices. Both trainers and the facilitators should be present. The sessions are primarily to encourage discussion about clinical practice issues relating to the topics covered in the classroom and in the clinical area.

Each session should include:

- A clinical practice exercise (as outlined below).
- An opportunity for participants or facilitators to share any aspect of the clinical practice with the class.
- A short case study or exercise relating to the topics covered on that day (depending upon time).

Clinical Practice exercise

Day 1 – Identify one aspect of care at the time of birth that could be done differently.

- What could you realistically do to bring about any changes?
- What would be the main barriers to change?

Day 2 – Describe an example of good or poor communication you observed in the clinical practice.

- If it was poor, how could it have been improved?
- Describe any interesting cases you examined or observed in the clinical area.

Day 3 – Select an example of GOOD PRACTICE in the routine care of the newborn baby you have seen a mother or health worker use. Why did it impress you?

Day 4 – If you could change just one of the practices in your workplace after this course, what would it be and why?

If there are 16 or more participants, divide the class into two groups; one trainer should facilitate each group.

Clinical Practice Review

Preparation

- Flip chart paper, easel and pens (different colours)

Supporting materials

- PCPNC Guidelines

7.2 Daily Review

- The daily review sessions take place at the beginning of each teaching day, from Day 2 of the course.
- Allow up to 30 minutes at the start of each study day or half study day. Make sure the review time is put into the official timetable.
- The purpose of the review is to summarize the topics covered during the previous study day. The trainer should ask participants if they have any questions or comments, or any other issue they wish to discuss from the previous day.

Any notices taken should be given in this period.

7.3 Facilitators/Trainers review

The facilitators/trainers meetings are held daily at the end of each teaching day. The purpose is to review the day's activities and prepare for the next day.

The review meeting should include:

- Any general course issues
- Facilitator/trainers' feelings about their sessions
- Suggestions/comments for changes or improvements for future courses
- Preparations for the next day's timetable.

PART 3

Checklists, forms and timetables

The following checklists can be used for the Essential Newborn Care Course (ENCC) and the Training of Trainers (TOT) Course.

Index
Checklist for planning a course
Preliminary visit to a health facility before a course
Checklist for preparing clinical facilitators
Checklist for daily administration of a course
Checklist of printed course materials
Checklist of equipment and stationery
Checklist of items required for demonstrations
Checklists of reference and supporting materials
Checklist of opening session for Essential Newborn Care Course
Examples of course timetables
Evaluation questionnaire
Checklist for review meetings for the ENCC and TOT courses
Examination Recording Form
Acknowledgements

Preparation of the essential newborn care course

✓	Checklist for planning a course
	1. Choose a course schedule (four consecutive days course, one day a week, half a day a week)
	2. Choose a course venue. To include:
	■ Classrooms
	■ Health facility where clinical sessions can be held.
	The following should be available:
	Reliable transport to and from participant's accommodation and course venue
	Easy access to the clinical area from the classroom
	One large classroom for all participants, trainers, facilitators and visitors
	One, second, smaller classroom for group work (for 8-12 participant and 1 trainer)
	Chairs (easily moved for group work); one table per group of 4 participants
	Wall space for posters
	Two PowerPoint projectors, one video projector, flip chart board, overhead and slide
	Refreshments at breaks in the morning and afternoon
	At least one clerical assistant
	Storage space that can be locked for course materials/equipment
	When a suitable venue is found, BOOK IN WRITING; confirm nearer date of course
	3. Choose accommodation for trainers and participants. If possible, residential; otherwise arrange with proprietor of outside accommodation for:
	■ Food to be available at convenient times according to course timetable
	■ Bedrooms to have table and good lighting for preparation of course work
	When suitable accommodation is found, BOOK IN WRITING; confirm nearer date of course.
	4. Visit the health facility and clinical practice site/sites
	■ Confirm a convenient time to conduct clinical practices
	■ Visit the delivery room; observe a delivery to see current practices
	■ Check BFHI status and practices in ward areas
	5. Decide on dates/length of ENCC course and preparation course for trainers
	■ Allow 5 days for preparation week, plus 2 days for session preparation
	■ Allow 4-5 days for ENCC
	6. Initiate official identification of appropriate participants. The letter should include:
	■ Aims of the ENCC

