

MONITORING REPORT (SBA Training for SNs)

DETAILS OF TRAINING:

The SBA training for SNs was conducted at PODTT, Mahabubnagar (Telangana) with the objective to possess technical competence related to routine care provision including identification and immediate management of complications arising during pregnancy and child birth so that the primary and secondary level health care facilities can effectively handle complications related to pregnancy and care of new born that will help in reducing the maternal mortality and morbidity.

The training was conducted during 8th to 28th March, 2016, for 21 days.

- The training monitored during 8th to 11th March, 2016 to assess the quality of training rendered and to collect the data pertaining to the training.
- During the said monitoring visit total 17 sessions were observed that included theoretical knowledge based sessions and skill based demonstration on models/mannequins.

The major components observed that were taught, discussed and skill part practiced on mannequins during the training sessions (8th – 11th March 2016) are as follows:

- Infection Prevention
- Introduction of ANC
- ANC history taking, ANC General and abdominal examination
- ANC interventions
- Counseling, signs and symptoms during pregnancy
- Care during labor, assessment, support care and vaginal examination
- Post natal and newborn care

I Salient Observations:

1. Total 4 persons were nominated for the said training from Mahabubnagar district and all attended the training course.
2. All the trainees had received the training module and material in the beginning of the training, which were in English language, except one manual that was also changed after due intervention.
3. The SBA training was conducted as per latest available guidelines of MoHFW and they used latest version of SBA training modules in English language.
4. There were total 5 trainers, 4 fulltime and 1 co-trainer (Pediatrician) for the said training. All trainers trained in TOT at IIHFW, Hyderabad.
5. The trainee trainer's ratio was sufficiently matched.

It was knowledge cum skill based residential training. The training programme used a range of methods and approaches –

- Lecture cum discussion
- Skill demonstration on models and mannequins.
- Audio visual aids

- Case study discussion
- Clinical sessions/ Bed side examination.
- Role play
- Learning assessment with the use of different Check lists

(A) Promotive /good Practices:

1. Objective of training with deliverables were well explained to the participants before commencement of theoretical sessions of the training. The medium of communication was English.
2. The facilitator used their resources adequately, once intervening by the visiting training observer. The trainers had around 1 year of training experience with average 10-15 yrs of experience in service.
3. Labor room was adequately equipped and well maintained with sufficient supply of drugs and equipments.
4. The sessions were held on time and the contents covered well as per the session schedule except one day.
5. All participants were attentive and participated well during all the training sessions.
6. Lecture room was equipped with computer, LCD projector, table, chairs, Fan etc.
7. The training venue had good average of delivery per month (400+), for better clinical/ skill learning of SBA trainees.

(B) Drawbacks & Weaknesses:

1. The pre-test was conducted before the training but not evaluated on the day of administering. After the due suggestions and valuing it, the resource person evaluated the questionnaire.
2. The facilitators adopted an extra set of questionnaire of 3 hrs but not mentioned the same in their training session plan/ schedule. However, the activity guided by the state commissioner of health and no such provision made in GoI SBA guidelines.
3. Partograph was not in use since last 3-4 days in labor room.
4. Two trainers (Gynecologist & Pediatrician) were found to be busy with their clinical duties along with the training, which left the training unattended by experts. It was affecting their own training sessions also.
5. The facilitators were unaware about the prescribed training manual to be distributed to trainees and no SBA quality protocol posters found to be used.
6. The training site was inadequate; a very small room with no ventilation, attached to the labor room was being used for the theoretical sessions. After the due suggestions, training was shifted at PODTT/DMHO office premises with some adequacy.
7. There was no electricity backup and functional transport facility available at training venue.

8. There was no formal follow up plan/format developed and no method adopted to get trainee's feedback.
9. There was no food/mess and refreshment facility for trainees available at training site.
10. Training venue was in urgent need to provide well equipped facilities for trainings including lecture hall.

II: Possible recommendations and solutions of drawbacks & weaknesses:

1. The pre-test score should be taken in to account to have improved and focused trainee centered training, especially in the areas of weakness.
2. Post training follow-up visits shall be undertaken in a routine for all the trainings imparted to ensure the execution of the skill and knowledge learnt by the trainees during the respective training.
3. Trainers/ facilitators shall concentrate on assigned training sessions, apart from their routine clinical activities, if so; to ensure the quality of training not get affected.
4. State shall ensure the rational nomination and deployment of trained trainees at their respective area of work to maximize the resource utilization and improving the quality of health services.
5. The training venue shall utilize its available resources as one lecture theatre/ conference hall could be utilized for multipurpose use including the trainings, which has occupied as NHM office.
6. Maintenance & functionality of the training centre/venue for conducting the trainings conveniently and effectively shall be ensured by the In-charge training site well before the inception of training.