



EVERY WOMAN  
EVERY CHILD

Every Newborn Action Plan Metrics  
Linked with  
Ending Preventable Maternal Mortality

# Data Collector Training Programme Module 3:

## Observation: Labour & Delivery

#EveryNewborn #Endingstillbirths  
#maternalhealth



World Health  
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LONDON  
SCHOOL of  
HYGIENE  
& TROPICAL  
MEDICINE



# Session Planning

- **Purpose:**  
Ensure L&D observers know and understand how to conduct themselves, and their work, in accordance with the project guidelines and training handbook.
- **Target Audience:** Observers & supervisors
- **Length of session:**  
**Presentation: part i (60 mins) + Activity I (45 mins)**  
**Presentation: part ii (75 mins) + Activity J (120 mins)**
- **Type of session:** (classroom / practical)
- **Resources / tools required:**  
Projector, slide deck, training handbook, group exercise sheet, tablets with app installed for at least 50% of participants, L&D section of variable dictionary, marker pens and paper.

# *Aims & Learning Outcomes*

1. To know how to conduct yourself and your work in accordance with the project guidelines and training handbook.
2. To be familiar with the logistics of data collection on the L&D ward
3. To understand current clinical guidelines for key interventions on L&D.
4. To introduce the data collection app and the required data for collection.
5. To revise what to do during a life-threatening event where local staff do not take appropriate action.



A close-up photograph of a woman with her eyes closed, gently holding a newborn baby. The woman is wearing a headscarf with horizontal stripes. The baby is wrapped in a patterned blanket. The entire image is overlaid with a semi-transparent teal color.

# PRESENTATION: PART I

*(60 MINUTES)*

THE LANCET

# *Recap on roles and responsibilities*

- Identify mothers on the L&D ward who have been assigned for observation by Tracking Officer via the app
- Ensure you are well positioned for observation of the relevant parts of the delivery, including observing the birth, and baby once born
- Have a thorough understanding of the L&D ward observation tool and how to enter data on the app, including how to observe and enter data on mother and baby simultaneously, and how to switch between mothers if observing two women at similar time
- Ensure the information on the baby eg resuscitation procedures are observed and the outcome documented in the app.

# Interaction with mothers and health care workers



- Mothers should be aware as little as possible of your presence
- If family members are present they too should not be inconvenienced by your presence
- Do not communicate at any time with the mother or family members



- Health care staff should be able to attend to the delivery exactly as they would if you were not there
- Health care staff should not have to ask you to move or reposition your self- please think of this before they do!
- Do not communicate with the midwife or health care worker attending the mother. The only exception is in the case of a clinical incident, as detailed in another module

# *Logistics of data collection*

## **Golden Rules:**

- Do not talk to or ask questions of the mother/ family members/ health care workers on the KMC ward
- If you did not observe the information then enter “don’t know” in to the app, DO NOT try and collect it from elsewhere (e.g. looking at the notes/register or asking the mother/health care worker)
- If a mother/family member/ health care worker tries to talk to you about anything to do with the study you should reply with “I am sorry I am not able to discuss any further” and refer them to your supervisor for further details

