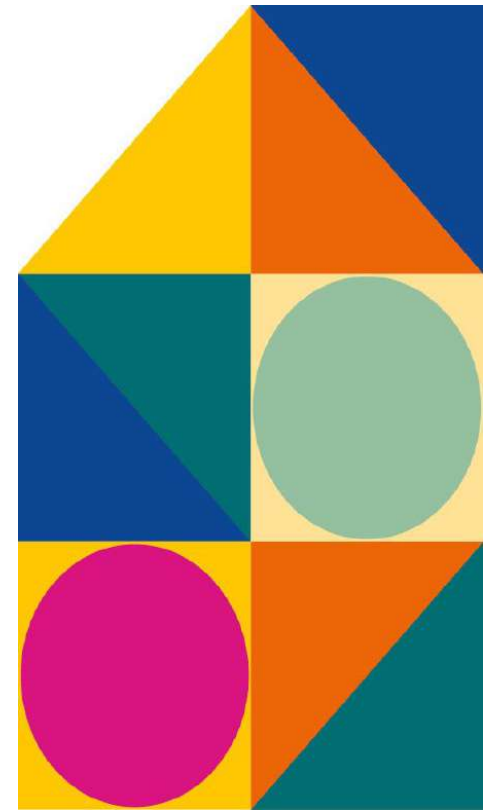


Launch of Essential Childbirth Care Course of the *Interprofessional Midwifery Education Toolkit*

Wednesday, 27 April, 2022

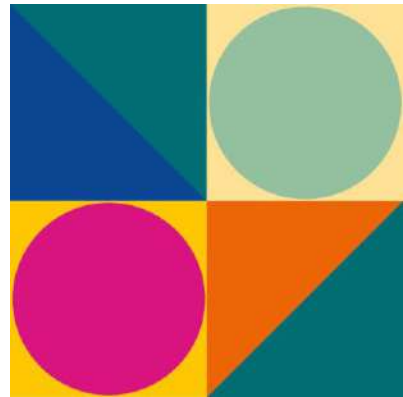


Welcome and Introduction



Dr Anshu Banerjee

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



Session plan

Part 1: Welcome and introduction

Welcome and introduction: Dr Anshu Banerjee, Director, Department of Maternal, Newborn, Child and Adolescent Health and Ageing, WHO Geneva

Opening remarks: Dr Tedros Ghebreyesus, WHO Director General

Remarks: Right Honorable Amanda Milling MP, Minister for Asia and the Middle East, UK Foreign, Commonwealth and Development Office

Part 2: Presentation

A snapshot of the Essential Childbirth Care Course: Dr Allisyn Moran, Maternal Health Unit Head, Department of Maternal, Newborn, Child and Adolescent Health and Ageing, WHO Geneva

Part 3: Panel discussion

Facilitated by Fran McConville, Technical Officer Midwifery, WHO Geneva

Coming soon: the WHO Academy distance learning activities: Elisa Roma WHO Academy

Part 4: Remarks from partners

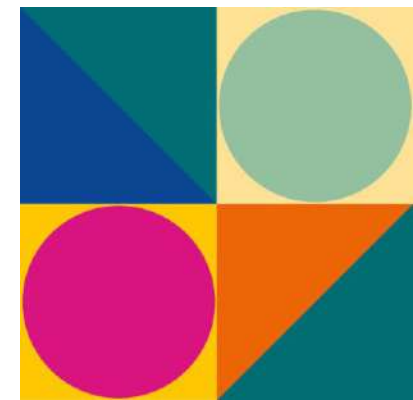
Closing remarks: Elizabeth Iro, WHO Chief Nurse and a midwife



Opening Remarks



Dr Tedros Adhanom Ghebreyesus
Director General, World Health Organization

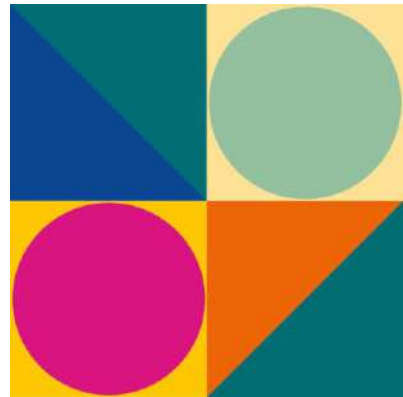


Remarks



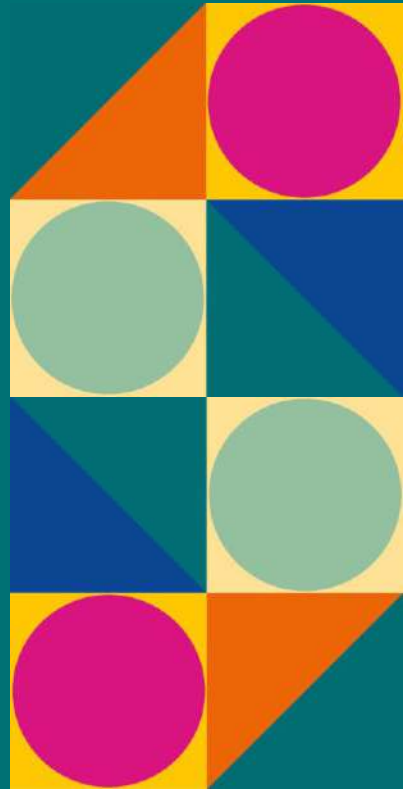
Rt Hon Amanda Milling MP

Minister for Asia and the Middle East
Foreign, Commonwealth & Development Office



Part 2:

