



DAKSH Training

Empowering Nurse Mentors for improving MNH Care



IDENTIFICATION OF LEARNING PRIORITIES

Ensuring the quality of maternal and child health services in public health facilities has been one of the most important mandates under the National Health Mission. This could be achieved only when the nursing team was proficient enough in their skills to provide better quality maternal health care services at health facilities. Earlier, the content and process of pre and in-service training of staff nurses were largely focused on knowledge and provided limited opportunities to practice the necessary skills. Therefore, there was a need to create a simulated environment to perform the required skills before managing the cases independently. Hence, Government of India took the strategic initiative of launching a training program 'Daksh' in the year 2016 to improve the quality of MCH services.

MCH LEADERSHIP TRAINING FOR BETTER HEALTH FACILITIES

In consonance with the Government of India's (GoI) commitment to reducing maternal and newborn mortality in the country, the idea behind launching 'Daksh' was to enable the service providers including the nurse mentors in providing high-quality MCH services. This was a state-level, six days, competency-based residential training and certification program to be implemented through skill labs. The curriculum and manual for the skill-based 'Daksh Training' comprising Reproductive, Maternal, Newborn, and Child have been developed in consultation with the government and many health experts. The key objective of the Daksh training was to build the clinical skills of the staff nurses in performing essential maternal & newborn health care through various practice sessions. This training was balanced between clinical issues, system issues, and in building mentoring and problem-solving skills. Adhering to the quality training norms of the government, the training was largely conducted in the well-equipped Skill Labs and Seminar Rooms with the required set of teaching and learning aids.

HANDS-ON PRACTICE- TRAINING APPROACH

The concept of the skill lab facilitated the training procedure. Skills labs served as a prototype demonstration and learning platform for Nurse Mentors focused on competency-based training, and provided the opportunity for repetitive skills practice, simulation of clinical scenarios, and training under the supervision of a qualified master trainer. DAKSH training comprises theory and skills sessions. Theory sessions were designed as per standard norms of SBA, IMNCI, and NSSK guidelines. The practical sessions focused on practicing skills on mannequins, simulation exercises, drills, demonstrations, role play videos, and presentations. Many warm-up and ice-breaking exercises were added to the training to engage the participants and retain their interest during the entire span of training. For this purpose, TNAI was used as a nodal site to train and handhold nurse mentors. Later, in response to the increased training load, the program was efficiently scaled up by effectively using the available time and resources, and hence four more skill labs were established i.e. COVID Hospital Sec 39 Noida, SIHFW, Lucknow, Jhansi, and Varanasi. The Skill Labs dealt mainly with imparting knowledge and providing hands-on practice on the available mannequins. By creating the cadre of skilled and proficient nurse mentors, the UP-TSU facilitated two batches of Training of Trainers to generate a pool of master trainers for imparting and coordinating DAKSH training. Thirty-two government doctors and UP-TSU officials were certified as trainers. UP-TSU also assisted in developing a batch-wise micro plan for nurse mentors to be trained and continually facilitated the training in compliance with protocols as per facilitator manual instructions. Considering the large scale and coverage of the program it was prudent to invest in the upskilling of nurse mentors. The intensive training as a result made the mentors realize the vision and scope of the program, which focused on quality improvement and developing knowledge, skills, and practices in relation to specific competencies.

THE KEY HIGHLIGHTS OF DAKSH TRAINING



- ▣ In Phase 2 of the NM program, the duration of training was envisaged to be six days with budgetary and technical support from Uttar Pradesh National Health Mission. However, in Phase 3 of the program, an integrated DAKSH (six days, residential) and Mentoring Methodology (three days) induction training has been merged to create an integrated package of nine days, including successively planned clinical, technical and mentoring methodology sessions.
- ▣ At the onset of the training, a pre-test consisting of knowledge and Observed Structured Clinical Examination (OSCE) was used to understand the baseline knowledge/skills level of the learners. After the training, a post-test consisting of knowledge and OSCE components was carried out to understand the improvement in knowledge and skills level of the learners from the baseline.
- ▣ Theoretical knowledge-building sessions in classrooms and seminar rooms.
- ▣ Demonstration of steps by trainers on mannequins and equipment at skills stations as per the standard checklist.
- ▣ Practicing of skills under the supervision of trainers wherein each skill station is assessed with a checklist for progressive performance.
- ▣ Felicitation of participants with certificates on successful completion of training based on competency scores.

SKILL SETS ATTAINED

As Nurse Mentors received training, they kept becoming competent enough to perform the given skills related to evidence-based practices for maternity care during labor, delivery, and immediate postpartum period to reduce maternal and neonatal mortality:



INFECTION PREVENTION PRACTICES

- Universal Precautions
- Personal Protective Equipment
- Hand Washing
- Equipment and instruments- Process of Cleaning and Disinfection



ANTENATAL CARE

- Ante-Natal care with measuring of important vitals
- Antenatal Care including Laboratory Tests
- Abdominal Palpation and Auscultation of Fetal Heart Sound



INTRA-NATAL CARE

- Organizing the labor Room and New Born Care Corner
- Assessment of cervical dilatation and effacement
- Plotting and Interpreting the partograph
- Care of Baby and Mother at Birth
- Postnatal care



MANAGEMENT OF COMPLICATIONS

- Management of Shock
- Setting up an IV Line
- Management of Postpartum Hemorrhage
- Administration of Magnesium Sulphate for Management of Severe Pre- Eclampsia
- Newborn Resuscitation
- Using multi-dose inhaler with spacer and nebulizer



FAMILY PLANNING SERVICES

- IUCD

PRACTICAL IMPLICATIONS OF THE TRAINING



DAKSH training recognized the quality of intrapartum and immediate postpartum care and proved to be an important pillar to strengthen the capacity of Nurse Mentors to provide quality service delivery. The block-level Nurse Mentors were DAKSH trained, certified, and mentored staff at their facilities according to the rapid improvement cycle as per LaQshya. Post Training, UP-TSU continued supportive supervision at facilities through the medium of State Specialists- RMNCH+A and Nurse mentors posted at District Hospital. After being DAKSH trained, Nurse Mentors were fostered with a sense of accountability, ownership, and an opportunity to translate the gained knowledge into practice, so that collective efforts toward an integrated goal of capacity building of staff at delivery points, facility strengthening, and effective coverage of clinical and ancillary services are achieved. The abilities they mastered permitted them to use their inherent potential to mentor staff as well as to be skilled coaches in delivering quality clinical services.

BUILDING THE SKILLED TASK FORCE OF HEALTH CARE SYSTEM

UP-TSU facilitated the DAKSH training wherein UP-TSU officials and selected government counterparts including doctors were certified as master trainers. Following this, through a cascade pattern of training these master trainers further trained block facility NMs across the 75 districts. UP-TSU also backed developing a batch-wise micro plan for several untrained nurse mentors of 820 blocks in 15 batches. The forthcoming objective is to saturate all NMs across 820 blocks with DAKSH training. So that the NMs are able to leverage the acquired knowledge, skills and in managing complications during pregnancy and childbirth. DAKSH training promoted collective learning and engrained in them the confidence and coordination to deal with obstetric emergency situations effectively.



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