# Logistics of data collection



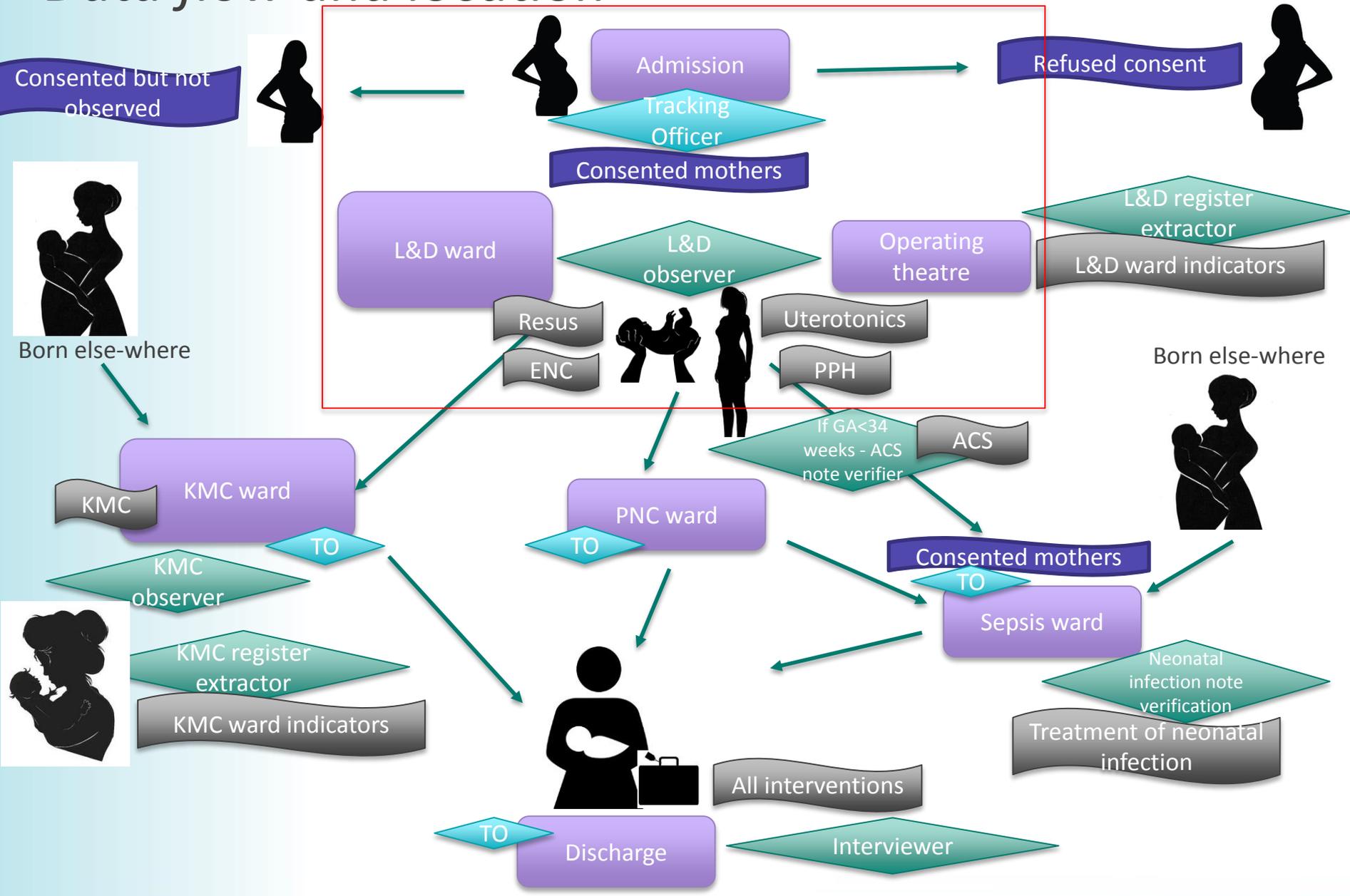
If possible replace  
with photos from  
the study LD  
ward/OT



Space will be limited!

Know the data collection app well so you are aware of what and when you need to observe so you can be well positioned

# Data flow and location



# *Data to be collected*

- You will be collecting data through labour, birth, and the immediate postpartum period
- Observation will commence from admission to labour and delivery ward/operating theatre and conclude when mother and baby are discharged to a different ward
- You do not need to be present the entire first stage. It is good practise to check in on the mother every 15 minutes to ensure you are aware of the stage of progression of the labour and do not miss any periods during which you should be collecting data.
- If you are observing more than one woman at a time it is important that you are aware of the progression of each woman's labour, ensuring that you are present to collect the following data

# *Data to be collected*

Data to be collected on the L&D fall in to five different groups which are reflected in the 5 different tabs on the app.

1. L&D 1<sup>st</sup> & 2<sup>nd</sup> stage
2. Newborn
3. Resuscitation
4. 3<sup>rd</sup> stage & PPH
5. L&D Discharge & Outcome

You may move between tabs as required.