A snapshot of the Essential Childbirth Care Course

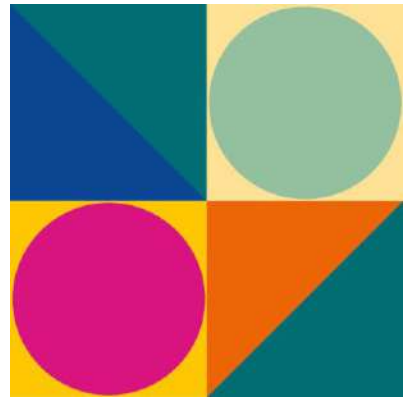


A snapshot of the Essential Childbirth Care Course



Dr Allisyn Moran

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



WHO Interprofessional Midwifery Education Toolkit

Planning Supports

Facilitator and Learner Guides: Pre-course on-line access

Blended learning: in educational institutes and on-line

Key principles

Midwifery model of care; Evidence-based practice

Courses

ANC

CHILDBIRTH

POSTNATAL

SRH

Cross-cutting courses

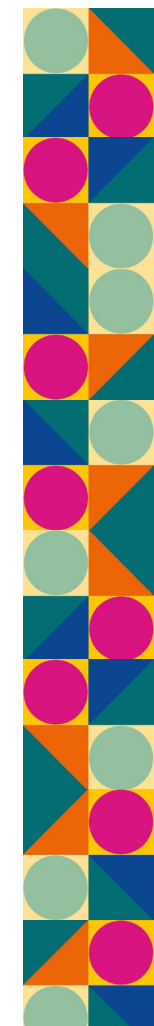
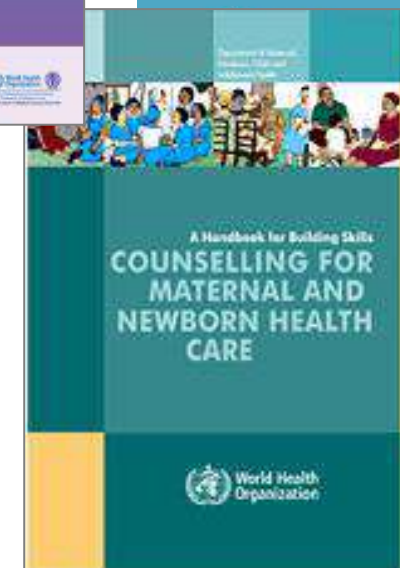
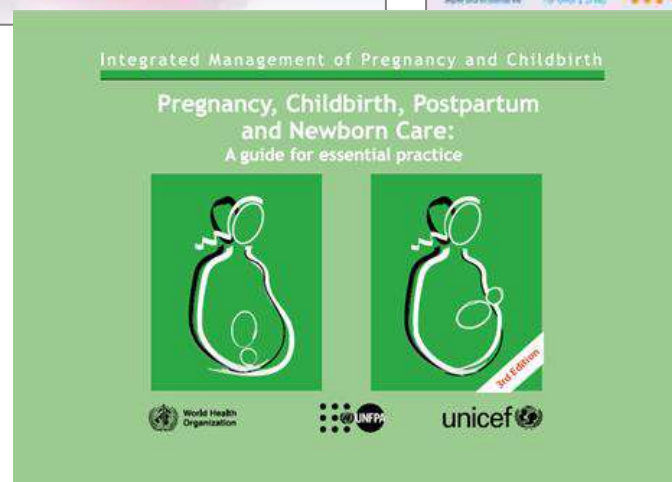
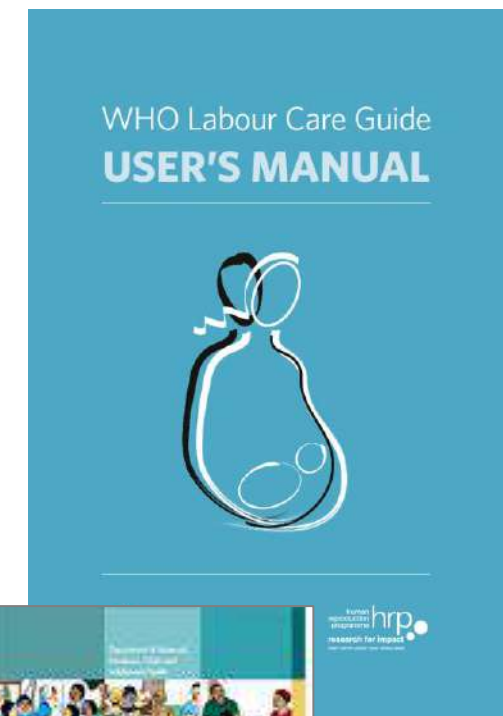
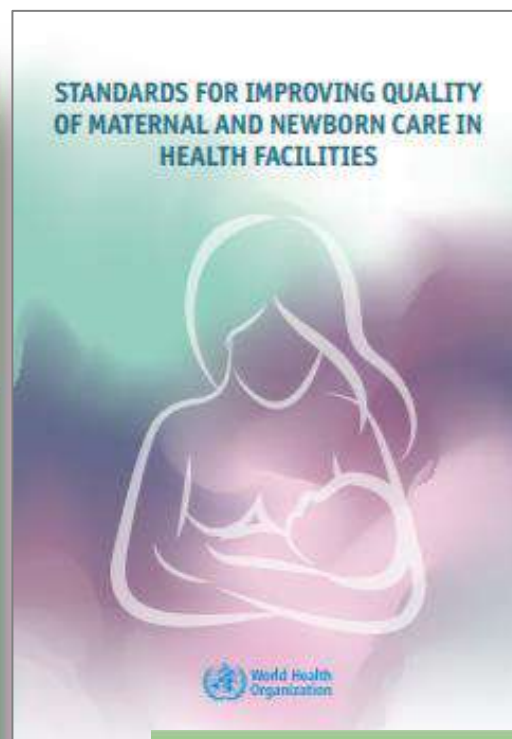
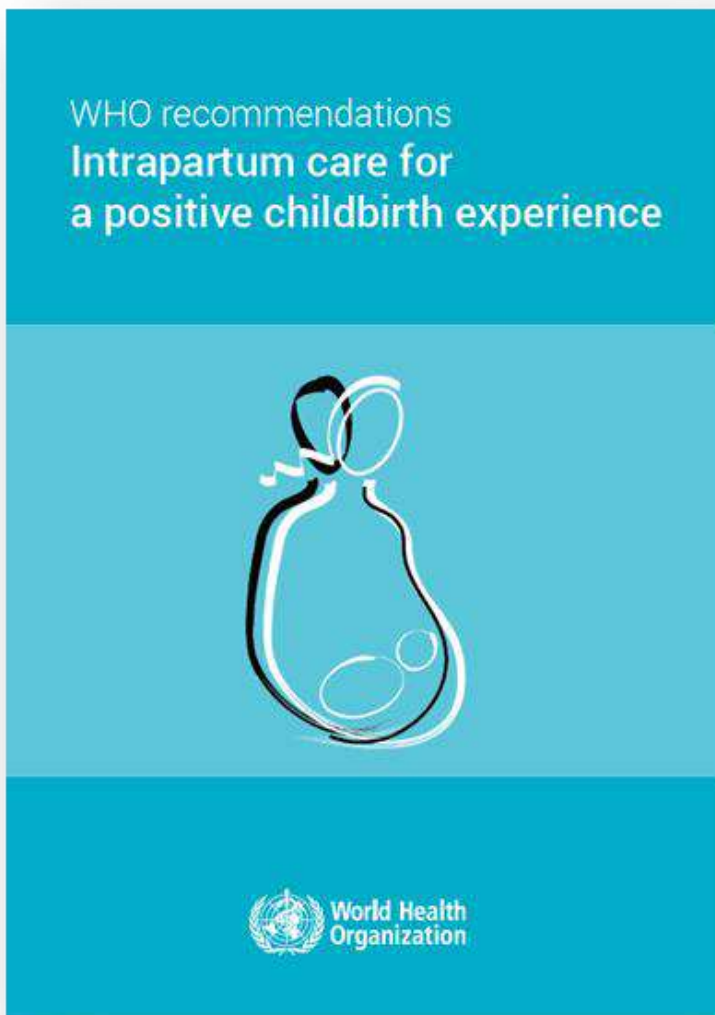
Respectful Care; Perinatal mental health care; Midwifery Leadership

