

Clinical Training on Safe Delivery of Care

Overview of the trainings provided by Maternity Foundation

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1. Executive summary

Maternal and Newborn Health (MNH) and reduction of maternal and neonatal mortality is a priority Sustainable Development Goal (SDG). Maternity Foundation (MF) is committed towards the achievement of this global good. As a part of its Safe Delivery+ Programme, Maternity Foundation offers training to midwifery students, midwives, and related health care professionals in low resource areas, thereby supporting them in ensuring safer births for women and their newborns. This document provides an overview of the various training programmes offered by MF, categorized into three broad categories as pre-service package for students, in-service package for practicing health care professionals and training of trainer (TOT) packages for facilitators and educators.



Pack 1 Orientation/sampler (3 hours)

> Pack 2 SDA deepdive (1 day)

Pack 3 Blended learning (3 days)

2. SDA in-service

For practicing midwives and health care professionals

Pack 1 Orientation/sampler (3 hours)

> Pack 2 SDA deepdive (1 day)

Pack 3 Blended learning (3 days)

3. SDA TOT

For local facilitators, trainers and midwifery educators

Pack 1 Online (3 days (3 hours per day))

> Pack 2 Onsite (3 days)

- Need based customized trainings
- Tailor made training packages
- Low dose high frequency trainings/Micro learning
- Refresher trainings

2. Glossary

Blended learning - Training package provided on the Safe Delivery App (SDA) and specific modules using a combination of the virtual mode, self-learning and onsite workshop.

Cascade training - A way of training a large number of people / professionals through trainers and master trainers. The master trainers train a group of trainers who then train the professionals. This process continues until all the target participants are trained.

Certified SDA trainer - A midwife or related health care professional who has successfully completed the Training of trainers' programme and has obtained the safe delivery champion certificate by completing the assessment in the SDA.

CPD - Continuous Professional Development. They are formal learning experiences which help professionals to improve their practice in their specialized field. In certain countries, CPD points are required for the renewal of their professional practice license.

Customized training - Trainings scheduled and packaged as per the need of the trainee.

Deepdive - One day training in which the trainees are provided in-depth understanding of the SDA with one complete module as the sample.

Facilitator - A midwife or health care professional who is a part of the training program and helps the trainees to attain their training objectives by creating a favourable learning environment.

Health care professionals - In this document it refers to the individuals educated and trained in health care sciences in relation to maternal and newborn health and working in areas related to sexual, reproductive, maternal, newborn and adolescent health (SRMNAH).

In-service education - Planned, structured education or training programmes organised for health care professionals who are already working in an institution in a particular field.

LDHF trainings - Low Dose High Frequency Trainings. It is a short, targeted, competency-based training focusing on one or a few skills, spaced over time with reinforcement through frequent structured practice sessions.

Master Trainer - Refers to a trainer at Maternity Foundation who can conduct TOT programmes. It can also be a certified SDA trainer with good training skills, identified at the national level, and has conducted a minimum of three SDA trainings with mentorship and handholding by MF trainers. This trainer is certified as Master trainer to cascade the TOT programmes within the country.

MF - Maternity Foundation.

MNH - Maternal and Newborn Health.

Midwife - The midwife is recognized as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labor and the postpartum period, to conduct births on the midwife's own responsibility and to provide care for the newborn and the infant.

Orientation - A short program in which the participants are introduced to the SDA, helped in installation of the app and guidance provided on its usage.

Pre-service education - Formal education and training that happens in an institution before the individual is placed in to work.

Refresher trainings - Trainings planned for practicing midwives and health care professionals who have completed the SDA training 3 years back to update their knowledge and skills and to orient them to the new modules and updates. It is planned need-based within the country.

SDA - Safe Delivery App.

SDG - Sustainable Development Goals.

TOT - Training of Trainers.

Trainer - A midwife or related health care professional who has undergone the training of trainers' program, completed the expert level in selected modules of the SDA and certified by Maternity Foundation for that specific modules.

WHO - World Health Organization.