<ul style="list-style-type: none"> ■ Course venue and dates
<ul style="list-style-type: none"> ■ Number of places available
<ul style="list-style-type: none"> ■ Description of participants, i.e. health workers involved daily with mothers and newborn babies in the first 7 days of life at primary health level
<ul style="list-style-type: none"> ■ Course length, arrival and departure dates
<ul style="list-style-type: none"> ■ Date by which participants/trainees should be selected and where to send names of nominated participants/trainees
<ul style="list-style-type: none"> ■ Notice that a letter of invitation will be sent to participants/trainees once selected
<ul style="list-style-type: none"> ■ Request for brief CV of participant/trainee
7. Select and invite trainers
<ul style="list-style-type: none"> ■ Trainers must be available to attend the entire course of 4/5 days
<ul style="list-style-type: none"> ■ Trainees must attend the preparation course of 5 days followed by 2 days preparation and 4/5 days of the course
8. Identify participants and send invitation letters. The letters should include:
<ul style="list-style-type: none"> ■ Aims of the training and course description
<ul style="list-style-type: none"> ■ Times of arrival and departure
<ul style="list-style-type: none"> ■ Importance of arriving on time for start of course and attendance for entire course
<ul style="list-style-type: none"> ■ Information about clothing/dress code for clinical practice
<ul style="list-style-type: none"> ■ Notice that certificates will be given only if all course sessions are attended
<ul style="list-style-type: none"> ■ Administrative arrangements, financial issues, accommodation and meals
9. Obtain the following:
<ul style="list-style-type: none"> ■ Sufficient copies of course materials (see checklist of course materials)
<ul style="list-style-type: none"> ■ Necessary supplies and equipment (see checklist of equipment and stationery)
<ul style="list-style-type: none"> ■ Items needed for demonstrations (see checklist of items for demonstrations)
<ul style="list-style-type: none"> ■ Necessary background information for the country or region (see checklist of background information and resources)
<ul style="list-style-type: none"> ■ Send materials, equipment and supplies to the course venue
10. Check which record forms are to be used, i.e. forms from PCPNC Guide or local/national forms

Preparation for the Essential Newborn Care Course

✓	2. Preliminary visit to a health facility before a course
	Talk to the Hospital Director:
	<ul style="list-style-type: none"> ■ Explain what the ENCC/TOT is about
	<ul style="list-style-type: none"> ■ Explain what you want to do
	<ul style="list-style-type: none"> ■ Describe what you need for the course
	Are the PCPNC Guidelines used in the facility?
	If NO – arrange for an orientation workshop to take place
	Ask the Director to recommend appropriate staff to facilitate clinical sessions and class group work
	Meet senior health-care staff from appropriate clinical areas
	Give a short presentation about the course and the role of the health facility
	Visit the main areas where the clinical practice sessions will take place, including:
	<ul style="list-style-type: none"> ■ Delivery area
	<ul style="list-style-type: none"> ■ Postnatal area
	<ul style="list-style-type: none"> ■ Special care baby unit
	<ul style="list-style-type: none"> ■ Paediatric/maternity outpatients' department
	<ul style="list-style-type: none"> ■ Teaching facilities
	<ul style="list-style-type: none"> ■ Any other area that may be appropriate
	Observe practices in above areas to ensure consistency with PCPNC Guidelines
	Check:
	<ul style="list-style-type: none"> ■ Approximate number of deliveries each day
	<ul style="list-style-type: none"> ■ Average number of mother/baby pairs in postnatal ward each day
	<ul style="list-style-type: none"> ■ Average length of stay
	<ul style="list-style-type: none"> ■ Number of babies in the Special Care Baby Unit
	<ul style="list-style-type: none"> ■ Main reasons for their admission
	<ul style="list-style-type: none"> ■ “Baby Friendly Hospital Initiative” status of health facility
	<ul style="list-style-type: none"> ■ Time(s) of day most suitable for clinical practice sessions
	<ul style="list-style-type: none"> ■ Permission for participants to work with mothers and babies during Clinical Practice

✓	2.1 Follow-up visit to a health facility before the course
	Give a presentation to health facility staff to explain what the course involves
	Emphasize clinical practice sessions; explain that staff help and cooperation will be essential
	Give a brief introduction to PCPNC Guidelines
	Distribute, leave flyers outlining objectives, needs, etc. of course
	Arrange a half-day to prepare clinical facilitators
	Answer questions staff/ Hospital Director may have about the course

✓	3. Checklist for preparing clinical facilitators
1. Clinical facilitators require half a day preparation During this time they should be made aware of their role:	
	■ During the clinical practices
	■ During group work in classroom
2. Introduce clinical facilitators to:	
	■ The PCPNC Guidelines
	■ The Clinical Practice task sheets for four practices
	■ The CP checklists
	■ Sessions with group work
	Clinical facilitators need to read course sessions before the course begins
The role of the clinical facilitators Explain the role of clinical facilitators. They should:	
	Identify suitable mothers and babies for participants to visit
	Identify appropriate cases relating to the topics of the study day
	Arrange for participants to observe and practise the skills learned in the classroom
	Prepare mothers and ask for their permission before participants arrive
	Introduce participants to prepared mothers
	Conduct an examination of the baby
	Demonstrate a range of clinical skills to groups of participants
	Supervise a group of four participants' observation and clinical activities
	Assess and report on participants' clinical skills, using the clinical checklists
	Report ANY concerns about participants' clinical skills
Describe the observations or clinical practices clinical facilitators must supervise:	
	Observation of a delivery and initial newborn care
	Observation of a breastfeed
	Observation of eye care
	Practice resuscitation with a mannequin (doll)
	Examination of a baby after delivery, before discharge
	Observation of a follow-up or sick baby visit
	Carry out cord care
	Carry out routine daily care
	Observation and practice of alternative methods of feeding, e.g. cup-feeding
	Observation and teaching of hand expression of breast milk
	Assessment of a preterm baby
	Observation of an intramuscular injection (optional)
	Observation of kangaroo mother care (optional)