Access to other WHO courses

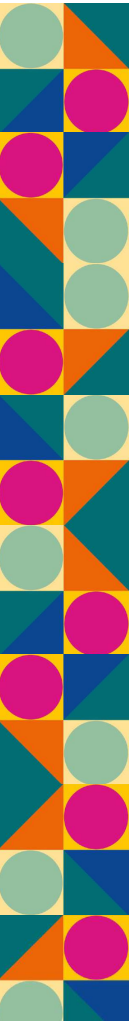
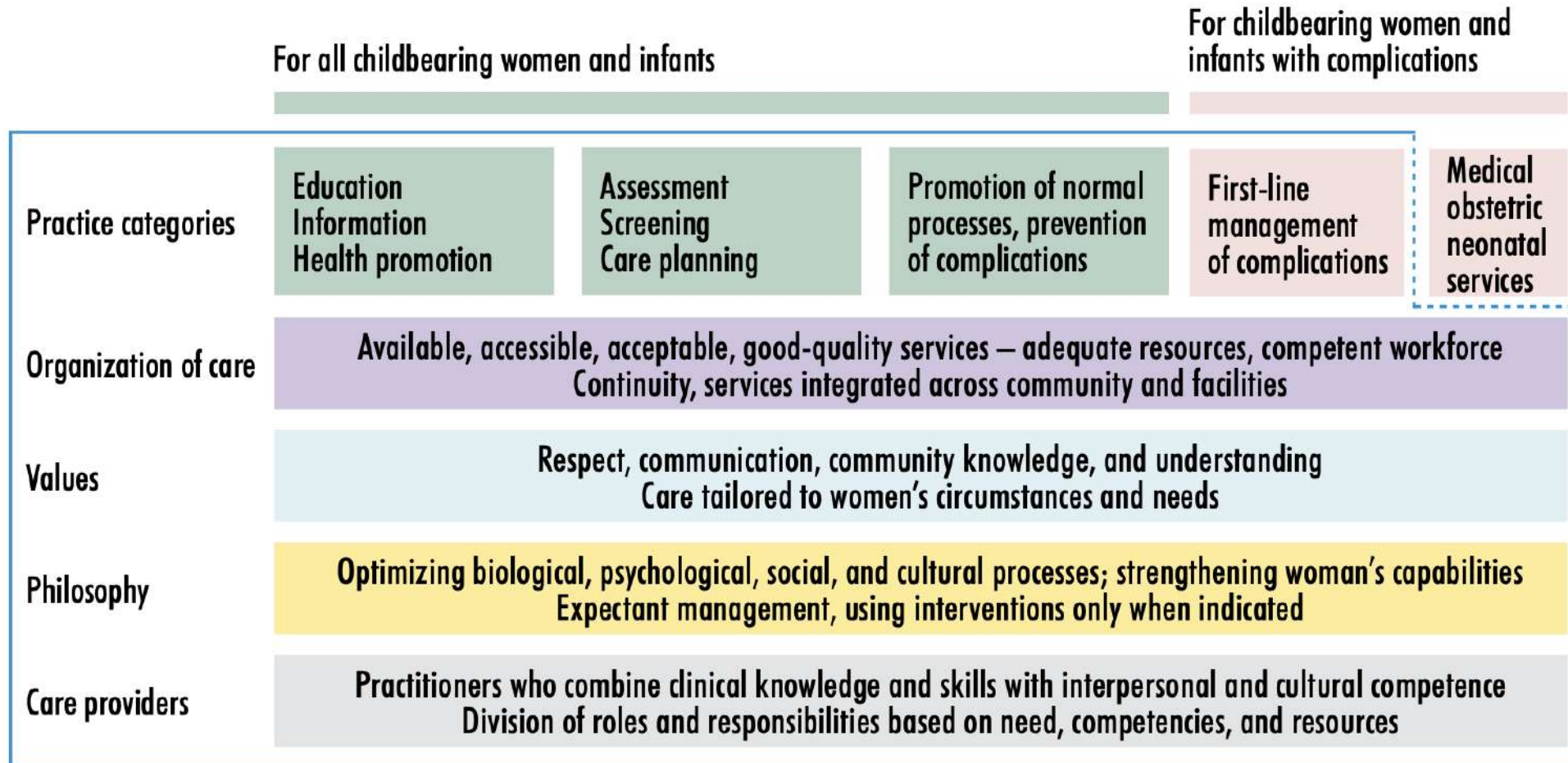
EMONC, Maternal and Perinatal Death Surveillance and Review; Newborn (small and sick) Violence Against Women; PPF, HIV, Malaria, TB



ECBC is a derivative from WHO recommendations



Grounded in the quality maternal newborn care (QMNC) framework



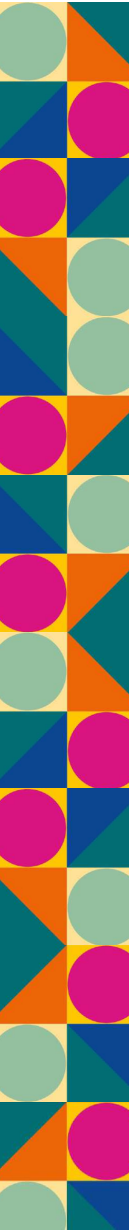
Why do we need the ECBC?

- Requests from multiple countries for a focus on continuing professional development (CPD) materials for a midwifery model of care for healthy women and newborns
- Responds to a global gap in evidence informed midwifery education materials; puts WHO recommendations in the hands of the practitioners
- Reflects increasing opportunities for blended learning – time away from clinical care reduced through on-line materials
- Shift from didactic “ToT” approach to modern, innovative, adult education for 21st century
- Includes links to other relevant WHO courses, including on emergency obstetric and neonatal care, all in one place.



