

Training Workshop 4 : Summary and Planning for work in the community

Day : 4

Time Required : 2 hours 10 minutes

Purpose

To review what was learned in this training period (Training Workshop 4 : Modules 10, 11, 12 and 13) and to plan what to do in the community in the coming month. To introduce the new Mother and Newborn Form that ASHA will start using in the village.

Objectives

At the end of the session the ASHA will be able to:

1. Explain what work she will be doing in the community after this training workshop.
2. State which forms will be used in the village and how.
3. Prepare a list of the material needed to work in the community.
4. Give feedback on her feelings after experiencing four training workshops.

Materials

- Injection Vitamin K ampoules
- Syringes
- Cotton
- Spirit
- A small box to keep cotton balls soaked in spirit
- Black box, yellow bag and empty plastic container to store injection waste
- Mucus extractors
- Syrup cotrimoxazole
- Workbook 1
- Mother and Newborn Forms
- Supplementary Forms booklet
- Worksheet 1 : 'How do I feel Now' - Form
- One small box to carry home used syringes, broken ampoules and one to carry home used swabs.

Preparation

- Ensure availability of the material necessary for giving injection vitamin K to all babies (Injection vitamin K ampoules, syringes, cotton, a small box to keep cotton balls soaked in spirit, spirit, box to carry the injection waste home and boxes for depositing injection waste). Each ASHA should carry with her 100 ml. spirit, 10 syringes, a roll of cotton and 5 ampoules of injection vitamin K, besides the material mentioned above.
- Ensure availability of mucus extractors and cotrimoxazole as the ASHAs who have passed the test (secured a score of 70 % or more) will carry the material (each ASHA should carry with her 3 mucus extractors and 5 bottles of cotrimoxazole) with them to their village so that they can begin treatment of asphyxia with mucus extractor and of sepsis with cotrimoxazole.

- 5 Mother and Newborn Forms for each ASHA and a booklet of Supplementary Forms.
- Enough copies of Worksheet 1 to be able to give one to each ASHA.

Training Methods

Discussion : Work to be done in the community (30 minutes)

1. Ask ASHAs to review the work they are doing in the community. (*Visiting homes, registering all women who are eligible to become pregnant, making list of pregnant women, visiting pregnant women, observing delivery, filling the Delivery Form, observation of newborn at 30 seconds and 5 minutes, first examination of newborn and filling the First Examination of Newborn : Form, making post partum home visits, filling the Home Visit Form, using communication skills to advise on care.*)
2. Ask ASHAs to describe what they have learned during this training (*How to give injection vitamin K, to care for LBW and preterm babies, what is a high risk baby, how to care for a high risk baby, ASHAs responsibilities towards high risk babies, how to diagnose and manage asphyxia with the mucus extractor, how to diagnose and treat sepsis with cotrimoxazole by mouth, completing the sepsis management form, giving home care advice to parents of high risk babies.*)
3. ASHAs will now onwards be giving injection Vitamin K to all newborns. In the initial months, they will inject only in the presence of their supervisor - whenever he/she visits their village. After they have given 5 injections of Vitamin K correctly under supervision and without any error, they will be certified by the supervisors and then they can start giving injection vitamin K to all newborns at the first examination of the newborn, 1 hour after delivery.
Add anything that may have been missed out.
4. Explain that now, in addition to the work they were already doing, the ASHAs will start identifying LBW, preterm and high risk babies, helping mothers breastfeed these babies, giving them information on how to care for high risk babies, counseling mothers if babies develop danger signs, diagnosing and treating birth asphyxia, and diagnosing and treating sepsis. ASHAs will visit high risk babies 13 times in the first month.
5. Ask ASHAs to prepare a list of the material now needed to work in the community. Trainer should match the list with the list prepared by them and add the missing items to complete the list of ASHAs. Trainers should ensure that each ASHA carries with her the material in the list.
6. ASHAs who did not pass the examinations on asphyxia and sepsis can take the tests again in the next workshop. If they pass, they should receive the necessary equipment (3 mucus extractors and 5 bottles of cotrimoxazole) to deliver services in the community. All ASHAs should receive the material mentioned in the list above so that they can start providing services to the community.
7. Explain that the ASHAs will be visited by the trainer/supervisor during this period. The trainer/supervisor will assist, support and assess their work.

Review of Forms : Discussion (50 minutes)

Instructions to Trainers :

Delivery form :

1. Ask ASHAs to refer to the Delivery Form in the Workbook 1. Review the questions in the Delivery Form in the Workbook 1 and in the Mother and Newborn Form.
 - Go through the questions one by one.

