

Essential Newborn Care Course Second Edition (2022)

Launch of the Interim Version

Monday, 11 April 2022

Time: 13:30-15:00 Geneva Time (GMT +1)



Essential Newborn Care Course Second Edition (2022)

Interpretation available in French, Spanish, Portuguese and Arabic

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Monday, 11 April 2022

Welcome & Introduction

World Health Organization

Launch of WHO Essential Newborn Care Course interim second edition



Dr Rajiv Bahl

Newborn Health Unit Head, Department of Maternal, Newborn, Child and Adolescent Health, and Ageing, WHO Geneva

Agenda

Moderated by Dr Janna Patterson (American Academy of Pediatrics)

Part 1:

Welcome: Dr Rajiv Bahl, WHO

Official launch of ENCC: Dr Anshu Banerjee (WHO)

Presentation: What is new? Dr Teshome Desta (WHO)

Brief remarks from collaborating partners:

Mr Tore Laerdal (Laerdal Global Health)

Dr Beena Kamath Rayne (American Academy of Pediatrics)

Dr Marzia Lazzerini (WHO Collaborating Centre Trieste)

Questions & Answers

Part 2:

Panel discussion:

- Dr John Ovuoraye (Federal Ministry of Health Nigeria)
- Dr Queen Dube (Ministry of Health Malawi)
- Dr Tedbabe Hailebagriel (UNICEF)
- Dr Leah Greenspan (USAID)
- Dr William Keenan (IPA)
- Ms Erin Ryan (ICM)
- Dr Marsha Campbell-Yeo (COINN)
- Ms Mona Tamannai (Médecins Sans Frontières)
- Ms Janet Meyers (Save the Children)



Part 1



Launch of ENCC Second Edition Interim Version: Dr Anshu Banerjee (WHO)

What is new? Dr Teshome Desta (WHO)

Brief remarks from collaborating partners:

- Mr Tore Laerdal (Laerdal Global Health)
- Dr Beena Kamath Rayne (American Academy of Pediatrics)
- Dr Marzia Lazzerini (WHO MCH Collaborating Centre Trieste)

Questions & Answers

Opening remarks and official launch of ENCC



Launch of WHO Essential Newborn Care Course interim second edition



Dr Anshu Banerjee

Department of Maternal, Newborn, Child and Adolescent Health, and Ageing, WHO Geneva

World Health

Overview of ENCC: What is new?



Launch of WHO Essential Newborn Care Course interim second edition



Dr Teshome Desta Woldehanna

Medical Officer, Universal Health Coverage/Life Course

Maternal, Newborn, Child and Adolescent Health, and Ageing, WHO

Wedd llealth Organization

PREVIOUS VERSION - ESSENTIAL NEWBORN CARE (2010)



WHAT IS NEW?

THE UPDATE VERSION – ESSENTIAL NEWBORN CARE COURSE (2022)

- 1. Competency-based with many new features with flexibility for both in-service and pre-service settings, & different course options. *Plus, it incorporates current guidelines and recommendations:*
- 2. WHO Standards for Improving the Quality of Care for MNH (2016) & Standards for Improving the Quality of Care for Small or Sick Newborns (2020)
- 3. Point of Care Quality Improvement Process linked Modules to PDSA Cycles (2018)
- 4. Baby-Friendly Hospital Initiative Competency Toolkit (2020)
- 5. Competencies for facilitators & learners
- 6. COVID-19 Infection prevention & control, WASH in health facilities.
- 7. Nurturing Care Framework (2018) +
- 8. Birth Defect Surveillance Toolkit (2019)
- 9. Helping Babies Breathe and Helping Babies Survive aligned with WHO Guidelines + Early Essential Newborn Care Coaching (2018)

New learning strategy

Essential Newborn Care Course applies the WHO Learning Strategies

- Learning is active, not passive.
- Learning addresses real-life issues.
- The process of learning is as important as the content.
- People learn with, and from, peers.
- People identify, plan and monitor their own learning.
- People use different learning strategies.
- Learners engage in reflection and self-evaluation.
- Feedback is critical for change and improvement.