✓	4. Checklist for daily administration of the course
At the course venue, before the course begins	
Note: The Course Director should arrive at the course venue early to ensure that arrangements described below have been made. Plan to arrive at least a day before the preparatory period for trainers and continue with the organization during the preparatory week. During the course, the Course Director needs to work with local staff to ensure arrangements work smoothly.	
	Arrange for trainers/trainees/participants to be met at hotel, airport or railway station, if required
	Arrange for typing and copying of materials during course (for example, timetables, lists of addresses of participants and trainers, case study exercises, course evaluation questionnaires)
	Organize meals and refreshments during breaks
	Arrange for trainers/trainees and participants to visit the health facility for clinical practice sessions
	■ Check and confirm times of the 4 clinical practice sessions
	■ Check and confirm availability of clinical facilitators
	■ Check and confirm other arrangements, for example:
	■ Clinical areas to be visited
	■ How many babies needed each day
	■ A room near the clinical area if classroom is far from health facility
	■ Preparation of health facility staff (if not already done)
	Finalize plans for opening and closing ceremonies
	■ Check that invited guests are coming
	Prepare timetables for trainees and/or participants
	Prepare appropriate sections from the ENCC for participants
	Print list of participants
During the preparation of trainers	
	Give each trainee a timetable for the preparation course on the first day
	Explain clearly the aim of the course and expectations of trainees
	Before the end of the preparation course, allocate sessions to trainees from ENCC
	Organize course materials, supplies and equipment for the ENCC
During the Essential Newborn Care Course	
	Allocate a trainer or clinical facilitator to go to clinical area each morning to organize the clinical practice session for later in the day
	Allocate groups of 4 participants to each trainer/clinical facilitators for CP sessions. Post a list of participants in each group on the wall/notice board
	Reorganize timetable if circumstances mean practical sessions are not to take place, e.g. no small babies available
	Provide all participants and trainers with a list of names and addresses of participants, trainers and the Course Director
	Arrange for a course photograph (if desired) to be taken in time to be developed before closure
	Prepare a course completion certificate for participants who attended ALL sessions and demonstrated skills satisfactorily

✓	5. Checklist of printed course materials
✓	5.1 Course texts – for trainer/trainee/clinical facilitator and Course Director
	<i>Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice</i>
	Training File, to include:
	■ Trainer's Guide Parts 1, 2 and 3
	■ 5 Modular sections containing:
	■ Sessions and booklets
	■ Clinical Practice and Classroom Workbook
	■ Clinical Practice instructions and Task Sheets
	■ Clinical Practice checklists
	■ CD-ROM of ENCC, PowerPoint presentations, overheads/video clips
	■ CD-ROM of reference materials
	■ Participant's Workbook
	■ Directors Guide (to be given only to the Course Director of a TOT course)
	CD-ROM with complete course and overheads/video clips (master copy)
Course documents	
	Timetable for preparation of trainers
	Timetable for ENCC for participants
	Timetable for ENCC for trainees (with daily review meetings and meeting on final day included)
	Daily evaluation form and course assessment form for trainees and/or participants
	Participants list
Forms for Trainers/clinical facilitators	
	Photocopies of Task sheets for each participant (in session sections)
	Checklists for review meetings for TOT and ENCC (Checklist 12)

✓	5.2 Course texts – for each participant
Participant's Workbook	
	■ Overheads
	■ Worksheets without answers and Worksheet Answers pages
	■ Clinical Practice information
	Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice
	CD-ROM of course reference materials
Checklists	
	Clinical Practice instructions and Task sheets for participants (Days 1–4)
Forms	
	Breastfeed Observation Form 1 (Session 3, 2b)
	Breastfeed Observation Form 2 (Session 5, 2b)
	Breastfeeding exercise (Session 5, 1b)
	Examination Recording Forms
	Referral Record (N2 or local)
	Task sheets for Keeping the baby warm exercise
	Case study 2 Exercise sheet
Course documents	
	Course timetable
	Evaluation questionnaire (Checklist 11)
Reference texts (CD-ROM)	
	Pregnancy, Childbirth, Postpartum and Newborn Care: A guide for essential practice
	Evidence for the Ten Steps to Successful Breastfeeding (WHO/CDH/98.9)
	Care of the Umbilical Cord: A review of the evidence (WHO/RHT/MSM/98.4)
	Basic Newborn Resuscitation: A practical guide (WHO/RHT/MSM/98.1)
	Thermal Protection of the Newborn: A practical guide (WHO/RHT/MSM/97.2)
	Breastfeeding Counselling: A training course (WHO/CDR/93.4)
	HIV and Infant feeding (WHO/CAH)
	Kangaroo mother care: A practical guide. RHR, WHO Geneva 2002