3. Introduction

The latest data on maternal mortality published by WHO, UNICEF, UNFPA, World Bank Group and UNDESA named 'Trends in maternal mortality 2000 - 2020' show that in 2020, every day, approximately 800 women died from preventable causes related to pregnancy and childbirth meaning that one woman dies around every two minutes. While the Sustainable Development Goal (SDG) target 3.1 is to reduce maternal mortality to less than 70 maternal deaths per 100 000 live births by 2030, if the current trajectory will continue, the global maternal mortality rate will be 222 deaths per 100,000 live births by 2030 - over three times the SDG global target of 70! The report underlines that we must significantly accelerate progress to meet global targets for reducing maternal deaths, or else risk the lives of over 1 million more women by 2030. This data and its impact, call for accelerated strategic activities to work for safe pregnancy and childbirth for all women, everywhere.

Pregnancy and childbirth are normal physiological processes. A few pregnancies deviate from the normal physiological course and become complicated, demanding expert and high-level care, leading to morbidity and mortality. Majority of the maternal deaths are preventable if women receive quality maternal care from midwives and skilled healthcare professionals. Training of these professionals is the key in reducing the preventable maternal deaths. They should be familiar with the latest protocols and guidelines that emerge from ongoing research and utilize the current evidence in their midwifery practice to provide the best possible care for women with the target of providing a positive childbirth experience for all women, worldwide.

The State of World's Midwifery report, 2021 indicates four global investment needs - (i)Health workforce planning, management, and regulation in the work environment, (ii) high quality education and training, (iii) midwife-led improvements to sexual, reproductive, maternal, newborn, and adolescent health services, (iv) midwifery leadership and governance. High quality education and training for midwives during pre-service and in-service are emphasized. Key challenges in this area include the lack of investment in educators, limited skills and knowledge in contemporary teaching and learning, inadequate "hands-on" experience for students and gaps in infrastructure, resources, and systems, particularly in low- and middle-income countries. Innovative teaching and training methodology is the need of the hour to address this challenge.

The Safe Delivery App is a lifesaving digital learning and instruction solution, right in the hands of midwives and health professionals, adhering to the latest evidence based clinical guidelines and management protocols at the global and national level. It is free to be downloaded from the play store for android system and app store for iPhones and works offline once installed, reaching even the most remote health care professional. It has simple, intuitive, and engaging aminated instructions to engage the learner using personalized and gamified learning. The SDA is effectively used as a learning and teaching tool. Integration of the app into clinical training at various levels allows the learners to use the app for learning and teaching and enables them to develop critical midwifery clinical skills and clinical decision-making skills to apply when responding to basic obstetric and neonatal emergency conditions, apart from caring for women during pregnancy and childbirth.

¹WHO: Trends in maternal mortality 2000 to 2020: Estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division

²WHO: The State of the World's Midwifery 2021

4. Who we are

Every other minute, a woman dies during pregnancy or birth. Every seventh second, a newborn suffers the same fate. Maternity Foundation works to ensure safer births for women and newborns – everywhere. It is evident that most maternal and newborn deaths happen in low-resource, poor and fragile settings. Likewise, for every woman who dies, 20 – 30 women suffer preventable injuries, infections, or become disabled from causes related to pregnancy or childbirth and majority of the mortality and morbidity can be prevented if women receive quality care from a skilled healthcare professional. That is why MF is building midwifery knowledge and skills among healthcare professionals and students in low-resource areas. We do so by providing innovative learning programmes and life-saving and cost-effective digital health solutions, including the SDA.

Maternity Foundation started out in 2005 as a small Danish organisation working in western Ethiopia. Today, we are an international NGO with offices in Ethiopia, India, and Denmark and engagements in multiple countries across Sub-Saharan Africa, Middle East and North Africa, and Asia. We have plans to expand our work into in Latin America and the Caribbean too. Maternity Foundation works to improve maternal and newborn health with the aim "It should not cost life to give life". Our vision is a world where no woman or newborn suffers preventable harm or death related to pregnancy or childbirth.



5. What we do

Our Safe Delivery+ Programme is a digital and modular learning and training platform. It includes the Safe Delivery App, developed by healthcare professionals based on research. This provides lifesaving, innovative, digital health solutions and facilitated integration of the digital platform in-country into pre-service and in-service programmes and by interoperability with other learning platforms and programmes.

The SDA is a professional job aid, teaching and learning tool for midwives and healthcare professionals. We combine the app with online learning platforms in addition to remote and on the ground trainings. At Maternity Foundation, we have an extensive experience in various capacity building approaches such as blended learning, low dose high frequency training, facilitated and non-facilitated learning, self-directed learning etc. for health professionals' competency improvement. By the year 2022, we have reached more than 375,000 healthcare professionals and our services are used in 40 countries with +30 app versions.