Competencies are defined



Global competency and outcomes framework for universal health coverage

- Places newborns and their families at the centre of all practices.
- Provides and demonstrates culturally sensitive, respectful and compassionate care (non-blaming, non-discriminatory, non-judgmental and nonstigmatizing).
- Takes a solutions-oriented approach to problemsolving.
- Contributes to a culture of safety and continuous quality improvement.
- Demonstrates confidentiality, consent, absence of conflict of interest, duty of care, dignity, privacy and safeguarding.

Facilitator competencies

Adapted from WHO, 2016,
 Midwifery nurse educators' core competencies.

Learner competencies





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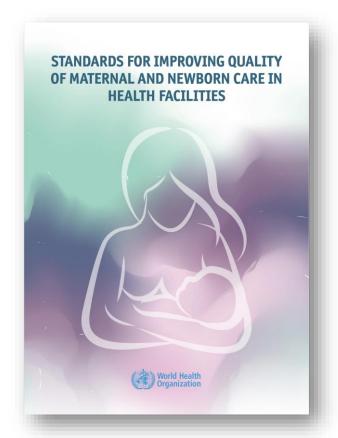
- Master all the content of the Essential Newborn Care course.
- Apply adult facilitation and learning methodologies to promote active learning.
- Model positive behaviours.
- Monitor and promote safe learning environment.
- Adapt and tailor facilitation to learners' needs and based on standardized assessments.
- Support learners to apply evaluation, decision-making, action cycles.
- Promote skills practice for simulations using correct technique, facilitating selfreflection and peer feedback.
- Use clinical practice effectively.
- Understand and apply the Point of Care Quality Improvement Process (POCQI)



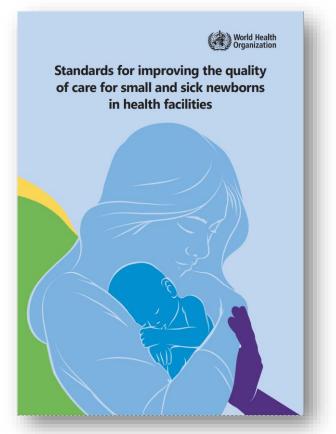
Foundation

World Health Organization

1.WHO Standards for Care of EVERY Newborn



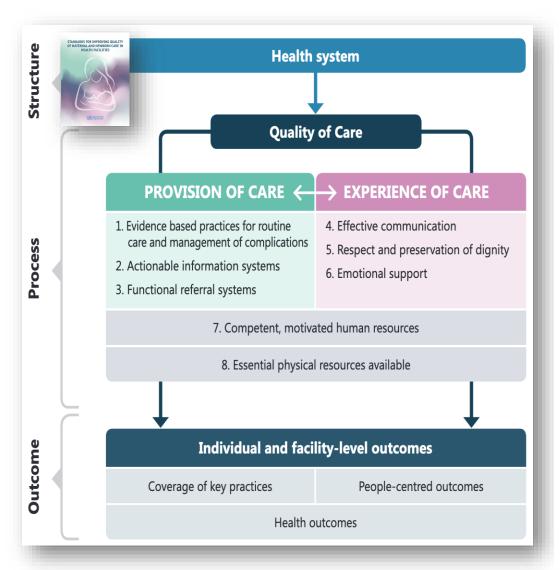
WHO Standards for Improving Quality of Maternal and Newborn Care in Health Facilities (2016)

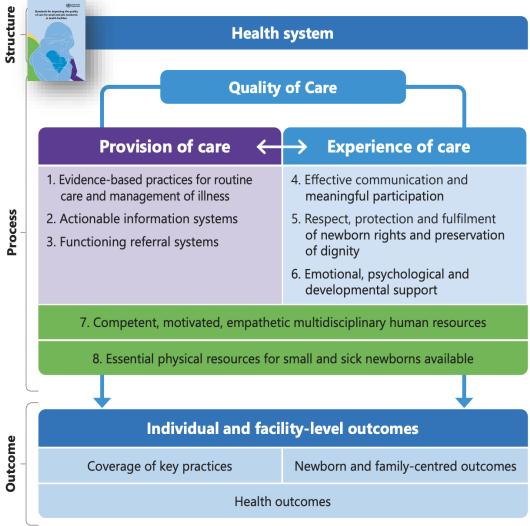


WHO Standards of Care for Small and Sick newborns (2020)