6. Checklist of equipment and stationery

✓	Items needed	Number needed
	PowerPoint projector	1 per classroom
	CD-ROMs (rewritable)	1 per participant/trainee/trainer/facilitator
	Floppy discs (empty)	
	Memory sticks	1 per classroom
	Overhead projector	1
	Slide projector	As needed
	Blacking out arrangements	As needed
	VCR and monitor (optional)	As needed
	Extension leads and sockets, international plug	
	Access to:	
	Photocopying equipment	
	Photocopying paper	
	Computer and screen	
	Printer	
	Metal flip chart stands or blackboards	2 (1 in each classroom)
	Flip chart pads	6
	Flip chart pens	4 boxes assorted colours
	Whiteboard	1 in main classroom
	Whiteboard markers	6 boxes – assorted colours
	Chalk	2 boxes
	Chalk erasers	2
	Name tags and holders	30
	Large pads or notebooks of ruled paper	30
	Folders	30
	A4 sheets of plain paper	30 sheets
	No 2 pencils	60
	Ballpoint pens (blue)	60
	Erasers	30
	Highlighters	4 (for trainers)
	Hand-held staplers	3
	Staples	1 box
	Scissors	3 pairs
	Pencil sharpeners	6
	Masking tape	6 rolls
	Cardboard	20 sheets (3 colours)
	Coloured sticky labels	15 small packs

7. Checklist of items required for demonstrations

Item	Number needed	UNICEF codes
For ALL sessions		
Life-size baby dolls	1 per group*	
Baby clothes, including diaper, shawl, hat	2 full sets per doll	
Towels	2	
Cloths for warming and drying	2	
Pillow	1	
Session 3		
1 set		
Cord ties or clamp, sterile blade	1	
Soap and bowl of water	1	
Container of eye ointment/drops	2 pairs	
Gloves	1 per room	
Clock with second hand		
Session 4		
1 per group		
Axillary thermometer	1 per room	
Room thermometer	1 per group	
Sessions 5 and 10		
Model breast	1 set per group	
Session 7		
1 per group		
Locally used weighing scales	1 of each size	
Session 8		
1		
Resuscitation mannequin (doll)	1 in teaching room	
Newborn-size masks, size 0 and 1	1	
Self-inflating bag		
Mucous extractor or suction device	1 set per group	
Clock with second hand		
Bucket of water	1	
Session 9		
3 examples		
Wash cloth, soap, wash bowl, piece of sterile gauze, cord tie	1	
Session 11		
1 set per pair of participants		
Teaspoon		
Small cup	1	
Containers for expressed breast milk		
Kettle or jug		
Session 13		
2 ml syringe, needle		
Orange or similar citrus fruit		
Medicine bottle vial of antibiotics		
Alcohol swab		
Water		
Session 14		
Kangaroo mother care "pouches" (local)		
*group = 4 participants		

8. Checklist of reference and supporting materials

Titles of available and recommended supporting materials are listed on the first page of the teaching sessions. A copy of all the supporting material should be available throughout the course.

- Integrated Management of Pregnancy and Childbirth. Pregnancy, Childbirth and Newborn Care: A guide for essential practice
- Managing Newborn Problems: A guide for doctors, nurses and midwives. Dept Reproductive Health and Research. WHO, Geneva
- Evidence for the Ten Steps to Successful Breastfeeding (WHO/CDH/98.9)
- Care of the Umbilical Cord: A review of the evidence (WHO/RHT/MSM/98.4)
- Basic Newborn Resuscitation: A practical guide (WHO/RHT/MSM/98.1)
- Thermal Protection of the Newborn: A practical guide (WHO/RHT/MSM/97.2)
- Breastfeeding Counselling: A training course (WHO/CDR/93.4)
- The optimal duration of exclusive breastfeeding. A Systematic Review (WHO/FCH/CAH/01.23)
- Mastitis: Causes and management (WHO/FCH/CAH/00.13)
- HIV and Infant Feeding. WHO/FRH/NUT/CHD 98.1-3, 1998
- Training courses in: Breastfeeding Counselling; HIV and Infant Feeding counselling (WHO/UNICEF, WHO/CDR/93.3-5 and WHO/FCH/CAH/00.2-4)
- Hypoglycaemia of the Newborn: 1997 Review of the Literature (WHO/CHD/97.1)
- Kangaroo mother care: A practical guide. RHR, WHO Geneva 2002