Partnerships are vital to the success of our work. Through our partner-driven model of implementation, we work closely with national governments, local and international associations, as well as with UN agencies and international NGOs to strengthen existing health systems and priorities. We integrate our services into project-specific and national education and training programmes, pre-service curricula, and with other digital solutions. This ensures sustainability and further enhances the scalability and outreach of our digital solutions and programmes in a cost-effective way.

At Maternity Foundation, our clinical team comprising of midwives and obstetricians has been developing, reviewing, and providing clinical training integrating the SDA to healthcare professionals around the world since 2015. Over the past two years, despite a shift towards remote training in response to Covid-19, our trainer midwives have reached more than 24,500 MNH professionals with training in 29 countries on 14 clinical modules included in the SDA in which a module on Covid-19 was one of them.



5. Our training approaches



Designed and delivered by global clinical team



Incorporates adult learning theory³, global best practice and professional experience



Tailored to participants' requirements - dosage, frequency, language



Adapted to training needs of participants



Flexible delivery - in-person, remote, blended and more



Long term learning and support in clinical mentoring and coaching



Customisable monitoring and evaluation tools



Recognises participation - personalised champion certificates



Personalised ongoing learning and self-assessment



Trained participants invited to join online community of practice



Utilized in development and humanitarian settings

7. Our training packages

Upon request, we can tailor our training offers specifically to the occasion/project with need-based customization, tailor-made packages, LDHF-approach and refresher trainings. Our trainings are broadly packaged into SDA in pre-service education, SDA for in-service training and SDA TOT programme.

1. SDA pre-service

For midwifery and health care professional students

Pack 1
Orientation/sampler
(3 hours)

Pack 2 SDA deepdive (1 day)

Pack 3 Blended learning (3 days)

2. SDA in-service

For practicing midwives and health care professionals

Pack 1 Orientation/sampler (3 hours)

> Pack 2 SDA deepdive (1 day)

Pack 3 Blended learning (3 days)

3. SDA TOT

For local facilitators, trainers and midwifery educators

Pack 1 Online (3 days (3 hours per day))

> Pack 2 Onsite (3 days)



Need based customized trainings



Tailor made training packages



Low dose high frequency trainings/Micro learning



Refresher trainings

1

Safe Delivery Pre-service training package

In pre-service nursing and midwifery education, as well as other health care professional courses, students are exposed to various methods of teaching learning processes to create a conducive environment for learning. With the advent of digital solutions for learning, blended learning approach and self-directed learning have been incorporated to complement classroom and clinical teaching. The Safe Delivery App is a digital solution, catering to the learning needs of this generation of learners. Its gamified approach, with short videos and practical tips enable students to engage in active learning using the app. For effective utilization of the app and for obtaining maximum benefit, it is imperative that the students are guided in the installation of the app and trained on the usage of it. This is done through various trainings during their preservice education. Moreover, midwifery educators are supported in the utilization of the app in teaching through TOT programs. For details of TOTs for educators, refer to the segment later in this document. Three different training packages are available for the students, as detailed below.

7.1.1. SDA Pre-service Pack 1: Orientation/Sampler

Details	Aim	Objectives	Topics covered
Duration: 3 hours	At the end of the orientation the	- Orient students on the SDA	- SDA orientation
Participants:	students will have		- Introduction to
Students	the SDA installed on their device	- Encourage students to install the app	normal birth module
Venue: Virtual/	and familiarize		- Respectful
Lecture Hall	themselves in using it.	- Guide students in the usage of the app	maternity care
Batch size: 50		- Motivate self-	- Discussion and clarification
No of trainers: 2		directed learning	

7.1.2. SDA Pre-service Pack 2: SDA Deep dive

Details	Aim	Objectives	Topics covered
Duration: 1 day ≈ 6 hours	At the end of the workshop the students will have	- Orient students on the SDA	- SDA orientation
Participants: Students Venue: Lecture Hall	the SDA installed on their device and familiarize	Encourage students to install the appGuide students in	- Respectful maternity care - One SDA module
Batch size: 30 to 50	themselves in using the app.	the usage of the app - Motivate self-	as per the context. (ex: normal labour and birth)
No of trainers: 2/3		- Facilitate students to acquire knowledge in the selected SDA module	- Discussion and clarification
		- Enable students to become confident users of the SDA	

SDA is a good application that helped us to acquire new knowledge, the application can serve as a guide and once someone is stuck can use it and know what to do. We recommend training for all birth attendants on this application because this can help to reduce maternal and neonatal mortality."