WHO Quality of Care Framework



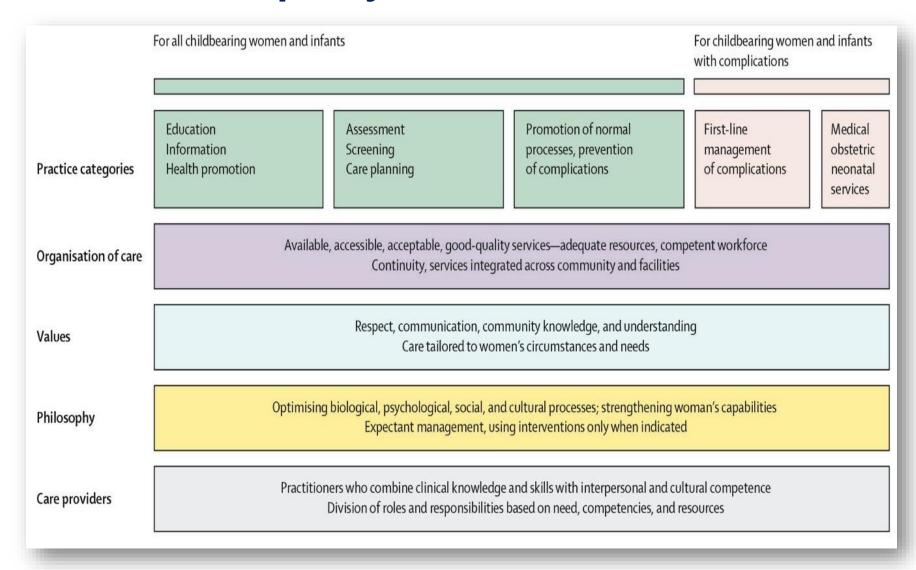




Foundation



2. Framework for quality maternal and newborn care



<u>Lancet Midwifery</u> Series

Foundation

3. Universal rights of newborns



RESPECTFUL MATERNITY CARE CHARTER

The Universal Rights of Women & Newborns

1 Everyone has the right to

freedom

from harm & ill-treatment

- Everyone has the right to **information**, informed **CONSENT**, & respect for their choices & preferences, including companion of choice during maternity care & refusal of medical procedures
 - Everyone has the right to privacy & confidentiality

- 4 Everyone is their own person from the moment of birth & has the right to be treated with dignity & respect
- 5 Everyone has the right to equality, freedom from discrimination & equitable care
- to healthcare & the highest attainable level of health

- 7 Everyone has the right to **liberty**, **autonomy**, self-determination & freedom from arbitrary detention
- 8 Every child has the right to be with their parents or guardians
- 9 Every child has the right to an identity θ nationality
 from birth
- 10 Everyone has the right to adequate nutrition & clean water

Assessment



Assessments of knowledge and performance

- Pre-test (in-service and pre-service learners) to tailor sessions to meet learners' needs and guide learners' journeys and avoid repetition.
- Standard simulation at beginning of module in-service.
- Post-test (summative assessment) and standard assessment for ALL to document the progress of learners and the quality of the training.
- Self and peer assessments of performance improvement during simulations and clinical practices.

Learners observe health workers, organization of care and case management during clinical practice sessions and assess if quality gaps exist.



Performance Assessments - Essential Newborn Care

In-service learners should complete these three brief scenarios as simulations to demonstrate their baseline performance skills before starting a course.

Participants should first take the role of the health care worker and then act as the nother with the next learner being assessed.

Observe each participant in the role of the health care worker and then act between the selection checklists below, note whether or not each stop is done. If participants ask, allow them to use the job sid or algorithm that they normally use, such as the Action Flan.

Record results and use the results to tailor scalination of the course to the needs of the participants.

At the end of the modular course, repeat the assessments for ALL learners. Compare pire- and post-course performance to identify continuous learning needs.