How to make a model breast

- Use a pair of near skin-coloured socks or stockings, or an old sweater or tee shirt
- Make the cloth into a round bag shape and stuff it with other cloth or soft material to make it breast-shaped
- Using a running stitch, make a circle of stitches in the middle of the breast to make a nipple
- Put a small amount of cloth or wool into the nipple shape and pull the stitches to form the nipple
- Colour the areola and nipple with a felt pen or paint

9. Checklist of Opening Session for ENCC

1. Introduce yourself and welcome participants to the course
2. Introduce an invited local dignitary to open course (allow 10 minutes)
Include following points in opening speech:
 - Importance of optimal care to survival and health of the newborn baby
 - National/local infant mortality rates
 - Need for well-trained, skilled health-care staff
 - Need for consistent guidelines used nationally/internationally
 - Incorporation of Pregnancy, Childbirth, Postnatal and Newborn Care Guide (PCPNC) into the health system
 - (If Integrated Management of Childhood Illness (IMCI) is already implemented, a brief mention of how the Newborn Care section in PCPNC covers the period from birth to first postpartum weeks)
 - The newborn care component of PCPNC
3. Give domestic information, to include:
 - Directions to toilets
 - Fire regulations
 - Where to safely leave belongings

- Arrangements for tea/coffee breaks and lunch
 - Administrative arrangements connected to course
4. Trainers, facilitators and participants to introduce themselves:
- Give name they wish to be called during course
 - Their present post and workplace
 - Explain what they hope to gain from course
5. Introduce course timetable, including:
- Starting and finishing times of study days
 - Outline of each day
 - What will be expected of participants, i.e. group work, case study presentations, homework, plan of action, etc.
 - Outline CP organization and what is expected from participants:
 - Give local information about any special arrangements to be followed before going into clinical area, e.g. clothing to be worn
 - Give brief explanation of delivery room exercise in first Clinical Practice
6. Introduce course materials:
- The Participant's Workbook: Briefly show participants how workbook is organized
 - The checklists: Briefly introduce the checklists and explain what they are for
 - The PCPNC Guide: Give a (very) brief outline of what it covers and for whom it is intended
7. Show where reference materials will be kept during the course
8. Explain to participants that:
- They will be introduced to evidence-based practices for newborn care
 - They will be expected to develop a realistic plan of action for changing practice either personally or in their place of work
 - The plan of action should be finalized by the last day of the course
 - A copy will be provided for their employer/manager
 - Participants will be followed up to see if they have been able to implement their plan of action
9. Divide participants into groups of 4
- Assign each group to their facilitator (5 minutes)
10. Examples of course time tables

Recommended Timetable 1

Five-day course

This timetable is an example of a 5-day course. Clinical practices are in the morning. See alternative session outline in Session 4, “Keeping the baby warm”. This timetable has the advantage of more time in the day to cover all the session information, with ample time for discussion.

Day 1	
08.30	Welcome and opening ceremony
09.30	Introduction to PCPNC
10.30	Break
11.00	Universal precautions
11.30	Keeping the baby warm (alternative session outline) in clinical area/deliveries
13.00	Lunch
14.00	Care of the newborn baby at the time of delivery
15.00	Break
15.30	Care of the baby at the time of delivery
16.00	Facilitators/trainers meeting
Day 2	
08.30	Review of Day 1
09.00	Communication skills
10.30	Break
11.00	Clinical practice 1 Care of the newborn baby at the time of birth
13.00	Lunch
14.00	Practice review
15.00	Break
15.30	Breastfeeding and the newborn baby: Ensuring a good start
16.30	Facilitators/trainers meeting
Day 3	
08.30	Review of day 2
09.00	Examination of the newborn baby
10.30	Break
11.00	Clinical practice 2 Examination of the baby
12.30	Practice review
13.00	Lunch
14.00	Resuscitation
15.00	Break
15.30	Resuscitation
16.30	Facilitators/trainers meeting
Day 4	
08.30	Review of day 3
09.00	Routine care of the newborn baby
10.30	Break
11.00	Clinical practice 3 Routine care of the newborn baby
13.00	Lunch
14.00	Practice review
15.00	Break
15.30	Alternative methods of feeding
16.30	Facilitators/trainers meeting

Day 5

08.30	Review of day 4
08.45	The small baby
09.45	Kangaroo mother care
10.45	Break
11.15	Clinical practice 4 Special situations
13.00	Lunch
14.00	Practice review and action plans
15.00	Break
15.30	Certificate and closing ceremony
16.30	Facilitators/trainers meeting