- Fati Harouna, midwife and Nana Aicha Mansour, Nurse working in rural health centers



7.1.3. SDA Pre-service Pack 3: Blended learning workshop

3 a SDA Pre-service pack 3.a: Blended learning workshop (Normal birth and newborn care)

Details	Aim	Objectives	Topics covered
Duration: 2 hours virtual + 3 days in- person Participants: Students Virtual: SDA orientation In-Person Venue: Lecture Hall + skill/ simulation lab Batch size: 30 Trainer trainee ratio: 1:5 (MF trainers with certified SDA	At the end of the workshop the students will have the SDA installed on their device, familiarize themselves in using the app and gain in depth understanding in normal birth including care of the newborn	- Orient students on the SDA - Encourage students to install the app - Guide students in the usage of the app - Facilitate students to acquire knowledge and skills in managing normal births and care of the newborn - Enable students to become confident users of the SDA	- SDA orientation - Respectful maternity care - Normal labour and birth - Active management of third stage of labour - Newborn care - Discussion and clarification
trainers)			

3.b. SDA Pre-service pack 3.b: Blended learning workshop (Bleeding after birth)

Details	Aim	Objectives	Topics covered
Duration: 2 hours virtual + 3 days in- person Participants:	At the end of the workshop the students will have the SDA installed on their	Orient students on the SDAEncourage students to install the app	- SDA orientation - Respectful maternity care
Students	device, familiarize themselves in using	- Guide students in	- Active management of third stage of
Virtual: SDA orientation	the app and gain in depth understanding in managing	the usage of the app - Facilitate students	labour and initial care of newborn
In-Person Venue: Lecture Hall + skill/ simulation lab	bleeding after birth.	in acquiring knowledge and skills in managing	- Post partum haemorrhage
Batch size: 30		bleeding after birth - Enable students to	- Manual removal of placenta
Trainer trainee ratio: 1:5 (MF trainers with certified SDA		become confident users of the SDA	- Discussion and clarification
trainers)			

2

Safe Delivery In-service training package

Managing normal pregnancy and birth, identification of deviations from normal, initial management and stabilization of the woman and her newborn with complications, and appropriate referral to higher centres for specialized care are the portfolio of midwives and health care professionals. MNH care is provided based on the evidence and relevant protocols that are available. As new research data come in, the guidelines on evidence based best practices are meticulously updated. But many-a-time this update does not reach the health care professional in the field. It is imperative that the midwives and health care professionals are constantly updated with the latest evidence-based practice knowledge and skills and are equipped with the tools to manage MNH emergencies. The SDA is used as a digital solution to update the knowledge and skills of the practicing midwives and other related health care professionals as per the latest guidelines. It serves as a ready reckoner for the midwives in the field to guide them in critical thinking and decision making. In remote settings, when professional help and guidance is not available, the SDA guides them to undertake the necessary action to safeguard the life of the woman and her baby.

For the app to be a useful tool in the hands of the midwives and health care professionals, it is essential that they are oriented on how to use it and guided to be familiar with it. Moreover, for periodic updating of the knowledge and skills, specific trainings are offered integrating the app. The details of the three different training packages offered by MF are given below.

7.2.1. SDA In-service Pack 1: Orientation/Sampler

Details	Aim	Objectives	Topics covered
Participants: Midwives / health care professionals Venue: Virtual / Lecture Hall Batch size: 50 No of Trainers: 2	At the end of the orientation the Midwives/ health care professionals will have the SDA installed on their device and will familiarize themselves in using the app.	- Orient Midwives/ health care professionals on the SDA - Encourage participants to install the app - Elaborate on the features of the app - Guide them in the usage of the app - Motivate self- directed learning	 SDA orientation Introduction to labour and birth module Discussion and clarification