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# Clinical Update for Third Stage of Labour & Neonatal Resuscitation. Labour and Delivery Observations

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# *Aims & Structure of this session*

**To revise current clinical practise for key labour and delivery interventions:**

## *1. Third stage of labour*

- *Routine administration of uterotonic*
- *Management of postpartum haemorrhage*
- *Manual Removal of Placenta (to treat PPH)*

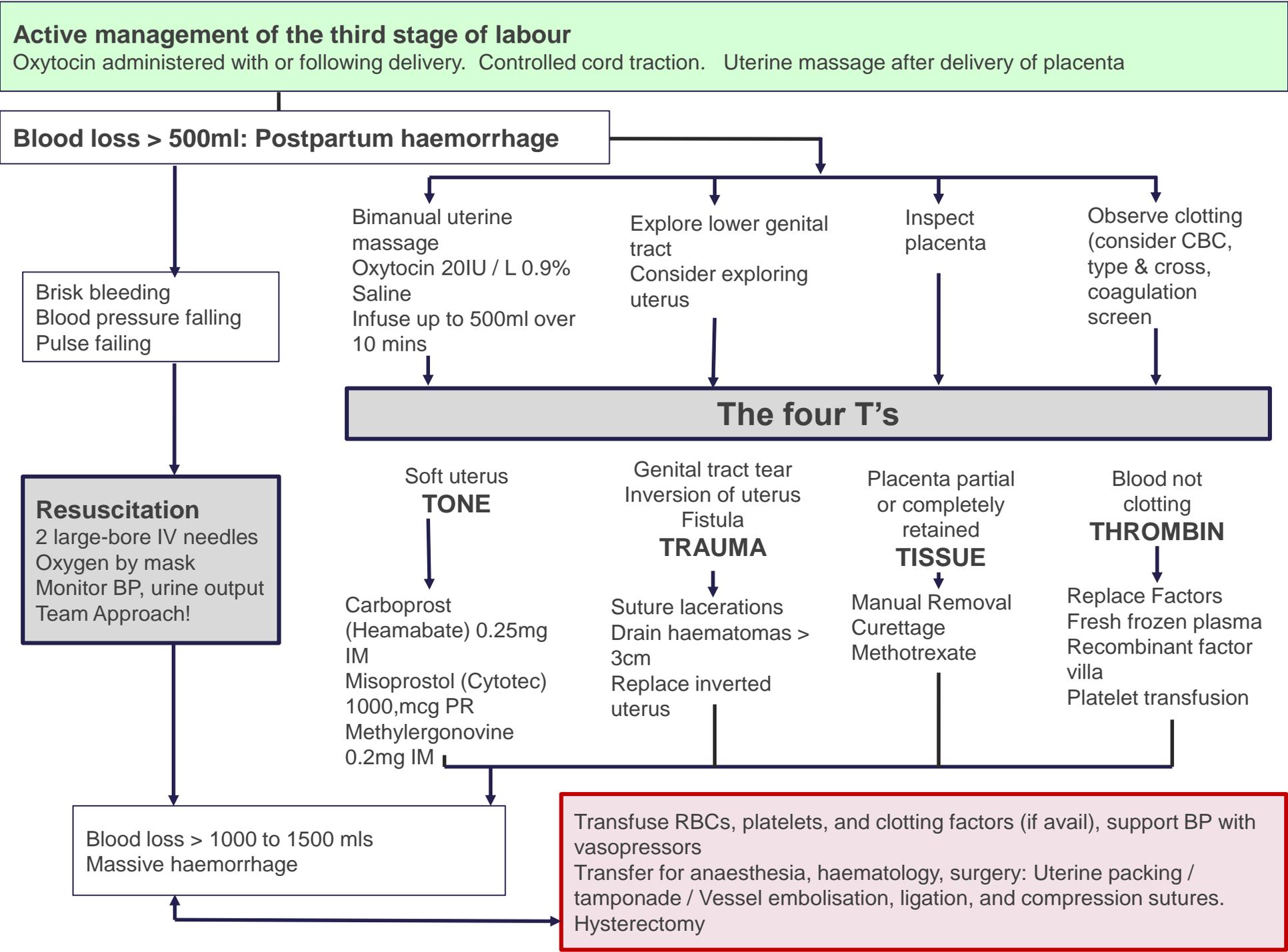
## *2. Neonatal Resuscitation*

- *Helping Babies Breathe*
- *Correct size and position of mask*
- *Correct Position of newborn head*