Timetable 2

Example of a “CORE” 4-day timetable

Clinical practice in the afternoon

Day 1	
Time	Session contents
08.30	Welcome and opening ceremony
09.15	Introduction to PCPNC
10.00	Universal Precautions
10.15	*Break
10.30	Care of the baby at the time of birth
12.00	Keeping the baby warm
13.00	*Lunch
14.00	*Clinical practice 1 Care of the newborn baby at the time of birth
15.30	*Break
15.45	Practice review
16.30	Facilitator/trainers meeting
Day 2	
08.30	Review of day 1
08.45	Communication skills
09.45	Breastfeeding and the newborn baby: Ensuring a good start
10.45	*Break
11.15	Examination of the newborn baby
13.00	Lunch
14.00	Clinical practice 2 Examination of the baby
15.30	Break
15.45	Practice review
16.30	Facilitators/trainers meeting
Day 3	
08.30	Review of day 2
08.45	Resuscitation: Theory and practice
11.00	*Break
11.30	Routine care of the baby
13.00	Lunch
14.00	Clinical practice 3 Routine care of the newborn baby
15.30	Break
15.45	Practice review
16.30	Facilitators/trainers meeting
Day 4	
08.30	Review of day 3
08.45	Breastfeeding and the newborn baby: Overcoming difficulties
09.45	Alternative feeding methods
10.45	*Break
11.15	The small baby
12.30	*Lunch
13.15	Clinical practice 4 Special situations
14.45	*Break
15.30	Action plans and practice review
16.15	Certificates and closing ceremony
17.00	Facilitators/trainers meeting

*Note the break and lunch times need to be flexible with this timetable if session contents are to be fully covered.

*Possible extension of the clinical session for participants to attend a delivery to observe immediate post delivery care, see section 3.9, “The clinical practices – Alternative arrangements”.

Timetable 3

Clinical sessions in the morning

Time	Session contents
Day 1	
08.30	Welcome and opening ceremony
09.15	Introduction to PCPNC
09.45	Care of the baby at the time of birth
10.15	Break
10.30	Care of the baby at the time of birth
11.30	Clinical practice 1 + alternative session: Keeping the baby warm
13.00	Lunch
14.00	Practice review
14.45	Keeping the baby warm
15.30	Break
16.00	Breastfeeding and the newborn baby: Ensuring a good start
17.00	Facilitator/trainers meeting
Day 2	
08.30	Review of day 1
08.45	Universal precautions
09.00	Examination of the newborn baby
10.30	Break
11.00	Clinical practice 2
12.30	Practice review
13.00	Lunch
14.00	Resuscitation
15.00	Break
15.30	Communication skills
16.30	Facilitators/trainers meeting
Day 3	
08.30	Review of day 2
09.00	Routine care of the newborn baby
10.30	Break
11.00	Clinical practice 3
12.30	Practice review
13.00	Lunch
14.00	The small baby
15.00	Break
15.30	Alternative methods of feeding
16.30	Facilitators/trainers meeting
Day 4	
08.30	Review of day 3
09.00	Breastfeeding and the newborn baby: Overcoming difficulties
10.15	Break
10.45	Clinical practice 4
12.15	Practice review
13.00	Lunch
14.00	*Replacement session
14.45	Break
15.00	Feedback of action plans
15.30	Certificates and closing ceremony
16.30	Facilitators/trainers meeting

Suggested Timetable 3

* Replacement session to cover any part of the timetable missed needing further explanation

Suggested Timetable 4 – *1,2

Three separate study days, with clinical practices between the study days

Day 1 (week 1)	
08.30	Welcome and opening ceremony
09.30	Introduction to PCPNC
10.30	Break
11.00	Universal Precautions
11.30	Care of the baby at the time of birth
13.00	Lunch
14.00	Keeping the baby warm
15.00	Break
15.30	Examination of the newborn baby
16.30	Clinical practice preparation
Day 2 (week 2)	
08.30	Review of day 1
09.00	Resuscitation
10.00	Break
10.30	Resuscitation
11.30	Communication skills
13.00	Lunch
14.00	Breastfeeding and the newborn baby: Ensuring a good start
15.00	Break
15.15	Routine care of the newborn baby
16.30	Clinical practice preparation
Day 3 (week 3)	
08.30	Review of day 2
09.00	Breastfeeding and the newborn baby: Overcoming difficulties
10.30	Break
11.00	The small baby
12.00	Kangaroo mother care
13.00	Lunch
14.00	Alternative methods of feeding
15.15	Break
15.30	*Replacement session
16.30	Certificates and closing ceremony

1 The clinical practice sessions between weeks 1 and 2 – Care of the newborn baby at the time of birth and examination of the baby.

The clinical practice sessions between weeks 2 and 3 – Routine care of the newborn baby and the baby with special needs.

* The replacement session is to give time to cover any issues participants wish to revise.