7.2.2. SDA In-service Pack 2: SDA Deepdive

Details	Aim	Objectives	Topics covered
Duration: 1 day ≈ 6 hours Participant: Midwives/health care professionals Venue: Virtual/ Lecture Hall Batch size: 30 to 50 No of trainers: 2/3	At the end of the workshop the Midwives/ health care professionals will have the SDA installed on their device and will familiarize themselves in using the app.	- Orient Midwives/ health care professionals on the SDA - Encourage participants to install the app - Guide them in the usage of the app - Motivate self- directed learning - Facilitate participants to acquire knowledge in managing normal birth - Enable them to become confident users of the SDA	- SDA orientation - Respectful maternity care - Normal Labour and birth module - first and second stage of labour - Discussion and clarification



"I found SDA very useful; it helped me to improve my competency to manage obstetrical complications and I urge my colleague midwives to use it to enhance adequate provision of care to women and newborns. I also recommend this application to student midwives to increase their chance for success in examinations. We are advocating for integration of SDA in midwifery curriculum and we have already started to train our finalist student midwives on SDA to strengthen their competency"

- Nafissa, Midwife and lecturer at National School of Public Health, Niger.

7.2.3. SDA In-service Pack 3: Blended learning workshop
3.a. SDA In-service pack 3.a: Blended learning workshop
(Normal birth and newborn care)

Details	Aim	Objectives	Topics covered
Duration: 2 hours virtual + 3 days in- person Participants: Midwives/health care professionals Venue: Lecture Hall + skill/simulation lab Batch size: 30 Trainer trainee ratio: 1:5 (MF trainers with certified SDA trainers)	At the end of the workshop the participants will have the SDA installed on their device, familiarize themselves in using the app and gain in depth understanding in normal births including care of the newborn	- Orient midwives/ health care professionals on the SDA - Guide participants in the installation and usage of the app - Demonstrate knowledge and skills in managing normal births and care of the newborn - Enable participants to become confident users of the SDA	 SDA orientation Respectful maternity care Normal labour and birth Active management of third stage of labour Newborn care Discussion and clarification

3.b. SDA In-service pack 3.b: Blended learning workshop (Bleeding after birth)

Details	Aim	Objectives	Topics covered
Duration: 2 hours virtual + 3 days in- person Participants: Midwives/healthcare professionals Pre-requisite: Virtual SDA orientation Venue: Lecture Hall + skill/simulation lab Batch size: 30 Trainer trainee ratio - 1:5 (MF trainers with certified SDA trainers)	At the end of the workshop the participants will have the SDA installed on their device, familiarize themselves in using the app and gain in depth understanding in managing bleeding after birth.	- Orient midwives/ health care professionals on the SDA - Guide participants in the installation and usage of the app - Demonstrate knowledge and skills in managing bleeding after birth. - Enable participants to become confident users of the SDA.	- SDA orientation - Respectful maternity care - Active management of third stage of labour and initial care of newborn - Post partum haemorrhage - Manual removal of placenta - Discussion and clarification

3

Safe Delivery Training of Trainers

The training of trainers' programme is organized to create a pool of trainers who can cascade the SDA trainings. It is designed to prepare individuals to take on the role as trainers integrating the SDA and can be used in both the pre-service and in-service arena. Training midwifery educators as trainers equips them with the necessary skill to guide their students in effective usage of the SDA in their respective institutions. Training local health care professionals to become trainers creates an opportunity to reach a greater number of health care professionals, who will benefit from the SDA. This also allows the training to be done in the national language, which is more feasible. TOT programs are facilitated by the Master trainers at Maternity foundation.

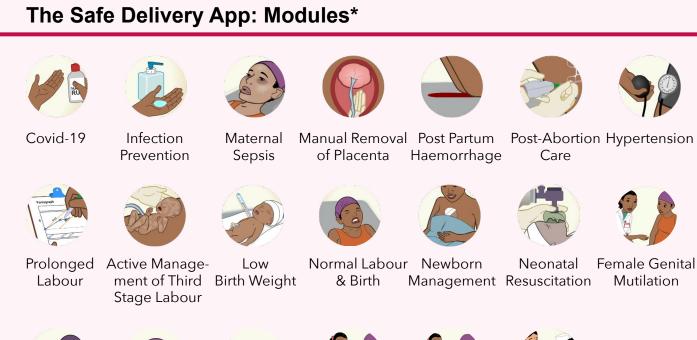
The target participants for the TOT are midwifery leaders, educators, and selected local facilitators. The eligible participants should be oriented to the SDA and willing to be safe delivery champions. A midwife or health care professional can be a trainer in specific modules on completion of the TOT in those modules and attaining expert level in the mylearning platform for those specific modules. To be a certified SDA trainer, the participant should complete the TOT programme and acquire the safe delivery champion certificate by completing the post assessment in the SDA. The TOT is preferred to be in English but can also be done in other languages with the help of a translator. The training material and PowerPoint slides will be shared with the trainers to be used in further trainings, with caution that the content should not be changed or edited. Training can be customised as per the need in the country, and different sets of modules can be covered based on the requirement of the trainers and the health care professionals. The outline of two sample TOT packages, one in online mode and the other in the offline mode are presented here.