Who is the interprofessional ECBC for?

- Midwives requiring in-service continuing professional development
- Educators providing continuing professional development
- Other members of the interprofessional team: nurse-midwives, OBGYNs, pediatricians, clinical officers.
- For use as a contribution to pre-service education programmes for midwives, nurse-midwives and doctors
- For use as a contribution to Direct Entry midwifery courses
- For others responsible for ensuring respectful care and the upholding of the rights of women and newborns



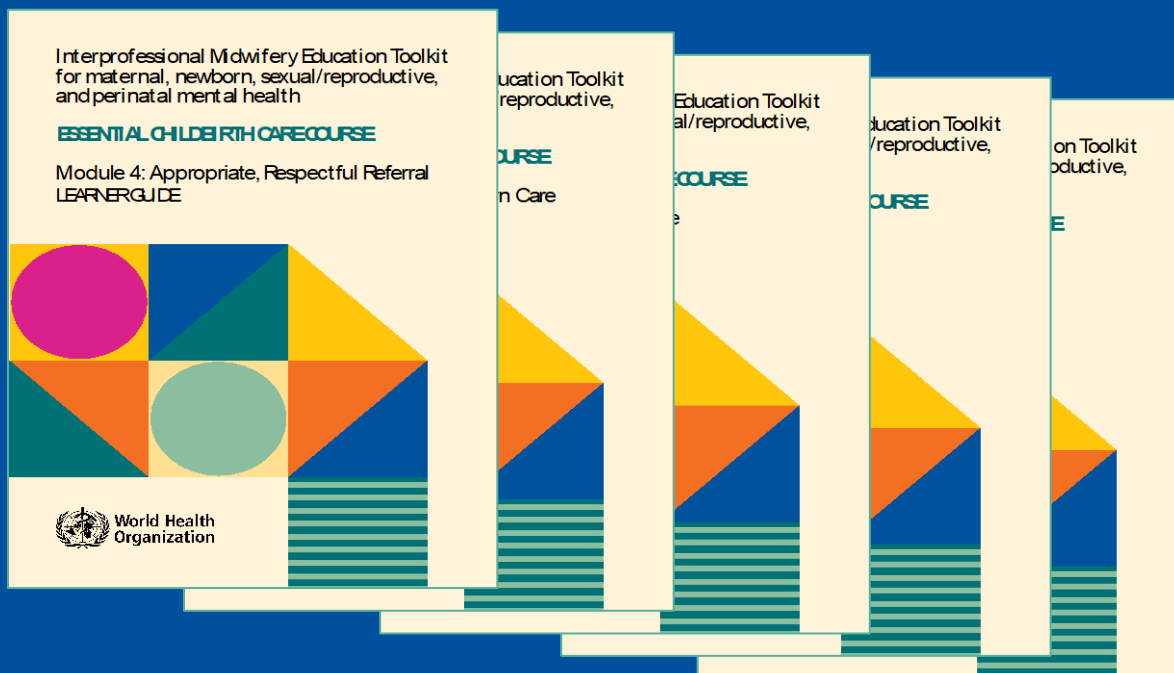
Facilitator Guides



Online pre-course materials



Learner Guides



who.int/health-topics/maternal-health

Quality of Care (QoC) halves maternal and newborn deaths & stillbirths

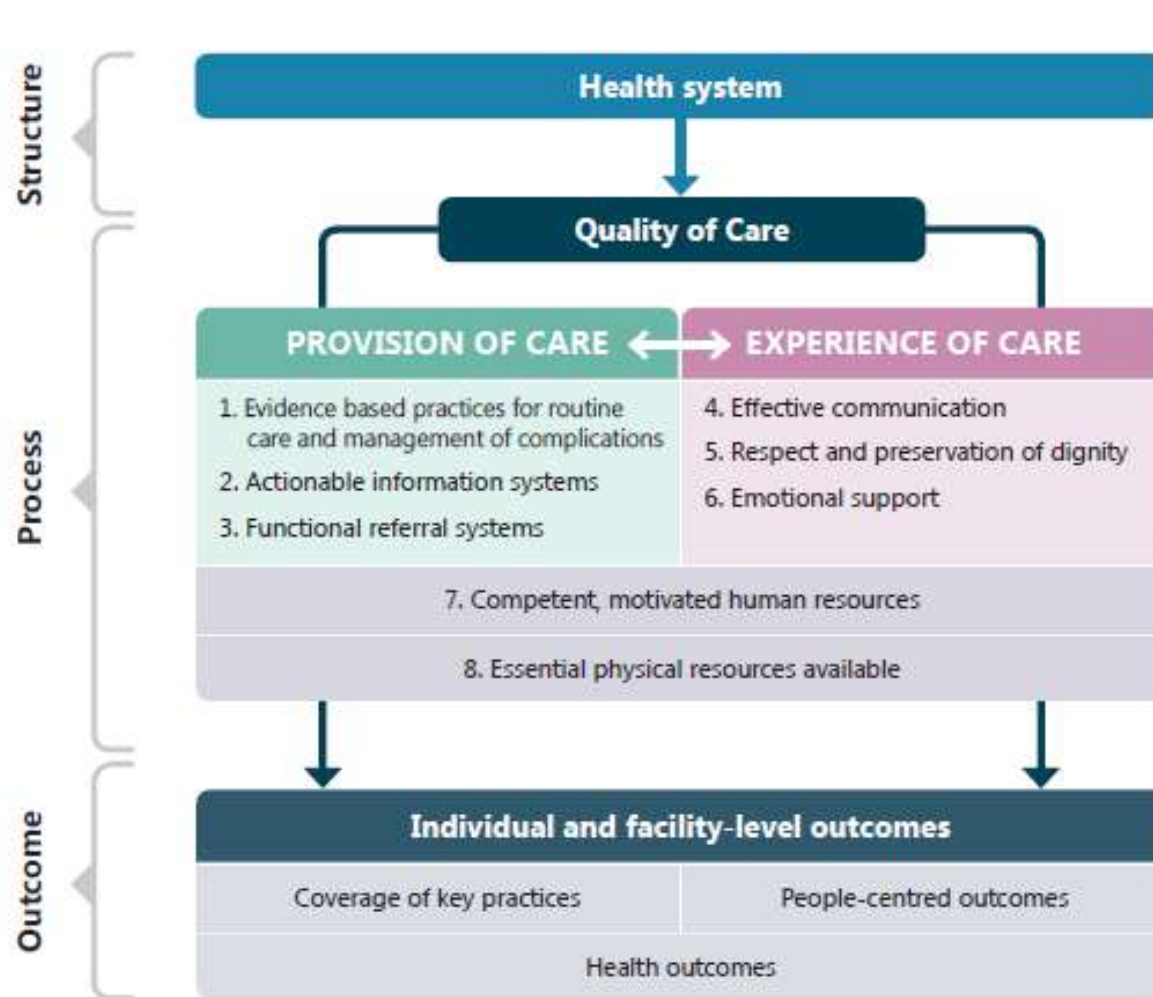
58%

It is estimated that about half of the maternal deaths and 58% of the newborn deaths could be averted with quality health care ²

