









An overview of a twinned approach to Capacity Building

Guiding principles of Helping Mothers Survive and Helping Babies Survive

Helping Mothers Survive (HMS) and Helping Babies Survive (HBS) learning modules aim to increase essential obstetric and newborn care skills among midwives, nurses, doctors, and others who provide care during labor and birth. HMS and HBS modules consist of concise, single to-several day facility-based trainings, followed by short, frequent sessions to improve team performance. Often in low resource settings, the same provider cares for a woman and her newborn. By combining both training packages, health care providers are best able to provide high-quality, life-saving care to both women and newborns at this most critical time.

Guiding principles:

 <p>COMPETENCY-FOCUSED</p> <p>Learners receive targeted knowledge updates, observe demonstrations, perform clinical simulations, and practice new skills while receiving feedback in order to build competencies.</p>	 <p>SIMULATION AND CASE-BASED LEARNING</p> <p>Content delivery should be as brief as possible, with larger emphasis on learning through hands-on simulation, case studies, and other interactive exercises.</p>	 <p>APPROPRIATELY SPACED, BRIEF PERIODS OF CONTENT DELIVERY</p> <p>Targeted content and interactive learning activities are delivered in a single day or over several days, and is spaced so that new skills can be practiced and honed before additional skills are taught.</p>	 <p>TEAM-FOCUSED AND FACILITY-BASED</p> <p>By training the entire team at the facility itself, all providers will be onboard with new or updated clinical practice and can work together to implement improvements in care.</p>
 <p>ONGOING PRACTICE OF SKILLS AND EXPOSURE TO CONTENT AFTER INITIAL TRAINING/EXPOSURE</p> <p>Skills are reinforced through consistent, scheduled practice and emergency drills. Practice sessions are short (15 minutes or less), structured, concrete, problem-focused, and include debriefing.</p>	 <p>FACILITY-BASED PEER STAFF IS ESSENTIAL TO FACILITATING PRACTICE</p> <p>Where there is a designated peer at the facility who can coach practice on simulators or other interactive exercises after learning, practice sessions increase and outcomes improve.</p>	 <p>TRACKING RESULTS</p> <p>It is important to measure clinical performance and outcomes, where feasible, before beginning an LDHF intervention and as a follow-up assessment to document the effectiveness of the approach and note any gaps in performance.</p>	 <p>CHANGES IN SERVICE DELIVERY REQUIRE COMPREHENSIVE QUALITY IMPROVEMENT EFFORTS</p> <p>During initial education and ongoing clinical skills practice sessions, the service delivery system can be examined, with gaps noted and addressed with support from clinical supervisors.</p>

Learning modules include:

HMS Bleeding after Birth Complete
 HMS Pre-Eclampsia & Eclampsia
 HBS Helping Babies Breathe
 HBS Essential Care for Every Baby
 HBS Essential Care for Small Babies
 Improving Care of Mothers and Babies: A guide for Improvement Teams

You can learn more and download materials and programming aids for HMS at: [Helping Mothers Survive \(www.helpingmotherssurvive.org\)](http://www.helpingmotherssurvive.org) and for HBS at: [Helping Babies Survive \(http://hbs.aap.org\)](http://hbs.aap.org). The Quality Improvement materials are available at: [Quality Improvement Guide](#).