# 1. THIRD STAGE OF LABOUR

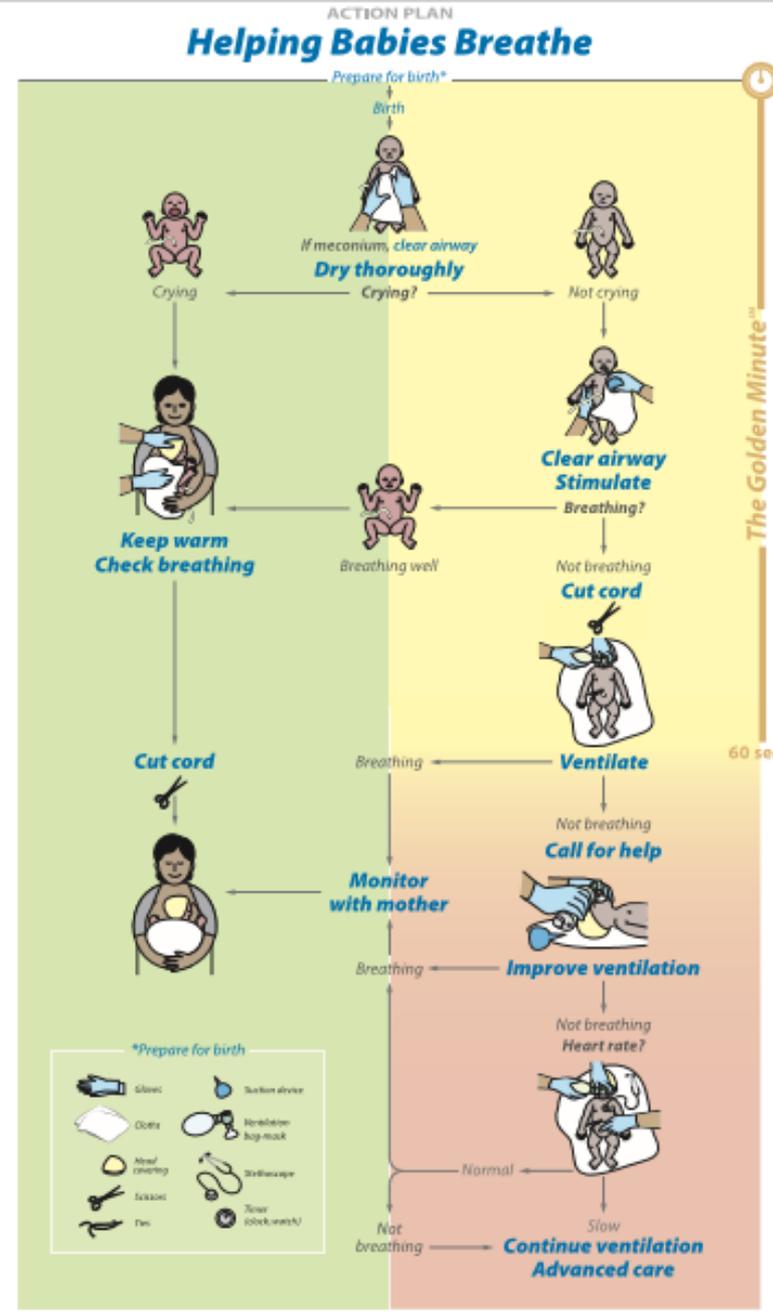
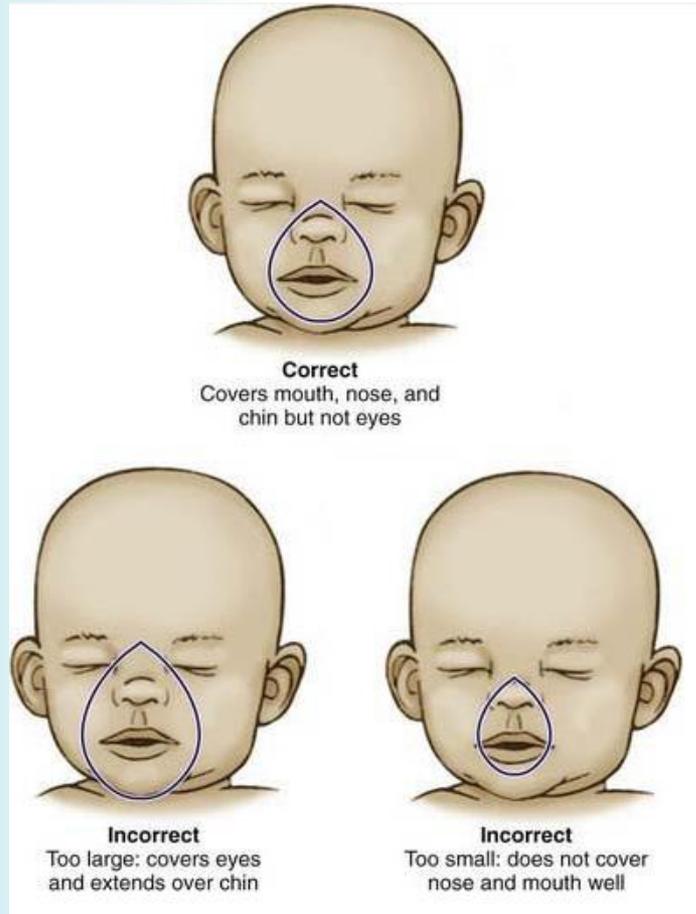