Assessment 1: Immediate care at birth of a non-breathing baby

Read scenario: A boby is born at term through clear amniotic fluid. You dry the baby and provide atimulatic The baby does not cry or breaths.

"Show me what you will do."

Use checklist 9, or use checklist 9s if you implement first embrace EENC coaching

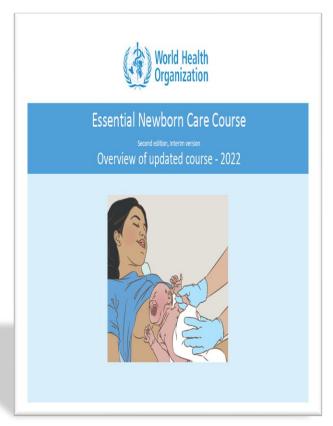
	9. Basic resuscitation of the newborn	Done	
	5. Basic resuscitation of the newborn		NO
- 1	Called for help:		
2	Clamped or tied and cut the umbilical cord		
3	Moved baby to ventilation area, stood at head, I checked mask size		
4	Positioned baby's head slightly extended		
- 3	Placed mask to cover chin, mouth and nose		
6	Ventilated at correct rate (40 breaths per minute)		
7	Observed good chest movement		
Equilitate	or inflates lungs at 30 breaths per minute		
	Recognized breathing		
. 9	Continued skin-to-skin care		
10	Monitored with mother (breathing and mothers' condition)		
11	Completed the birth record		
12	Explained to mother and companion		
13	Counselled on keeping baby warm		
14	Counselled on feeding cues		
Note any	harmful practices or concerns ²		

St Supracriment or other special concentration, the leasure rang could be bosed as the baby's head

Lawyin ratak-assisting magicipaling poor thereof or

Materials: Cross-cutting





Course overview



Plan, adapt and facilitate guide



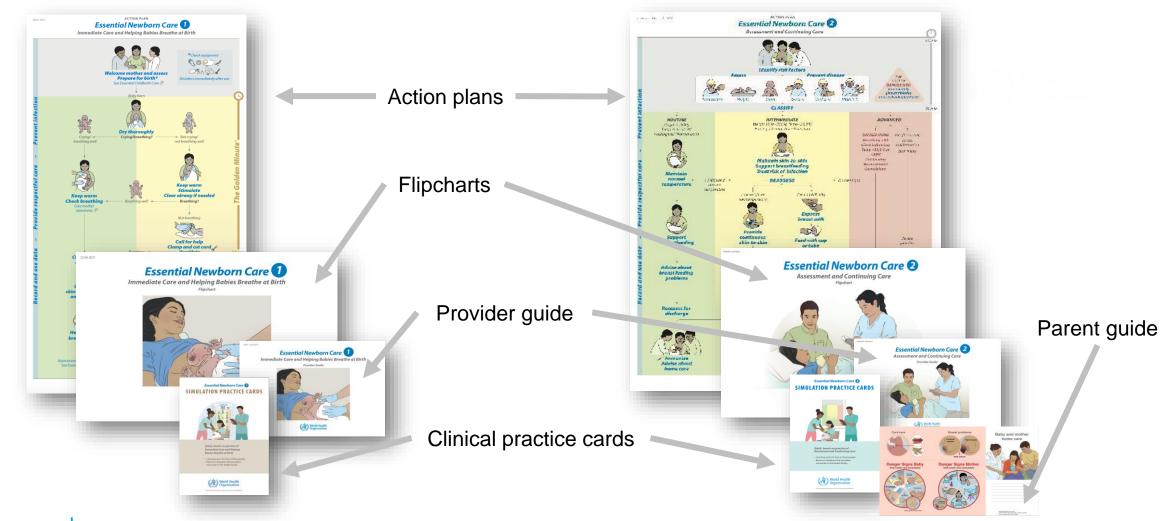
Competencies for facilitators and learners

Materials: The Basic course



ENC part 1: from birth to 60 minutes after birth

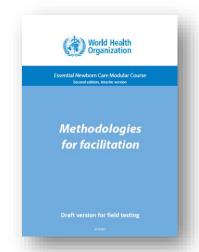
ENC part 2: 60-90 minutes after birth and beyond