Source:

1. Kruk ME, Gage A, Arsenault C, Jordan K, Leslie H, Roder-DeWan S, et al. High-quality health systems in the Sustainable Development Goals era: time for a revolution. Lancet Glob Health, 2018;6(11):e1196-e1252. doi: [https://doi.org/10.1016/S2214-109X\(18\)30386-3](https://doi.org/10.1016/S2214-109X(18)30386-3).

Fig. 1. WHO framework for the quality of maternal and newborn health care



Learning outcomes reflect the QoC framework

Module Learning Outcomes



By the end of the Introductory Module learners will:

Provision of Care

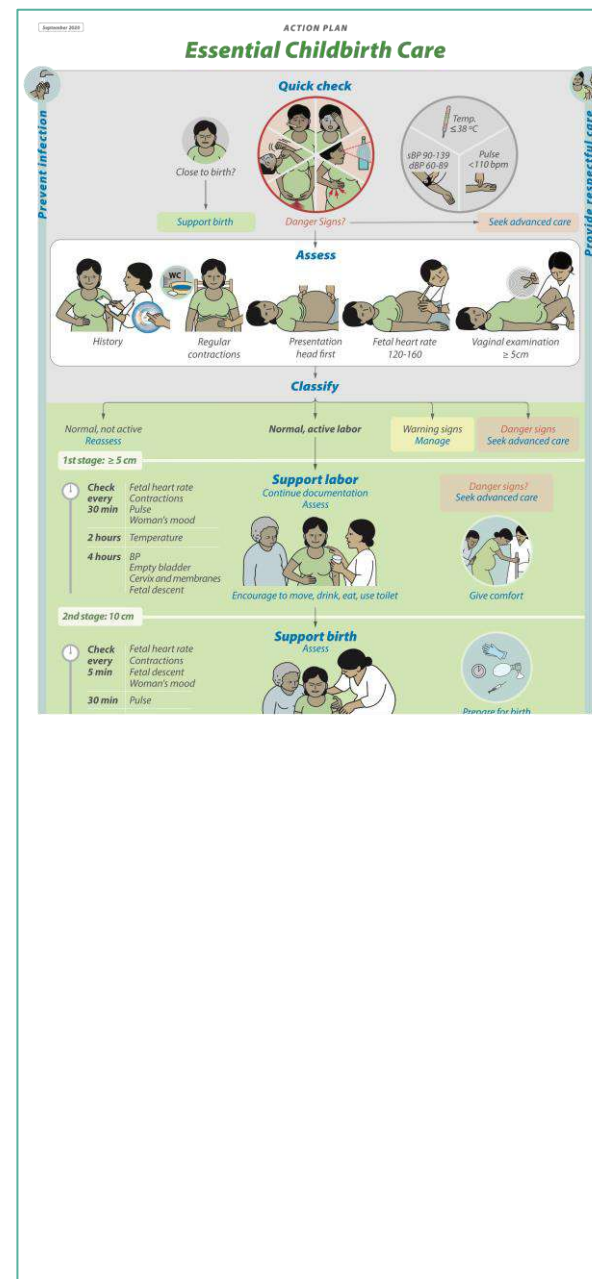
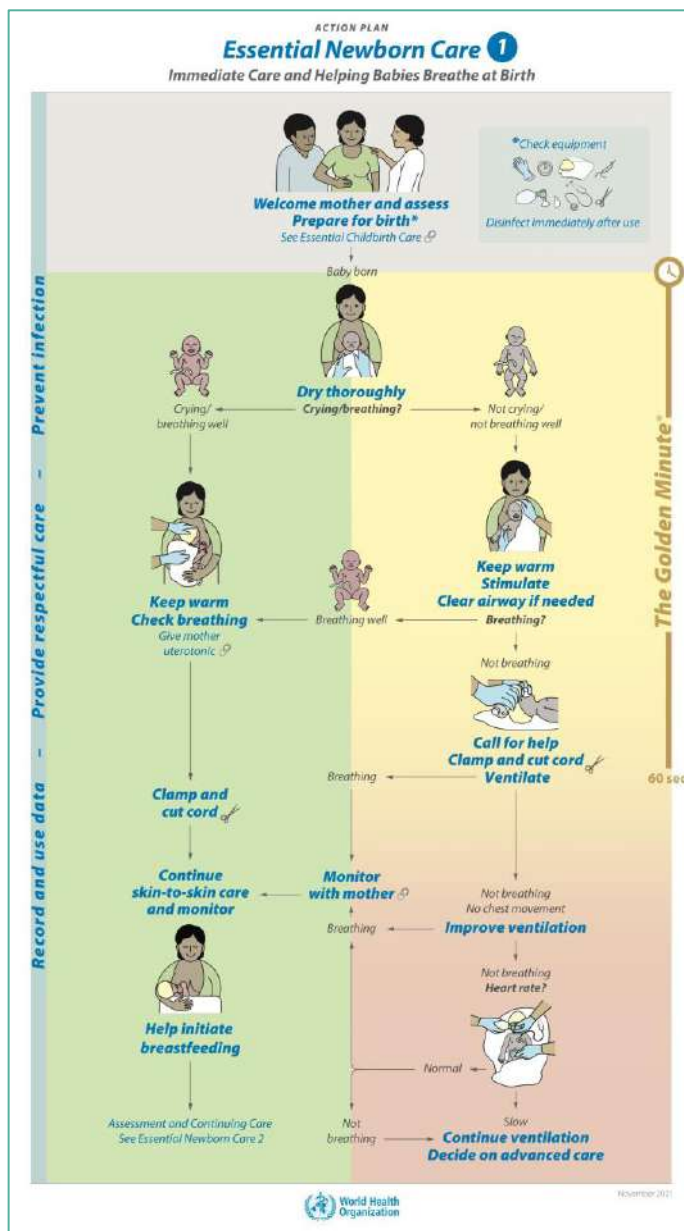
- Apply teamwork for quality midwifery care, demonstrating equality for all team members.
- Describe midwifery in terms of what women and newborns need during labour, birth and the immediate postnatal period.
- Apply relevant WHO QoC standards
- Apply WHO recommendations for a companion at birth
- Apply evidence to midwifery care for infection prevention and control, antimicrobial resistance (AMR) and water sanitation and hygiene (WASH)
- Initiate a Point of Care Quality Improvement Plan

