



## Ongoing activities at the facility



Helping Mothers Survive (HMS) and Helping Babies Survive (HBS) activities are designed to take place in or near the workplace in order to improve competency and confidence of the entire health care team. Each initial HMS or HBS training “dose” is followed by structured, weekly skills practice and other activities, which include elements of teamwork, communication, and hands-on simulation for teams to continue developing skills and improve clinical decision-making for best performance. **Evidence shows that where facility-based staff support these ongoing activities, providers are more likely to use new skills in their clinical practice.**

### *What is needed to support practice and performance after the initial “dose” of training?*

#### **Site/environment strengthening:**

- Space at the worksite for activities that support performance

To improve transfer of learning into clinical practice, it is best to conduct ongoing learning and quality improvement sessions at the worksite. To minimize disruptions to patient care, consider designating a quiet space near the ward for skills practice, but recognize drills will take place in the labor ward.

- Supplies

Each HMS/HBS module uses a defined set of supplies during both initial training and for ongoing learning and quality improvement sessions. Be sure to refer to this important guidance in each module as well as the Quality Improvement Guide before rolling out your program.

- Supportive management

Holding ongoing learning and quality improvement sessions at the worksite might be a new concept for many facility managers. Be sure to take time at the beginning of the program to work closely with Ministry of Health (MoH) decision-makers and program partners to consider how these individuals can best sensitize facility-level managers to the importance of ongoing sessions. Work collaboratively with MoH decision-makers, District health management teams, and facility management to identify ways to minimize disruptions to patient care and to ensure that staff are well-supported to participate in each weekly activity. Some of the sessions focus on practicing specific psychomotor skills (such as suturing), while others involve role plays in pairs and/or surprise drills that engage the entire team to respond to a simulated clinical emergency. Work with the MoH to help them be sure the management team understands the varying nature of these activities. Management should also be encouraged to: support the staff members who are responsible for coordinating these sessions; ensure staff are offered a reasonable amount of protected time each week to complete their responsibilities; and participate in ongoing learning and quality improvement sessions as time and interest allow.

#### **Facility-based staff to coordinate practice and ongoing activities:**

Evidence shows that specifically designated facility-based staff are key to ensuring that continued practice at the worksite happens. A variety of titles may be used to describe the person who is responsible for coordinating these activities, for example some programs call this person the “Peer Practice Coordinator” or “Clinical Mentor”. The key is that this person is a well-respected, clinically active provider who is *based at the facility*. Managers at the facility will select this individual based on his or her: 1) enthusiasm in supporting the team’s ongoing maintenance of essential maternal and newborn competencies; 2) clinical proficiency in maternal and newborn health; 3) ability to collect and record practice sessions; and 4) demonstrated

***For more detailed information, please see the HMS website at [helpingmotherssurvive.org](http://helpingmotherssurvive.org) and the HBS website at [hbs.aap.org](http://hbs.aap.org)!***

performance as an effective coach, role model, and communicator. Selected staff must successfully complete the corresponding HMS/HBS Provider course in each of the clinical area(s) for the sessions they will run. For example, the person facilitating weekly ongoing sessions from the PE&E module must have successfully completed the HMS PE&E Provider course. These individuals are generally neither the most senior nor novice providers on the team. At least 2 staff members from each facility should be selected for this role (consider more for a large facility).

### *What additional preparation is needed to prepare the practice coordinators?*

Selected staff members must participate in an orientation, which is facilitated by the HMS/HBS Trainer. This one-day orientation typically occurs at the facility after the HMS/HBS Provider course (sometimes called the Champions course). Learning objectives for this orientation include how to:

- 1) Facilitate ongoing capacity-building using structured session plans
- 2) Set up practice and ongoing activities with appropriate materials
- 3) Conduct activities using simulator(s) and other supplies as needed based on clinical topic
- 4) Maintain the practice and ongoing activity log sheet
- 5) Offer effective coaching and debriefing to team members

During the orientation, trainers also help the Practice Coordinators manage potential problems encountered during simulation and practice sessions, and review effective coaching and feedback techniques to use with colleagues. Trainers discuss and set expectations regarding the frequency of ongoing practice, practice logistics (time, scheduling, space), maintenance of the practice sheet, and orienting new staff (who were not present during the initial training “dose”) to the ongoing learning and quality improvement sessions. Trainers also offer guidance on how to transition this role to someone else in the event that the individual(s) responsible for facilitating practice activities are no longer able to perform their duties.

For more details and to plan for this orientation day, please refer to the sample agenda available in the supplemental materials folders for each module at [helpingmotherssurvive.org](http://helpingmotherssurvive.org).

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