- Explain that there is no change in the questions 1 to 9a.
 - Ask them to look at the question 9b. Earlier ASHAs diagnosed whether the baby was normal or a stillbirth. Now the ASHAs know that a baby asphyxiated at birth can be revived by using mucus extractor.
2. In the form there are three options – Normal /Asphyxiated/Macerated stillbirth
 3. If the baby is asphyxiated the ASHAs are expected to treat it using mucus extractor. Whether the action was taken is recorded in question 9c. (point 2 of the question 9c is about ventilation with bag and mask. ASHAs will start filling this question after they learn using bag and mask in the Training Workshop 6.)
 4. See the question 9d. After resuscitation, if the baby is alive or stillbirth is recorded here.
 5. Go through the remaining questions. Questions 10 and 11 are same. First point of question 12 is new. This question states the action to be taken by ASHA.
 - ASHA should ensure that the TBA does not pull the cord.
 - Mother should be given something to drink immediately after delivery was in the earlier form as well. Whether the ASHA was able to ensure this is to be recorded here.
 Encircle **Yes**, if the action was taken, otherwise encircle **No**.
 6. The next message box gives a message to the ASHA to help the mother initiate breastfeeding early. This will reduce the mother's bleeding and the placenta will be delivered early.
 7. Check with ASHAs if they have any difficulties. Discuss.

First Examination of the Newborn Form :

1. Ask ASHAs to refer to the First examination of the Newborn Form in Workbook 1 and the Mother and Newborn Form. Go through the questions in Part 1, one by one. Explain that there is no change in the Questions 1 to 7. In the Question 6, a box is added which suggests that the ASHAs must take action if a breastfeeding problem is observed. Here the ASHA has to record whether action was taken or not. The ASHAs are already familiar with what actions need to be taken to deal with breastfeeding problems..
2. Ask ASHAs to look at the part "First examination of the baby" –
 - In Question 1, the ASHA has to record the temperature of baby. If the temperature is less than 97° F (36.1° C) ASHA has to re-warm the baby. What should be done for re-warming the baby has been learned in the previous training workshop.
3. Look at Question 2. Here the ASHA has to record the condition of eyes – normal /swelling / oozing pus. What action is necessary for dealing with normal eyes, swollen eyes, or eyes with pus oozing out is mentioned here. . The ASHAs have already learnt in the previous workshop how to apply ointment into the eyes.
4. Look at Questions 3, 4 and 5 in both the forms. There is no change in these questions.
5. Look at the box below Question 5. This is regarding diagnosis and management of high risk baby.
 - See item 1 in the box. In item 1 there are three points – Baby preterm, Birth weight 1 kg 999 grams or less, and baby not taking feeds on the first day.
 - Put a ✓ mark against a sign which is present.
 - On the right side are options Yes/No. If any one of the three signs has ✓ mark, then the baby is high risk, and you should circle **Yes**. If there is no ✓ against any of the signs, encircle **No**.
 - Item 2 mentions the actions to be taken by the ASHA if the baby is high risk.
 - The actions are – *keeping baby near mother using skin to skin contact method, not giving bath*

till the weight of baby is 2 kg., feeding the baby every 2 hours and keeping room, clothes, hands etc. clean. The ASHA has to record in the box whether the required actions were performed by circling Yes or No.

- If baby is high risk ASHA is expected to fill the Home Visit Form for high risk babies (Supplementary form 3).
6. Review the Questions on Routine Newborn Care and questions 6 and 7. There is no change in these.

Home Visit Form :

1. Ask ASHAs to refer to the Home Visit Form in the Workbook 1 and in the Mother Newborn Form. There is no change in the first part: "Ask mother". In the portion "Examination of mother", actions for breastfeeding problems are given. This is to serve as a reminder for the ASHA.
2. In "Examination of Baby" see the item Weight. If the baby is not gaining weight then what action is to be taken by ASHA is given here. Ask ASHAs to see the item Temperature. If baby has fever or has low temperature or is hypothermic what action should be taken by ASHA is given.
3. Focus now on the Sepsis Diagnosis part. In the earlier form this part was 'Signs of Sepsis'. ASHAs used to record here whether the signs were present or not. Now after recording signs they know how to diagnose sepsis. Hence now this part is 'Sepsis Diagnosis part'. There is no change in the seven criteria for sepsis diagnosis. Below the seven criteria is a row: "Total no. of Criteria" present. The ASHA needs to total the number of ✓ marks. On the basis of the total number of signs observed, the ASHA will diagnose whether it is sepsis and record her finding in the row "Is it sepsis", encircle the appropriate answer, yes/no. Below the table ASHA has to record what management of sepsis was accepted by parents. She is expected to encircle appropriate answers.

Here is a reminder for ASHA that if she is treating sepsis she has to fill the Sepsis Treatment Form (Supplementary form 5).

A box below has reminders for treatment of 1 sign of sepsis.