Experience of Care

- Apply effective communication
- Implement midwifery care with respect and preservation of dignity
- Provide emotional support

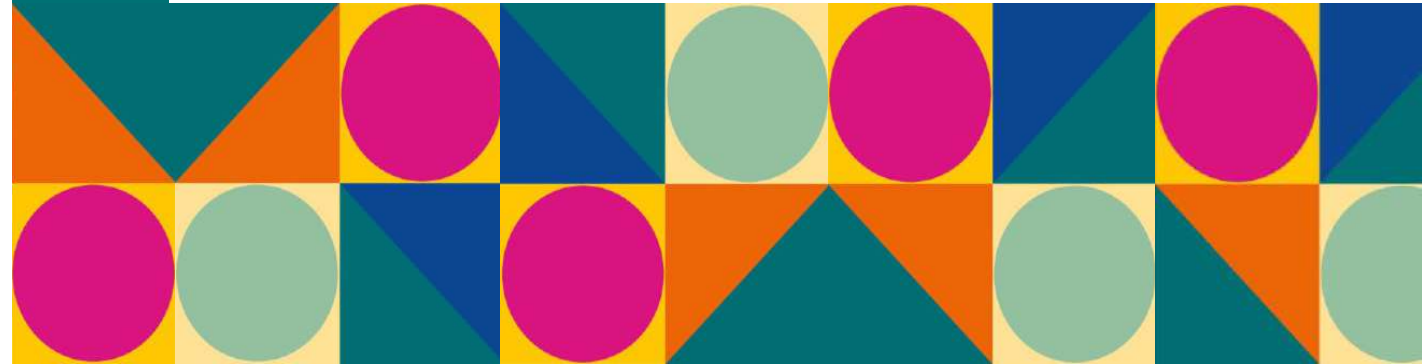


Supported by Action Plans to guide care



Interactive adult learning activities

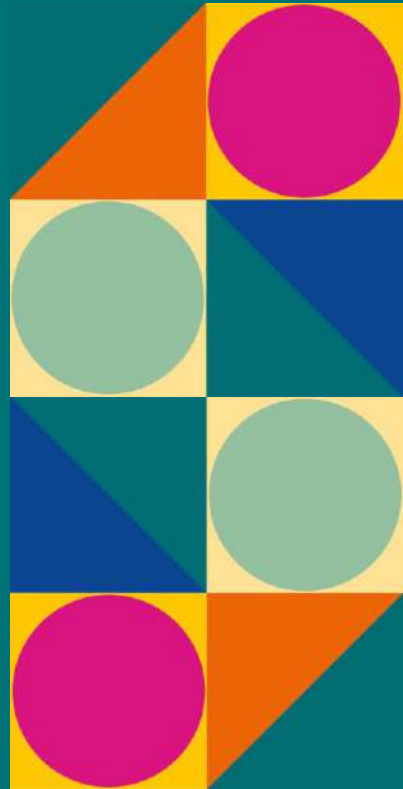
Icon	Explanation
	Estimated time for session or activity
	Share information
	Group activity
	Teamwork
	Treasure hunt
	Video analysis
	Point of Care Continuous Quality Improvement (POCQI)
	Role play
	Simulated clinical practice
	Mentored clinical practice
	Prepare for next day
	Break



Part 3: Panel discussion

Each day, the ECBC starts with a fun, interactive exercise about Teamwork.

This panel represent some of the many who worked as a team to develop the ECBC.



Panel discussion

Facilitated by Fran McConville, Technical Officer Midwifery, WHO Geneva



Sheena Currie
Senior Technical Adviser
Jhpiego



Pragati Sharma
WHO consultant



Indie Kaur
Fernandez Hospital, India



Rashmi Aradhya
Laerdal Global Health



Fatima Gohar
UNICEF



Kaveri Mayra
WHO consultant



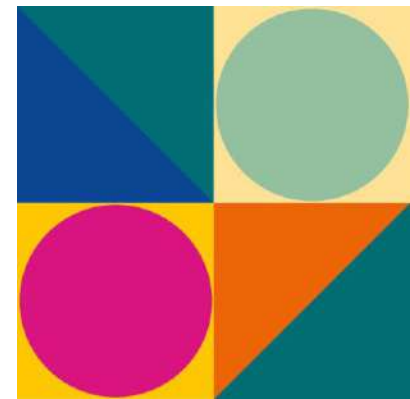
Florence West
WHO consultant



Margaret Phiri
WHO consultant Malawi



Sarah Bar-zeev
UNFPA



2.4

Treasure hunt: companion of choice at birth

🕒 30 minutes

🔍 TREASURE HUNT

Companion of choice at birth

🕒 10 minutes

LEARNING OBJECTIVE

Learners find the evidence-based recommendation on companion of choice during labour and childbirth and determine how this recommendation can be implemented in their place.

Treasure Hunts empower learners to find knowledge



Treasure Hunt 1: Companion of choice



Guiding Question:

What are WHO recommendations for companion of choice during labour and childbirth?

Reference:

Intrapartum care for a positive childbirth experience (WHO 2018)

[See page 29](#)

WHO recommendations:
Intrapartum care for
a positive childbirth experience



World Health Organization

Learning from co-design

Facilitators and learners in Gujarat and Telengana states in India

Educators becoming ECBC Facilitators

- *Ruth Joshila*
- *Sheetal Sampson*
- *Amita Sravanthika*

Facilitators fo the co-design

- *Pragati Sharma*
- *Rashmi Aradhya,India*



2.2

Teamwork: Meena arrives in labour

🕒 15 minutes

TEAMWORK

Facilitate teamwork activity: Meena arrives in labour

🕒 10 minutes

LEARNING OBJECTIVE

Learners apply teamwork to achieve quality midwifery care. Learners recognize potential bias in teams based on gender, hierarchy, or prejudice.

highlight: using scenarios

3. Introduce Meena to the group. Ask a learner to read her scenario aloud.

Meena is 21 years old and pregnant with her first baby. She came to this district hospital for her antenatal care and has been cared for by the same team of midwifery care providers throughout. Meena is healthy. No complications were identified during her antenatal care. Meena is not married, and her pregnancy was unplanned. The father of the baby has not been supportive during Meena's pregnancy.

highlight: interprofessional teams

4. Invite learners to represent a member of the team. Ask each learner to write the who they are representing in large writing on a label or paper.