7.3.1. SDA TOT Pack 1: Online

Details	Aim	Objectives	Topics covered
Duration: 3 days (3 hrs / day ≈ 9 hours) Participants: Midwifery leaders, educators and local facilitators Venue: Virtual Zoom, preferable for participants to be together at the same venue. Batch size: 30 No of trainers: 2 If possible 1 onsite facilitator	At the end of the workshop the participants will acquire the knowledge and attitude to train health care professionals in the SDA	 Educate the trainers on adult learning principles Demonstrate the different facilitation/ training methods Discuss the resources available for training health care professionals Enable participants to become safe delivery champions and confident trainers of the SDA 	 Adult learning principles and learning theories Different training methodologies Orientation to training normal labour and birth module Discussion and clarification Teach back session if onsite trainer is available

7.3.2. SDA TOT Pack 2 - Onsite

Details	Aim	Objectives	Topics covered
Duration - 3 days (≈ 6hrs / day) Participants - midwifery leaders, educators and local facilitators. Venue - Lecture Hall + skill/simulation lab Batch size - 30 (maximum) Trainer trainee ratio - 1: 5	At the end of the workshop the participants will acquire the knowledge, attitude, and skill to train health care professionals in the SDA	Educate the trainers on adult learning principles Demonstrate the different facilitation/ training methods Discuss the resources available for training health care professionals Provide feedback and support through teach back sessions. Enable participants to become safe delivery champions and confident trainers of the SDA.	Adult learning principles and learning theories Different training methodologies Normal labour and birth module or any selected module from the SDA Teach back sessions with constructive feedback Discussion and clarification





Safe Abortion



Perinatal Mental Health C



l Modern Contraception



Antenatal Care



Postnatal Care

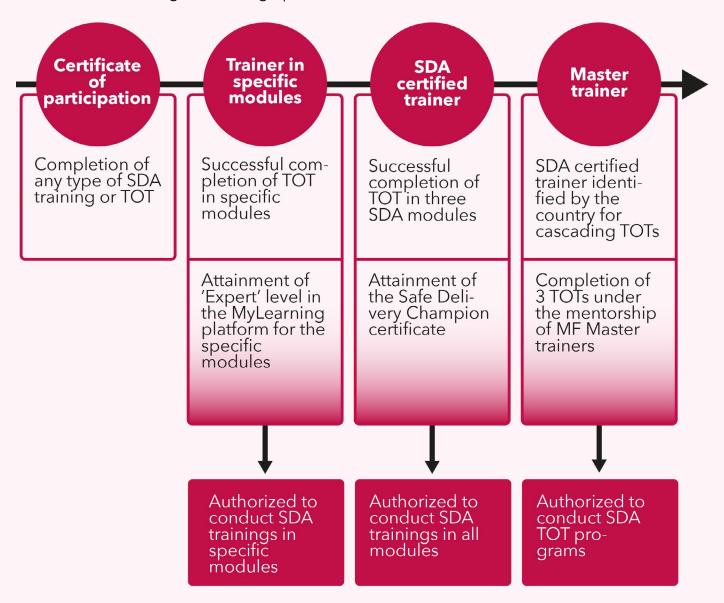


al Gestational Diabetes

^{*}Some modules are only available in limited language and country versions

8. Certificates and certification

Certificates are issued to the participants on successful completion of the trainings. Based on the type of training, and the requirements to be completed at each level, different certificates are awarded. Details are given in the graphic below.



In collaboration with the nursing and midwifery regulatory body in the country, CPD (continuous professional development) points are offered to the participants for various trainings. This adds value and enables them to enthusiastically continue their learning journey.