Materials: The Modular course



Presentation slides



CLINICAL PRACTICE CARDS

WHO Essential Newborn Care Course Interim second edition Organization and

World Health World Health World Health Organization Immediate care at birth Immediate care at birth

Methodologies for facilitation

Clinical practice cards

Organization and assessment

Facilitator notes



Posters



Handouts

Workbook for learners

Essential Newborn Care Modular Course

Workbook for learners

Modular course - 14 modules



































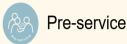
2 intermediate 3 additional care care

Essential Newborn Care Methodologies



- Self-paced learning
- Videos
- Questions/quiz
- Case studies
- Demonstrations (mannequins and live newborns)
- Simulations
- Mentored clinical practice
- Reflection on practice
- Finding and applying WHO evidence and guidelines (Treasure Hunts)
- Point of Care Quality Improvement (POCQI)
- Peer practice to build and maintain skills and confidence

SYMBOLS





Role play



In-service



Simulation



Self-paced learning



Clinical practice



Critical reflection



Treasure hunt



Videos



The situation



Questions/Quiz



Summary



Case study



Quality improvement

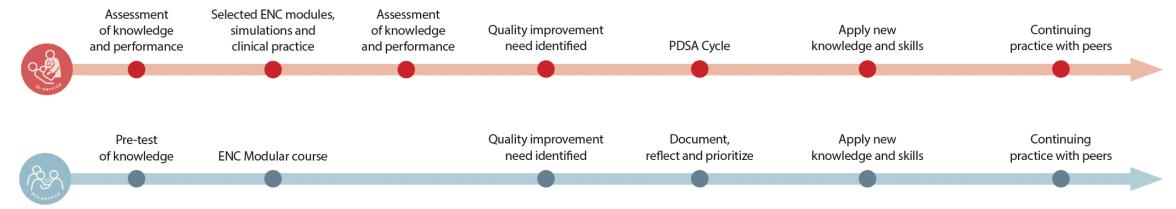
Essential Newborn Care Course Options



Three course options, A, B C:

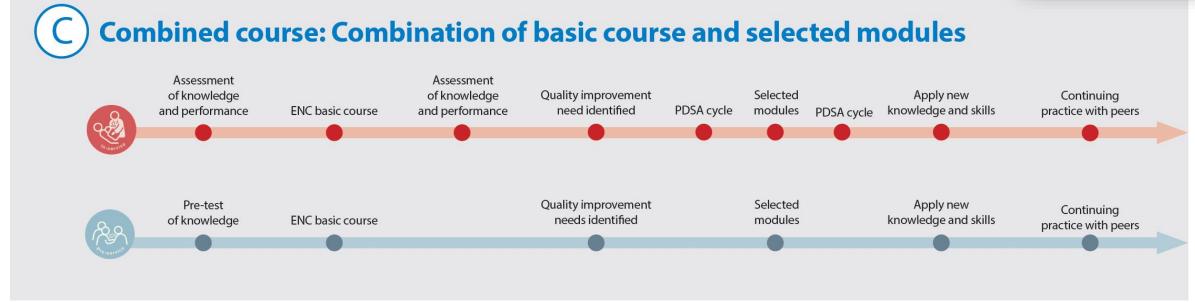






Essential Newborn Care Course Options





ESSENTIAL NEWBORN CARE COURSE applying current evidence to ensure **ALL** newborns survive and reach their full potential