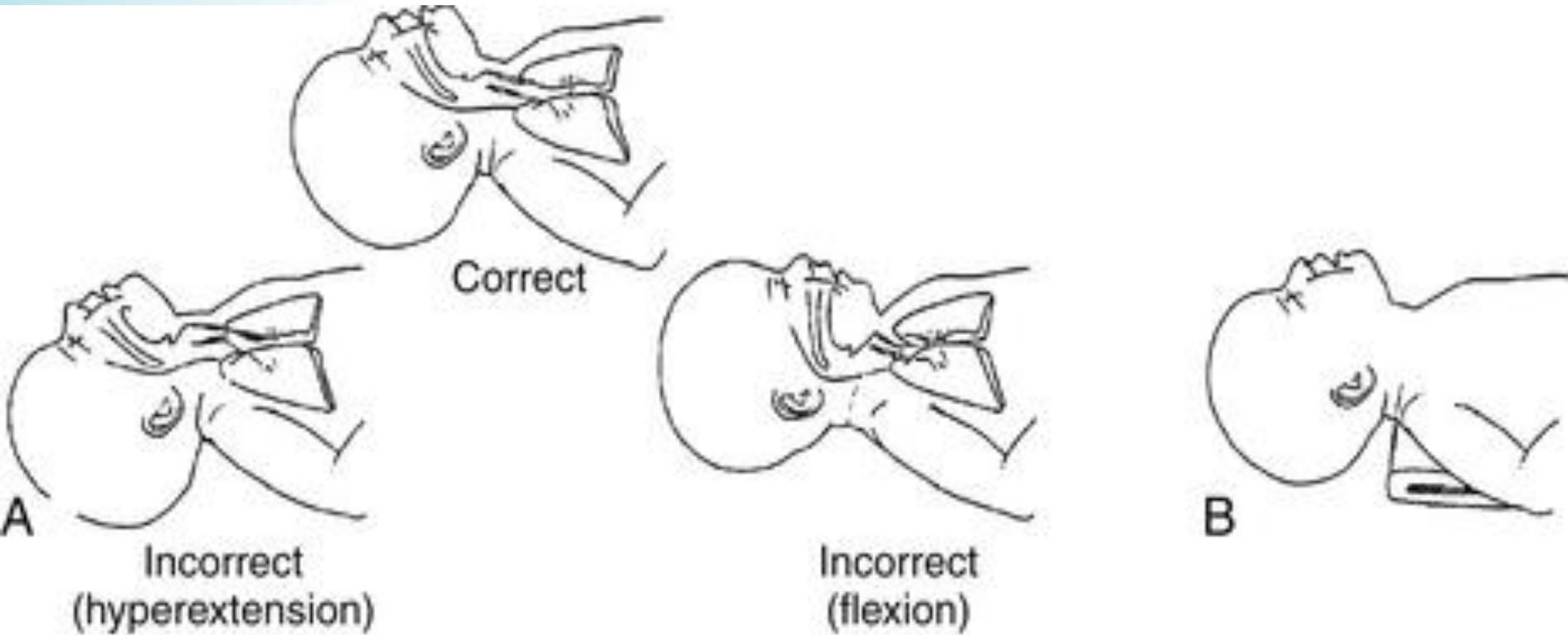
## 2. NEONATAL RESUSCITATION

# Neonatal Resuscitation

- As per observation checklist.
- Correct size and mask position:**



# Correct Positioning of the Head



# ***ACTIVITY I: Review of observation checklist and discussion on key clinical issues***

**Handout:** Variable Dictionary (in App or print out)

**Objective:** To allow L&D observers to review the variable dictionary and identify and discuss any clinical procedures that are different from their current routine practise.