9. Budget

Maternity Foundation is a developmental NGO and works in countries through partner support and engagements. The budget for the different training packages is planned based on the type of training, number of trainings, total number of participants to be trained, travel and logistical arrangements and the number of trainers required for the training. It is done on a case-to-case basis as per the need of the country and the resources available. The program team can be contacted to get a detailed budget for the trainings.

10. Success stories



Sub-Saharan Africa

In Sub-Saharan Africa, in collaboration with professional associations, Nursing and Midwifery Councils, Ministry of health and partners, more than 50,000 health professionals are reached. In some countries the Safe Delivery Champion certificate is accredited by the relevant institutions such as Nursing and Midwifery councils to provide midwives with continuous professional development Points that supports health professionals in their re-licensure efforts. Partners such as UNFPA, UNICEF, Novo Nordisk Foundation, Red cross etc. supported the facilitated use of the app by integrating in national programmes both pre-service and In-service. Various training approaches were used such as blended, low dose high frequency, clinical mentoring, coaching, self-directed learning etc. The figures depict the users in Sub Saharan Africa and SDA integrated clinical skill training for master trainers from the Democratic Republic of the Congo.

In Niger, through the support of the Danish Red Cross, a one-year project is underway that ensures the facilitated introduction and scale up of the SDA in the in-service programme. As part of the project, an onsite SDA integrated clinical TOT and Basic training was provided by Master trainers who received a TOT by Maternity Foundation. The trainings targeted knowledge and skill improvement on Active Management of Third Stage of Labour, management of post-partum haemorrhage, and Essential Newborn Care.

The Federal democratic Republic of Ethiopia

In Ethiopia, more than 15,000 health care professionals have been reached to download and use the App through different trainings and workshops. In collaboration with the Ministry of Health the SDA is now part of National BEmONC and Catchment Based Mentorship training guidelines and manuals. Beside trainings, SDA is used in pre-service Midwifery education of higher institutions/ selected Universities to improve the knowledge and skill of graduating class students.

During an emergency the SDA is proven to be a solution in reaching health care professionals remotely. The Essential Newborn Care now project implemented during the time of COVID- 19 in collaboration with the American Academy of Paediatrics (AAP) and Laerdal Global Health (LGH), is one witness. MF implemented a pilot-study to explore the feasibility and effectiveness of 4 remote training approaches of the ENC Now. The training focused on essential newborn care and management of birth asphyxia including bag and mask ventilation exercises. The training was delivered to 59 participants across 18 facilities through blended learning approach with online lecture and on-site exercises and practice. Observed increases in skill competency were confirmed by qualitative feedback. The trainings were well-received by participants and facility managers who expressed, that the training had helped improve the knowledge and skills in essential newborn care and neonatal resuscitation by filling the existing gaps.

The Republic of Ghana

Maternity Foundation introduced the app in 2017 with support of the Ghana Registered Midwives Association and UNFPA. Contextualized app in the Ghanian guideline is launched. There are more than 4000 users of the SDA in Ghana. SDA introductory training was provided for nearly 700 health professionals in many regions of the country.

The Republic of Tanzania

Country engagement in Tanzania dates to 2017, in which we published two language versions of the app and provided introductory training for health professionals. To date, there are more than 6500 users of the app in Tanzania. In 2023, the Safe delivery Champions certificate was accredited by the Tanzania Nursing and Midwifery Council with 25 CPD points, which supports health professionals collect points for their professional re-licensure.









<u>Asia</u> India

In 2022, more than 1000 student nurse-midwives in their final year of their education attended training provided by Maternity Foundation at nine nursing institutions. These 2-3-hour trainings were provided both in-person and online. The SDA was introduced as a clinical job aid and was demonstrated how it could be used to support their clinical education and curriculum. Participants were invited to join online community of practice on WhatsApp and continue building knowledge on 'MyLearning' Platform.

Use of the SDA to support their education and becoming a Safe Delivery Champion are mandatory requirements for student nurse-midwives in India to achieve before they appear for their final course examinations. All in-service nurse-midwives are given 15 continuing nursing hours (CNE) that contributes towards renewal of license every 5 years.