From To









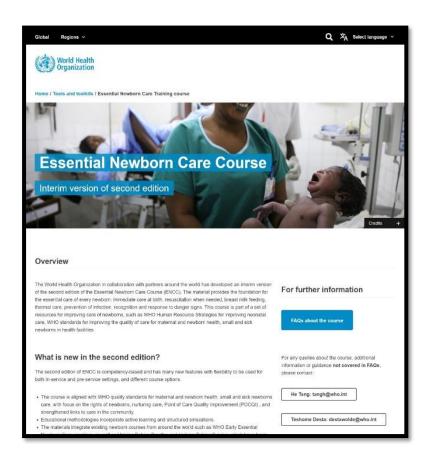


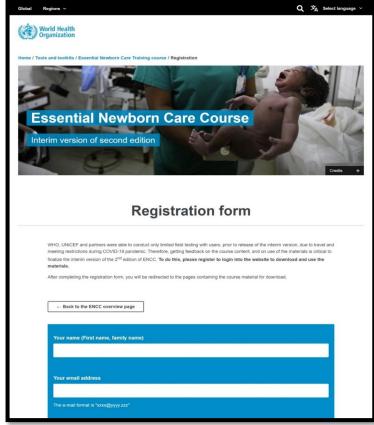


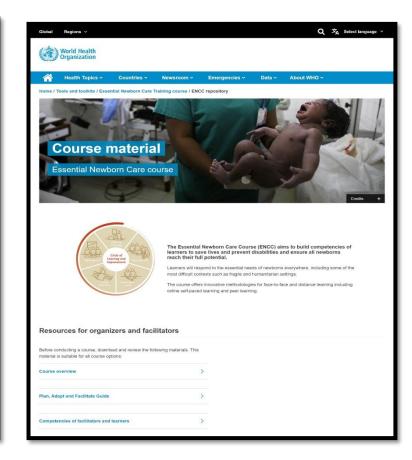
ACCESS THE ESSENTIAL NEWBORN CARE MATERIALS



https://www.who.int/tools/essential-newborn-care-training-course









Thank you



April 11, 2022

WHO ESSENTIAL NEWBORN CARE Course Launch

REMARKS

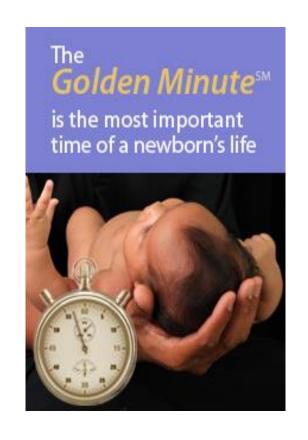
Tore Laerdal

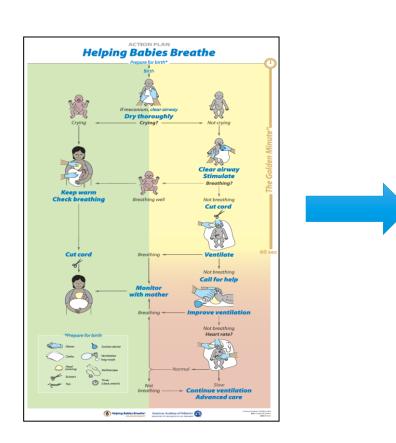


History

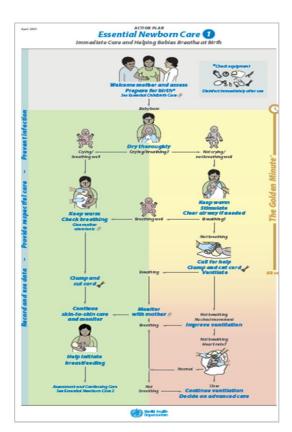


From the Golden Minute to the WHO ESSENTIAL NEWBORN CARE





HBB, 1st Edition, 2010



WHO ENC 1, 2022

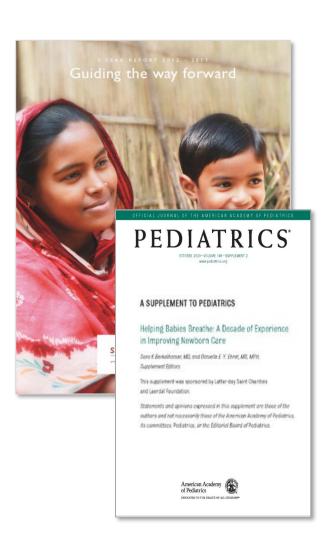
10 programs -1 million birth attendants reached