**Time:** 45 minutes

## **Instructions:**

Please split into groups of 3-4 people and review the Variable Dictionary. Please identify and discuss:

Any areas of practise that differ from your own

Any questions

Any clinical content you are unsure of

Possible solutions for any issues you think may arise

A close-up photograph of a woman wearing a light-colored headscarf with dark stripes, gently holding a newborn baby. The woman's eyes are closed, and she has a serene expression. The baby is wrapped in a patterned blanket. The entire image is overlaid with a semi-transparent teal color.

# PRESENTATION: PART II

*(75 MINUTES)*

THE LANCET

20

# *Content and flow of L&D app*

## **Identifying the woman for observation**

To identify the mother and make sure you select the correct mother from the list for observation you should match the mother and the entry on the app by the following information:

- Mother's name/s
- Mothers address
- Mother's date of birth (age)

Click on the study ID of the woman from the list of women you are allocated for observation.

# Entering Data

Registration (Total: 2) REFRESH ASSIGN

## Labour and Delivery

Study Id/Name/Phone/Hospital ID + SEARCH

Study ID <b>103000002</b>	<b>holly</b> Age: 11 years	L & D OB MRS DE ACS
Hospital ID <b>999</b>	KUSHTIA, bubugy, ggg, gggggg	
Study ID <b>103000001</b>	<b>yygggyyg</b> Age: 24 years	L & D OB MRS DE
Hospital ID <b>112</b>	Leve1, hhjj, ghhjj, yyhh	

# Entering Data

Observation **OB** **MRS** **DE**

## Labour and Delivery

**PATIENT** 

Study ID **yygggyyg**  
**103000001** Age: 24 years

Hospital ID **112**  
Leve1, hhjj, ghhjj, yyhh

**PAUSE**

**STOP**

<b>L&amp;D 1ST &amp; 2ND STAGE</b>	<b>NEWBORN</b>	<b>RESUS</b>	<b>3RD STAGE &amp; PPH</b>	<b>L &amp; D DISCHARGE &amp; OUTCOME</b>
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Don't Know  Observed-Done  Observed-Not Done

# Entering Data

L&D 1ST & 2ND STAGE	NEWBORN	RESUS	3RD STAGE & PPH	L & D DISCHARGE & OUTCOME
<input type="checkbox"/> Don't Know <input type="checkbox"/> Observed-Done <input type="checkbox"/> Observed-Not Done				
*Observation Start	Observation Place	Observation Place (Other)	Oxytocin Given Before Delivery	
Fetal HS Check 1	Fetal HS Check 2	Fetal HS Check 3	Fetal HS Check 4	
Partograph 1	Partograph 2	Partograph 3	Partograph 4	
*2nd Stage Start	Liquor Check	Liquor Type	Liquor Smell Type	
Mode of Delivery (started)		Mode of Delivery (final)		
*Decision CS	*Consent CS	*1st Incision	Indication- Foetal Distress	
Indication- Failure Lab Prog	Indication- APH	Indication- Hypertension	Indication- Other (Specify)	
Number of Birth				

# Entering Data

L&D 1ST & 2ND STAGE	NEWBORN	RESUS	3RD STAGE & PPH	L & D DISCHARGE & OUTCOME
<input type="checkbox"/> Don't Know <input checked="" type="checkbox"/> Observed-Done <input type="checkbox"/> Observed-Not Done				
Child Serial <input checked="" type="radio"/> One				
*Baby Delivered	Place of Birth <input type="text"/>	Mode of Birth <input type="text"/>	Outcome at Birth <input type="text"/>	
Sex <input type="text"/>	*Baby Cry	*Baby Breath	Baby HR Check	
Cord Clump or Tie	*Cord Cut	*Cord Apply	Cord Apply Type <input type="text"/>	
*Baby Dry	*Baby Skin to Skin	*Baby Wrap	Baby Wrap Type <input type="text"/>	
*Breast Feeding	Birthweight Measured	Baby Weighing Scale <input type="text"/>	Weight in Gram _____ 	