Timetable 5

Specialist 1-Day timetable

Essential Newborn Care with a focus on resuscitation

08.00	Welcome and opening ceremony
09.00	Care of the newborn baby at the time of birth
10.30	Break
11.00	Keeping the newborn baby warm
12.00	Resuscitation of the newborn baby – Theory
13.00	Lunch
14.00	Resuscitation of the newborn baby – Practical
15.15	Break
15.30	Examination of the newborn baby
16.45	Review of the study day and evaluation

Timetable 6

Day 1 Specialist 2-Day timetable

Essential Newborn Care with focus on routine care and examination

08.30	Welcome and opening ceremony
09.00	Intro to PCPNC
10.00	Break
10.30	Care of the newborn baby at the time of delivery
12.00	¹ Group exercise on warmth and ² breastfeeding
12.30	Lunch
13.30	Keeping the baby warm
14.30	* ² Breastfeeding and the newborn baby: Ensuring a good start
15.30	Break
15.30	Communication skills
16.30	Clinical practice preparation (15 mins)

Day 2

08.30	Review of day 1
09.00	Routine care of the baby
10.30	Break
11.00	Examine the newborn baby
12.30	Lunch
13.30	Clinical practice 2 and 3
15.00	Practice Review
15.30	
16.00	Certificates and closing ceremony

1 Group exercise: Send groups of 4 participants to the maternity and neonatal clinical areas to look at the ways babies may get cold or the ways babies may stay warm. Complete this exercise BEFORE the session on “Keeping the baby warm”

2 If the classroom is near a clinical area, arrange for participants to observe a breastfeed using Breastfeed Observation Form 1, BEFORE the session on breastfeeding

11. Evaluation questionnaire for Participants

Below are two suggested formats for formative and summative evaluation for the ENCC. These are for participants to complete.

The first is an overall course assessment form which should be completed at the end of the course.

The second is a daily questionnaire that can be given out each day in the morning so that participants can fill in their comments after each session.

Participants do not have to put their names on the evaluation sheets.

11.1 Course assessment form for the ENCC

To help us to improve this training course for others in the future, please fill out this questionnaire.

1. Briefly describe your work with newborn babies.

Please mention in what type of setting you work (e.g. private practice, health centre, hospital).

2. What did you think of the overall level of the course? Was it:

■ Difficult?

■ Easy?

■ About right?

Any other comments?

3. Did you find the trainers easy to understand?

4. Did you find the sessions were presented in a logical order?

5. What additional support, if any, do you think you may need after this training course to enable you to improve the newborn care in your own facility?

6. a) What were the best parts of the course? And why?

b) What were the worst parts of the course? And why?

For each session below tick one box to show whether you thought that the time spent on the activity was very useful, useful or not useful. Please make comments on any aspect of the sessions in the appropriate box.

Title of session	Very useful	Useful	Not useful	Comments and suggestions of how you would improve the session
1 Introduction to PCPNC				
2 Universal precautions				
3 Care of the newborn baby at the time of birth				
4 Keeping the baby warm				
5 Breastfeeding the newborn baby: Ensuring a good start				
6 Communication skills				
7 Examination of the baby				
8 Resuscitation of the newborn baby/practice				
9 Routine care of the newborn baby				
10 Breastfeeding and the newborn baby: Overcoming difficulties				
11 Alternative methods of feeding a baby				
12 The small baby				
13 How to give an injection				
14 Kangaroo-mother care				
15 Clinical Practice tasks				
1				
2				
3				
4				
5 Practice review				
5 Daily review				

11.2 Suggested daily evaluation form for the ENCC

Day 1 – Care of the baby at the time of birth

We would very much appreciate your comments about each session.

Date & location:

Welcome and opening ceremony (please comment on the information you were given about the course)
Introduction to PCPNC
Universal precautions
Care of the newborn baby at the time of birth
Keeping the baby warm
Clinical practice
Practice review

Any other comments:

12. Checklists for review meetings for the TOT and ENCC

1. Teaching review meeting: TOT course

Discussion on teaching – Daily during weeks 1 and 2

- Were the session instructions followed accurately?
- Were all the main points included?
- Were all the points clearly explained?
- Was the class involved in discussion?
- Did the trainee answer questions clearly?
- Was the trainee a confident teacher?
- Were visual materials used appropriately?
- Did the trainee speak clearly and naturally?
- Did the trainee face the class?
- Did all participants acquire the skills taught?
- Was the session interesting?

Praise what has been done well.

Suggest what could have been improved or done differently.