Best Practice Implementation





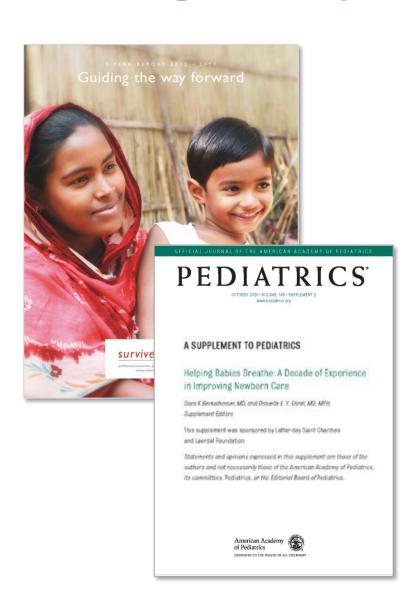
10 steps Best Implementation

- 1. Secure Ministry of Health buy-in
- 2. Form a working group for planning, training and monitoring
- 3. Develop national roll-out plan, for pre-service and in-service training, in both public and private sector
- 4 Provide learning materials & equipment at time of training
- 5 Identify and support local leaders and champions
- 6 Establish Low Dose High Frequency refresher training
- 7 Establish facility level QI teams
- 8 Monitor performance
- 9 Establish a system for reporting and feedback
- 10 Engage HCPs, families and the broader community

http://journals.plos.org/plosone/article?id=10.1371/journal.pone.10178073

Guiding the way forward





10 steps Best Implementation

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Focus 2010-2020

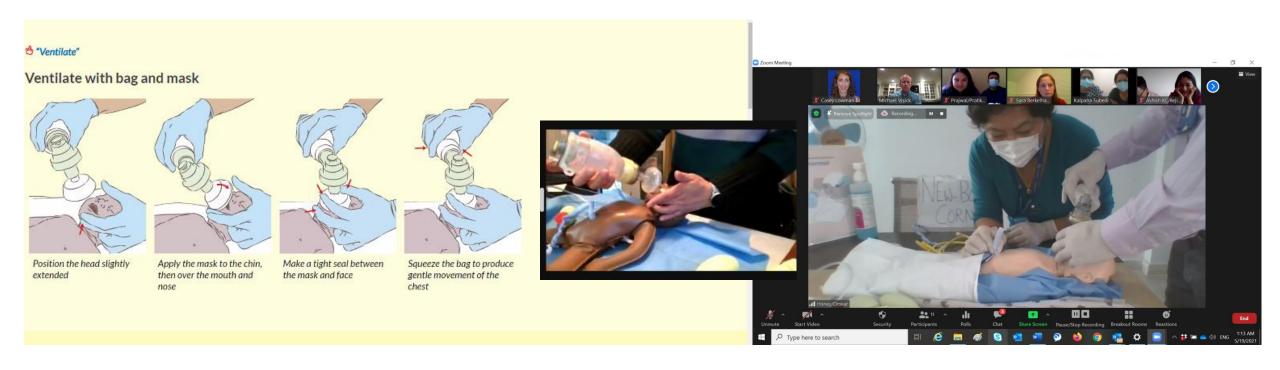
Focus NOW

Dr Beena Kamath-Rayne American Academy of Pedatrics





Innovation in Learning Continued emphasis on skills practice



KEY DIFFERENCES WHO ENC & ENC Now!



WHO ENC COURSE

ENC Now!



Updated version of WHO ENC/HBB with alignment to WHO guidelines

Digital version of the basic WHO ENCC WHO ENC 1 done; ENC 2 is coming!



Designed for in-person facilitation

Utilizes a blended learning approach, with digitally delivered content and face-to-face practice.

Participants can be supported by an online and onsite facilitator.