- Meena
- Priya
- Team members of the facility could include:
 - midwife
 - nurse
 - cleaner
 - obstetrician
 - paediatrician
 - laboratory technician
 - security guard at the gate
 - facility manager
 - maintenance technician.
 - others

POCQI enables teams to develop solutions

POCQI PROCESS

Facilitate a POCQI for companion of choice during labour and childbirth at birth (Quality of care Standard 6)

🕒 X minutes

Background note for facilitators

This POCQI activity has been developed for a facility where the WHO recommendation on companion of choice at birth is not being implemented.

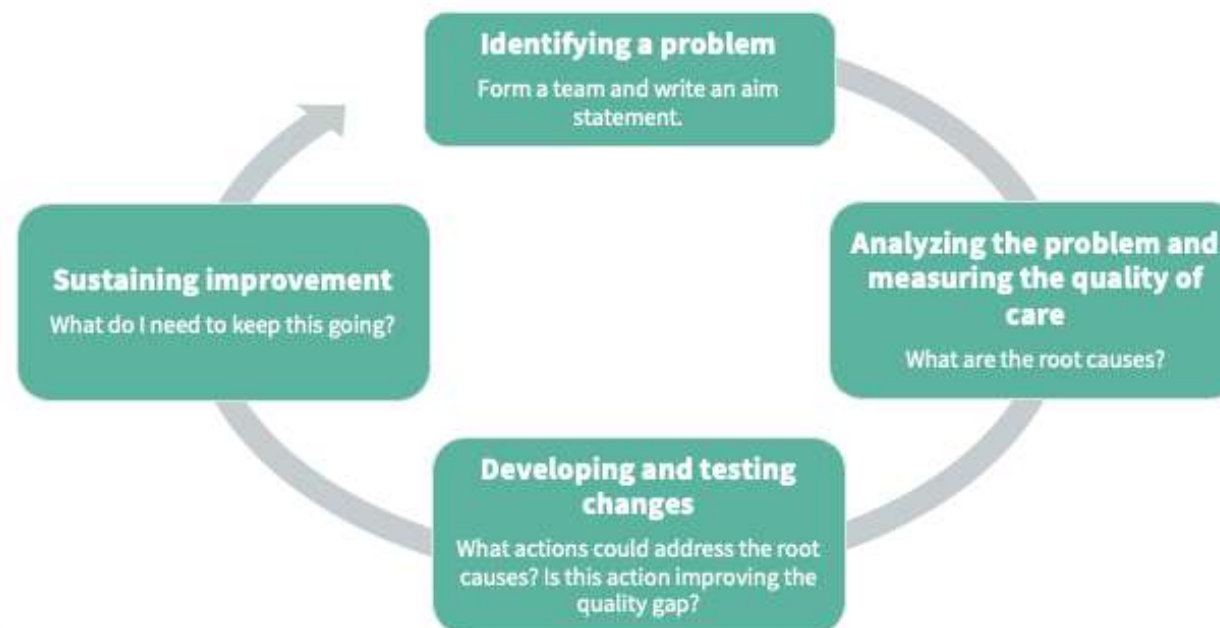
If learners are already working in facilities where it is happening, use the POCQI to address challenges to companion of choice or other quality of care problems many learners are facing.

LEARNING OBJECTIVE

Learners apply the POCQI process to Quality of care Standard 6: companion of choice.




Point of care quality improvement (POCQI)



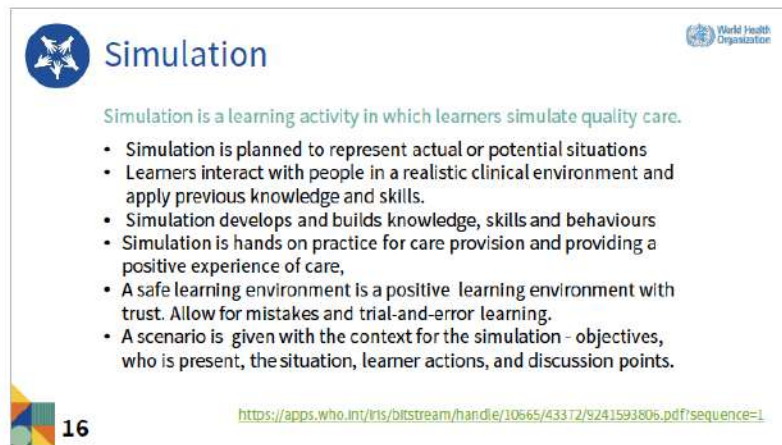
2.8

Simulated practice: immediate care of Aarush, a healthy newborn

 60 minutes SHARE

Simulated practice in a skills lab

- Show slide 16 and explain the key aspects of Simulation as a teaching and learning method.



Simulation

Simulation is a learning activity in which learners simulate quality care.



- Simulation is planned to represent actual or potential situations
- Learners interact with people in a realistic clinical environment and apply previous knowledge and skills.
- Simulation develops and builds knowledge, skills and behaviours
- Simulation is hands on practice for care provision and providing a positive experience of care,
- A safe learning environment is a positive learning environment with trust. Allow for mistakes and trial-and-error learning.
- A scenario is given with the context for the simulation – objectives, who is present, the situation, learner actions, and discussion points.

16 <https://apps.who.int/iris/bitstream/handle/10665/433172/9241593806.pdf?sequence=1>

Meet Meena, Fatima, and Susan

2.9

Mentored clinical practice

 10 minutes SHARE

- Show slide 17; describe clinical mentoring.
 - Clinical mentorship is a system of continuous practical training immediately after initial education.
 - Fosters ongoing professional development for quality provision and experience of care.
 - Mentoring may occur during site visits as well as via ongoing phone and e-mail consultation.
 - Clinical mentors need to be experienced, practising clinicians, with strong teaching skills.
 - Mentoring is a mutual learning process, both for the mentor and mentee.



Mentored clinical practice

A system of practical training and consultation that fosters ongoing professional development for quality provision and experience of care

Initial training
Case-based classroom training

Continuing education
Clinical mentoring

17 https://apps.who.int/iris/bitstream/handle/10665/410551/97924154884_eng.pdf

Looking forward to country implementation



Margaret Phiri
Malawi



Sarah Bar-zeev, UNFPA

Q: With all the global work that UNFPA is doing to strengthen midwifery education, including developing various curricula, how do you think that the ECBC and the wider Toolkit can be most useful?