4. Below the table is a reminder for the ASHA to check on the 28th day if the baby's weight gain over birth weight is less than 300 grams or on 28th day weight of baby is less than 2 kg. 300 grams. Such a baby needs to be visited in the second month, and the visit is recorded in the Second Month Home Visit Form (Supplementary form 4).
5. There is also a reminder for ASHAs to give health education as well as the High Risk Baby Information Sheet to mothers on day 2. The pamphlet on Danger Signs is to be given to all the families on day 2. ASHAs will start doing this after all the training workshops are over, and they have been adjudged as competent to provide complete newborn care. (This will be discussed again in the last training workshop and only thereafter will ASHAs start distributing the pamphlet).

The Home Visit Form for High Risk Baby :

Ask the ASHAs to refer to the Home Visit Form for high risk baby in the supplementary forms booklet. While all the questions are the same as in the Home Visit Form for a normal baby, only the days of the home visits are different. For high risk baby there are 13 visits in the first 28 days. If the high risk baby continues to be high risk in the second month, use the second month home visit form.

The second month home visit form :

Ask the ASHAs to refer to the second month home visit form in the Supplementary Forms booklet. Space has been provided to record visits on days 35, 42, 49 and 56. Use this form if the baby is still high risk in the second month.

The other forms :

The other forms in the Supplementary Forms booklet are Breastfeeding Problem Management Form, Hypothermia Management Form and Sepsis Management Form. ASHAs know when and how to use these forms.

Newborn health care evaluation form :

In the Mother and Newborn Form, review all the items in the Newborn Health Care Evaluation Form one by one. The ASHA fills in this form for each mother-newborn pair she had taken care of. This form should be completed in the month when care is provided. Read each question out aloud and give examples to make sure the ASHAs know how to answer. This form should also be filled by the supervisor, and in those projects where incentives are based on performance, this form is used to determine the ASHA's incentives. All the information needed to fill this form is available in the Newborn Form itself.

Diagnosis and management summary :

Review the form Diagnosis and Management Summary. Explain that this information is to be obtained from the forms already filled for each newborn and mother. Go through the items one by one and ask the ASHAs to tell which forms the information is available on. Allow them to refer to the forms and then give the answers. The ASHAs should also understand this form, although the information in the form is to be filled in by the supervisor.

Booklet of handout for parents :

Let the ASHAs refer to the booklet of handouts for parents. There are three types of handouts in this booklet.

- i. Measures to be taken by mothers before and after the baby's birth (given to all pregnant women in the 7th month visit)
- ii. High risk baby information sheet (given to parents of high risk babies)
- iii. Danger signals information sheet.

Review the contents.

Explain that this third handout is to be given to all families on the day after delivery, when the ASHA comes to check the baby and give health education to the mother and family. Make sure the mother and family members understand the contents of this handout. During each visit to the newborn, the ASHAs should review the contents of this handout with parents.

Question and Answers/Discussion (25 Min)**Instructions to Trainers :**

1. Ask the ASHAs what different lists, forms and handouts are used in providing home based newborn care. Prepare a list on black board, with the help of ASHAs. The list should include the following:

Registers :

1. List of all women in the village who are eligible to become pregnant
2. List of pregnant women

Pregnancy forms booklet :

1. Pregnancy forms

Mother and newborn form booklet :

1. Delivery Form
2. First Examination of Newborn Form
3. Home Visit Form
4. Newborn health care evaluation form
5. Diagnosis and management summary

Supplementary form booklet :

1. Home Visit Form—High risk babies
2. Home Visit Form—second month visits
3. Breastfeeding Problem Management form
4. Hypothermia Management Form
5. Neonatal Sepsis Management Form

Handouts for parents :

1. Measures to be taken by mothers before and after baby's birth
2. High risk baby information sheet
3. Danger signals information sheet

Summary (30 minutes)

- Praise the ASHAs for their good work.
- Give them 'How do I feel now?' form for filling. Explain them that this is not an examination. Allow 20 minutes time to complete the form.

Note : Inform ASHAs that they will be evaluated for the learning so far (Workshops 1 to 4) in the next workshop. The evaluation will include written examination to test their knowledge and practical demonstration to test their skills. To prepare themselves, they should completely read all reading material upto Training Workshop 4 atleast twice. It is better that they read two pages every day. They should also practice their skills to perfection. Only those ASHAs who perform satisfactorily in the evaluation will be trained further and given the additional skills of using injection gentamicin and bag & mask.

Evaluation of the session

Objectives	Assessment Method	Output
Explain the work the ASHA will be doing in the community after this training workshop	Questions and answers	--
State which forms will be used in the village and how?	Questions and answers	--
Prepare a list of the material needed to work in the community	List prepared by all ASHAs	List prepared by the ASHAs and the list of material given to ASHAs
Give feedback on her feelings after experiencing four training workshops.	'How do I feel now?' form	The 'How do I feel now?' form completed by each ASHA.