Traditional hardcopy materials, like those used for HBB/HBS programs: Action Plan, Facilitator Flipchart, Provider Guide

Digital course platform enhances the traditional hardcopy materials



Same as in-person HBB trainings – facilitators demonstrate skills, participants practice in pairs, facilitators provide feedback

Online facilitator demonstrates skills via camera or video; participants practice in pairs with a simulator; online and onsite facilitators provide feedback

Resources for ENC Training





Helping Mothers & Babies Survive learning portal – Open Access

 Digital courses (including ENC Now!), videos, LDHF training, printable materials, tests, templates and more, all in one place



Customized MentoRship and Implementation Support Package (CRISP):

- Customized ENC Training
- Customized Mentorship (4-6 sessions)
- Access to CRISP Collaboration Platform (additional resources, learning community)
- Digital Assessments Tools
- NeoNatalie Live (optional)

CRISP: A customized mentorship package for supporting ENC Available through AAP (ENCNow@aap.org)

Quality Improvement



Introduction	 Initial meeting with mentor & training group to identify group skill level & experience, implementation plans, etc. Discuss structure and focus of mentor sessions
Program Design & Planning	 Discussion of elements that should be in place before implementing a program: community collaboration; MOH commitment; availability of resources Importance of systems strengthening and identify/supporting local leaders and champions Needs assessments and workplans Identifying goals and ways to measure progress (M&E)
Program Implementation	 In-depth review and feedback of completed workshop planning tool Development of customized project management tools Ongoing support as training group prepares to implement their own program
Facilitation Skills	 Introduction to and development of key skills Topic examples: active learning techniques; group engagement; evaluation of learners; LDHF practice
<u></u> Data Collection	What data to collect; How to utilize data; How to report/communicate data
	 Ways to approach the QI process Topic examples: PDSA cycles, forming improvement teams, identifying gaps,

choosing barriers to overcome, planning and testing change, determining if changes

Dr Marzia Lazzerini Director, WHO Collaborating Centre for Maternal and Child Health, Trieste





Questions & Answers

Please type your questions in the CHATBOX



Part 2

Panel discussion:

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Next Steps and Closing Remarks

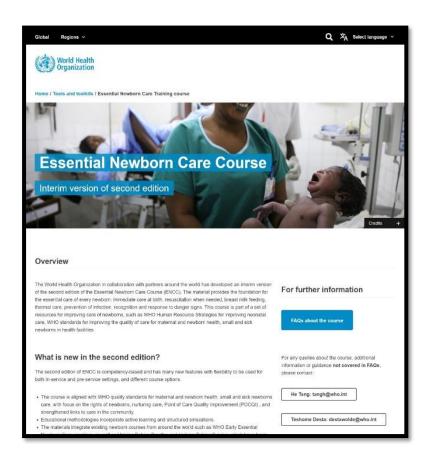


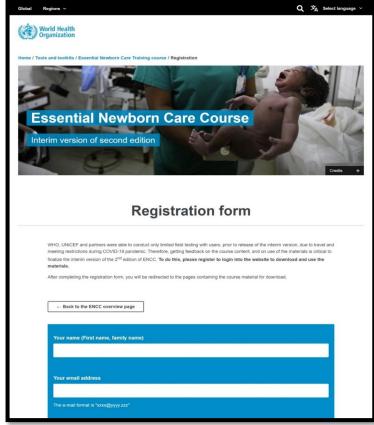
- 1. The ENCC Interim Version Second edition can be accessed on the WHO website https://www.who.int/tools/essential-newborn-care-training-course
- 2. Register to login into the WHO website to download the interim version of ENCC materials for field testing
- 3. Give us your valuable feedback after using the materials at least once either using the LimeSurvey or word file.
- 4. We are open to receive feedback up to 30 September 2022
- 5. Review and incorporate feedback and finalize the Second Edition by the end of 2022
- 6. ENCC Second Edition will be translated in UN languages and disseminated
- 7. WHO will work with partners to help countries plan, adapt and implement the course

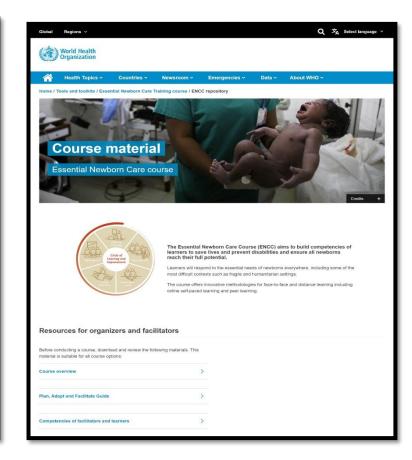
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THANK YOU