2. Skill review meeting: TOT course – Day 3

Ask trainees:

- Which teaching techniques have been used so far; for example, involving the class to discuss questions in a presentation; developing lists on a flipchart during group work; demonstrating practical skills.
- Which techniques went well and why they were successful? Which techniques were not practised well and how could they be improved?
- Which skills they find difficult and which they would like to practise or discuss more.
- To identify techniques which they have not used so far (make sure that they will be practised during the course).
- For ideas on how to handle some particular situations; for example, discussion in groups; how to encourage participants to offer suggestions or ask questions; how to control a talkative participant so that other participants can contribute to a discussion. Ask trainees to practise ideas discussed during the remaining sessions.
- To be aware of the importance of evidence to support what they are saying and to know where to find the evidence.

3. Daily training meeting – Week 2

Cover the following points in discussion at the end of each day of the ENCC:

- The sessions taught on that day
- The clinical practice
- The progress of the participants
- Has all the session content been covered?
- The trainers performance
- Any problems
- Plans for the next teaching day
- Plans to cover any areas missed
- Any other issues raised by the trainers
- Arranging additional sessions if issues are unclear or participants need additional skill sessions

13. Examination Recording Form

Name (of mother) _____ Date _____

How old is the baby? _____ hours/days

Does the mother have any concerns about the baby? _____

How is the baby feeding? _____

ASK, CHECK RECORD	LOOK, LISTEN, FEEL	SIGNS (CIRCLE IF PRESENT)
Is the baby preterm (<37 weeks or >1 month early)?		Preterm
Breech birth?		
Difficult birth?		
Resuscitated at birth?		
Is the baby one of twins?		Twin
Has the baby had convulsions?		Danger sign
Is the mother very ill or transferred?		Mother not able to care for the baby
	Assess breathing (baby must be calm) Grunting. Breathing: More than 60 breaths per minute Less than 30 breaths per minute Chest in-drawing	Danger sign Danger sign Danger sign Danger sign
	Look at the movements: Are they normal and symmetrical? Look at the presenting part: Is there swelling and bruises?	Swelling, bruises or malformation
	Look at the abdomen for pallor	Danger sign
	Look for malformations	Swelling, bruises or malformation
	Feel the tone: Is the baby floppy or stiff?	Danger sign
	Feel for warmth. If cold, or very warm, measure temperature. Is the temperature: >38°C or <35°C?	Danger sign
	35–36.4°C?	Body temperature 35–36.4 °C
	Look for bleeding from stump or cut	Danger sign
	Weigh the baby. Is the weight <2500 g?	Birth weight <2500 g
Has the mother had within 2 days of delivery: Fever >38 °C? Infection treated with antibiotics		Special treatment needs
Membranes ruptured >18 hours before delivery?		Special treatment needs
Mother tested RPR-positive?		Special treatment needs
Mother tested HIV-positive? Has she received infant feeding counselling?		Special treatment needs
Is the mother receiving TB treatment that began <2 months ago?		Special treatment needs
	Look at the skin. Is it yellow?	Jaundice
	If baby is <24 hours old, look at skin on the face If baby is >24 hours old, look at palms and soles	Danger sign Danger sign
	Look at the eyes. Are they swollen or draining pus?	Local infection
	Look at the skin, particularly around the neck, armpits, inguinal area: Are there <10 pustules?	Local infection
	Are there >10 pustules, or bullae, swelling, redness or hardness of the skin?	Danger sign
	Look at the umbilicus: Is it red? Draining pus? Does the redness extend to the skin?	Local infection Danger sign Danger sign
Assess breastfeeding (as described on page J4) and classify feeding: Is the baby not able to feed?		Danger sign
Does the baby have feeding difficulty?		Not feeding well

If you have not circled any of the signs, classify the baby as a WELL BABY and provide care (as described on page **J2**).

If you have circled any of the signs, go to the appropriate page to assess, classify, and treat and advise:

- Preterm, birth weight <2500 g or twin – Page **J3**
- Not feeding well – Page **J4**
- Special treatment needs – Page **J5**
- Jaundice or local infection – Page **J6**
- Danger sign – Page **J7**
- Swelling, bruises or malformation – Page **J8**

If mother complained of breast or nipple pain during breastfeeding assessment, assess the mother's breasts – Page **J9**

PARTICIPANT'S NAME _____

Clinical TASK name and number _____

Additional notes:

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- (From IMCI Video Part 3 and 4) Video clips 5.3, 5.7, 5.9, 7.9, 7.10, 7.11, 7.14, 7.18, 7.21, 7.24, 8.15, 8.16, 9.13, 10.4
- UNICEF 10.8
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Photographs and diagrams used in Participant's

Workbook:

- Sandra Lang Module 2 Page 4: 1, Page 5 1, 2, 3, 4
- WHO Module 2 Page 3: 1



World Health
Organization

Essential newborn care course

TRAINER'S GUIDE

Department of Making Pregnancy Safer
Family and Community Health
World Health Organization
Avenue Appia 20,
CH-1211 Geneva 27, Switzerland
Fax: +41 22 791 5853
Email: MPSinfo@who.int

www.who.int/making_pregnancy_safer