Sarah says:

«We will be integrating elements of the ECBC and other courses into the UNFPA direct entry and 18 month curricula. We can select modules and activities (videos, treasure hunts etc.) and adapt to need.

It's been great working with, and learning from, multiple partners, on this»

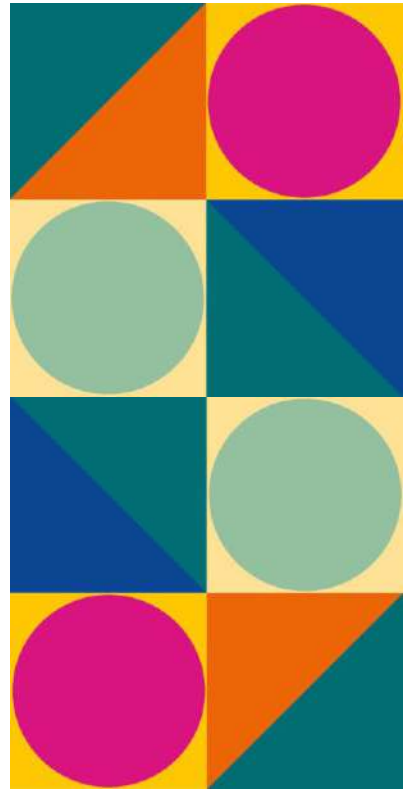


WHO Academy and ECBC

Coming Soon! Online learning activities



Elisa Roma
WHO Academy



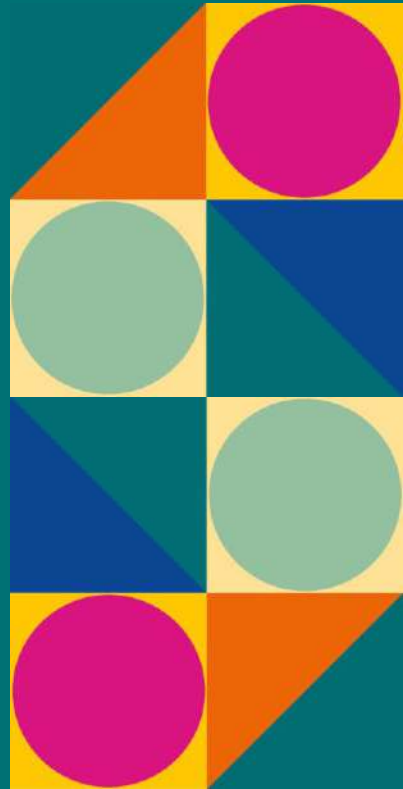
What's next?

- Working with partners, we are adapting the ECBC in India, Pakistan, Malawi, Sierra Leone and Bolivia. Other countries to follow.
- You will soon be able to access the materials on the WHO website, as well as the presentations shared today.

If you need further information, please contact Fran McConville,
Technical Officer Midwifery
Email: mcconvillef@who.int



Part 4: Remarks from partners



Remarks from partners



Harriet Nayiga
ICM Young Midwife
Leader Alumni member



Dr Mary-Ann Etiebet
AVP, Health Equity Lead
MSD for Mothers



Sarah Thomsen
Lead Policy Specialist in
Health and SRHR, Sida



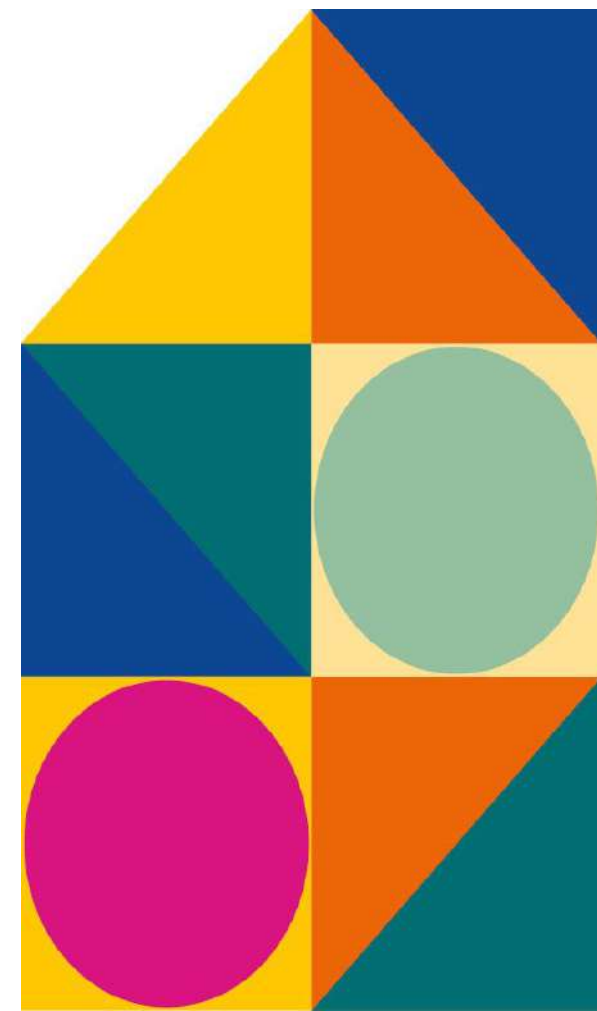
Robyn Churchill
Maternal Health Team
Lead, USAID



Anna Af Ugglas
Midwifery Education Lead
Laerdal Global Health



Janhavi Nilekani
Chairperson & Founder
Aastrika Foundation

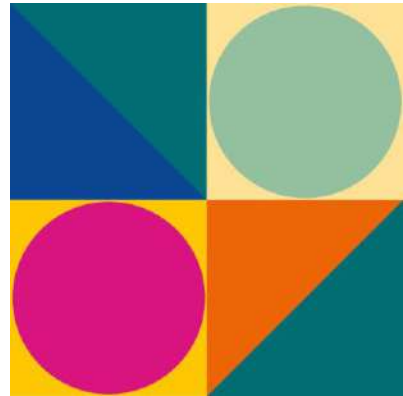


Closing remarks



Elizabeth Iro

WHO Chief Nurse, and midwife



Thank you!

Recording & slides are available at:

<https://www.qualityofcarenetwork.org/webinars/series-7-webinar-10-launch-who-essential-childbirth-care-course>

Visit website: <https://www.qualityofcarenetwork.org/about>