In the in-service arena, MF conducted various SDA integrated skills-based training for different cadres of health care professionals in the country. Few examples are-MF developed interactive SDA integrated learning sessions as per the Manyata clinical standards and conducted 3-day virtual knowledge-based clinical sessions (Infection prevention, Normal Labour and birth, Bleeding after birth and Care of newborn and Newborn Resuscitation etc) to the healthcare providers of the centres for skill enhancements (CSEs). SDA integrated 5-day in person skill-based training of trainer's package for health care professionals (master trainers) was developed and implemented. In India hub we also conduct 3-day technical update cum skill standardization training for health care professionals. Till date the country has oriented +32,000 health care professionals, +4500 student midwives on SDA and skill-based training have been provided to +70 health care professionals

Myanmar

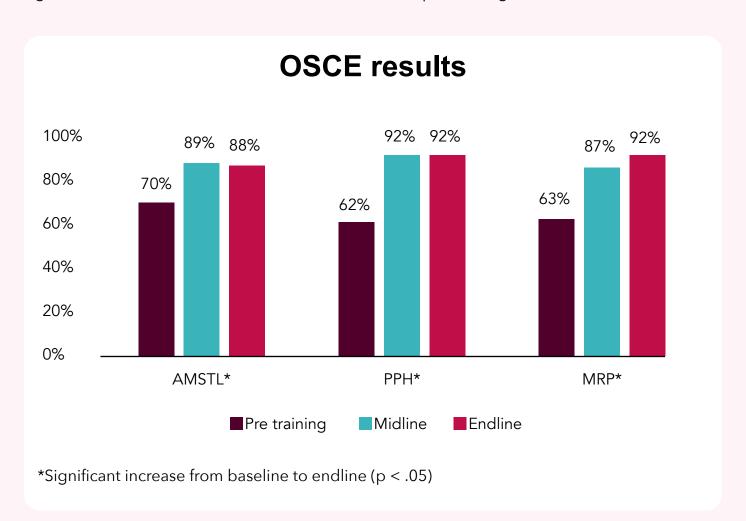
A large-scale remote training for healthcare professionals was done on Post-Abortion Care and Postpartum Haemorrhage. It was a one-off short online clinical training session conducted via Zoom. 200 health care professionals remotely participated including doctors, nurses and midwives participated. Training focused on how to use the SDA and clinical knowledge and skills related to post-abortion care and postpartum haemorrhage.





Bangladesh

Maternity Foundation and Hope` Foundation worked together between September 2021 and June 2022 on a project: Safer Deliveries for women and newborns, with funding from the Novo Nordisk Foundation. The purpose was to strengthen capacities of midwifes with the support of mHealth solutions, using the existing Bangla version of the SDA. Clinical training on Active Management of Third Stage Labour (AMTSL), Post-Partum Haemorrhage (PPH), and Manual Removal of Placenta (MRP) was provided to 36 midwives, and five supervisor midwives supported the training, data collection, and mentored the midwives. Initial online 'Training-of Trainers' for local facilitators, who then supported remote delivery of six half-day training sessions over 3-month period (low-dose-high-frequency approach). OSCEs were conducted with the aim to test clinical performance and competence for a given clinical scenario. A statistically significant difference was observed for all OSCEs from pre-training to endline.



11. Testemonies

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Unlike other trainings, it is not given to the health centre or department heads but to the professional who is working in MCH unit, this makes the training unique"

- Midwife, Ethiopia

"

If the training was given without practical sessions, we might not know what we lack and the training do not make a difference so the practical sessions helped us to identify and improve our slip-ups."

- Midwife, Ethiopia

"

When faced with an asphyxiated newborn, there is fear and difficult to resuscitate before.... now the training helped us to manage complication"

- Midwife, Ethiopia

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After the training referral from the health centres decreased... they used to send asphyxia cases without providers now when they sent referral, they follow the procedure they sent with bag and mask."

- Onsite training facilitator, Ethiopia

"

This training updated professionals' skill on newborn resuscitation and skin to skin contact.....there is a visible change after the training."

- Onsite training facilitator, Ethiopia

"

The training has helped me to develop knowledge and skills on how to extract information using the app. And yes, as one of the trainers I will use the app to up skill my colleagues in province".

- Midwife, Papua New Guinea

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The training period was short, but very informative. I could instantly ask questions and get the answers very well, so says I enjoyed the training a lot"

- Midwife - Bangladesh

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"The training was great, because I could learn many new things, and I got refresher training, which was helpful because after getting one training, I went back to work find my gaps. Then I could fill the gaps in the next training."

- Midwife - Bangladesh