# Entering Data

L&D 1ST & 2ND STAGE	NEWBORN	RESUS	3RD STAGE & PPH	L & D DISCHARGE & OUTCOME
<input type="checkbox"/> Don't Know <input checked="" type="checkbox"/> Observed-Done <input type="checkbox"/> Observed-Not Done				
Child Serial <input checked="" type="radio"/> One				
*Resus Start	Resus Table Shift	Provider Call for Help		
Stimulation Done		Stimulation Outcome <input type="text"/>		
MTN Check		MTN Check Outcome <input type="text"/>		
Suction Done		Suction Type <input type="text"/>	Suction Outcome <input type="text"/>	
Bag & Mask Initiated	Mask Position <input type="text"/>	Mask Size <input type="text"/>	Head Position <input type="text"/>	
*Bag Mask Inflation Start (R1)	Bag Mask Inflation End (R1)	Breaths # (R1) <input type="text"/>	Breaths Per Minute (R1) <input type="text"/>	
Check Chest Movement	Head Reposition	Check Heart Beat	Bag Mask Outcome <input type="text"/>	
Oxygen Given	Endotracheal Intubation	Chest Compression	Additional Resus Other <input type="text"/>	
Drug 1	Type 1 <input type="text"/>	Drug 2	Type 2 <input type="text"/>	
*Resus Stop	Number Involved <input type="text"/>	Counsel Mother/Family	Resus Outcome Final <input type="text"/>	

# Entering Data

L&D 1ST & 2ND STAGE	NEWBORN	RESUS	3RD STAGE & PPH	L & D DISCHARGE & OUTCOME
<input type="checkbox"/> Don't Know <input type="checkbox"/> Observed-Done <input type="checkbox"/> Observed-Not Done				
*Uterotonic Given After Delivery		Type	Route	
*Placenta Delivered	Placenta Checked	Bleeding after Delivery	Provider Call for Help	
Counsel Mother	*Uterotonic Given for PPH	Uterotonic Type	Uterotonic Route	
Check for Tears	Catheter Established Before PPH	Catheter Established After PPH	Urine Output Monitor	
IV Channel Established Before PPH	IV Channel Established After PPH	Vital Sign Monitor		
Blood Grouping and Cross Matching Already Done	Blood Sent for Grouping and Cross Matching	*Blood Transfusion Requested	*Blood Transfusion Started	
Bimanual Compression	Antibiotic Given	Antibiotic Type	Antibiotic Route	
Analgesia Given		Analgesia Type	Analgesia Route	
Manual Removal of Placenta (MRP)	Hand Washing for MRP	Sterile Gloves for MRP	Balloon Tamponade	
NASG	PPH Management Stop	Number Involved	PPH Management Outcome	

# Entering Data

L&D 1ST & 2ND STAGE	NEWBORN	RESUS	3RD STAGE & PPH	L & D DISCHARGE & OUTCOME
1. Mothers condition at discharge		<input type="radio"/> Alive <input type="radio"/> Dead <input type="radio"/> Mother not discharged		
<b>Final status of this observation</b>				
6. What is the status of the observation?		<input type="radio"/> Complete <input type="radio"/> Partially incomplete <input type="radio"/> Totally incomplete		
8. Do you want to report any incident?		<input type="radio"/> Yes <input type="radio"/> No		
<b>SAVE -&gt; CONTINUE</b>				

# Content and Flow of the Checklist

## Final status of this observation

11. What is the status of the observation?
- Complete
- Partially incomplete
- Totally incomplete

12. Why partially incomplete or totally incomplete?
- Provider related
- Patient related
- Observer related
- Tab or App related

Please mention

baby seriously ill

13. Do you want to report any incident?
- Yes  No

If yes, then what is the incident?

malpractice by HCW

14. Write down the serial number of the incident form.

678

SAVE -> CONTINUE

# *Content and flow of L&D app*

## **Observing simultaneously occurring events**

- For example a mother experiencing a PPH while her baby is being resuscitated
- This will occur rarely
- When it does occur:
  1. Alert your supervisor to the situation and ask them to help you with the observation
  2. If the supervisor is not available for the observation they will ask the tracking officer to assign another observer to help you
  3. You and the second observer should then coordinate between you to ensure that as much of the required observation is carried out
- If you do miss some of the observation you can enter this information the 5<sup>th</sup> tab as well as giving some detail on why it occurred.

# Content and Flow of the Checklist

← Observation **OB** **MRS** **DE**

Labour and Delivery

Study ID **yuuhhg**  
**103000003** Age: 26 years

Hospital ID KUSHTIA, gggg, fgg, gggg  
**566**

**PATIENT** 

PAUSE

STOP

# ***Summary:***

## ***Life-Threatening Event where no appropriate action is being taken***

- **When should I intervene?**

During any life threatening scenario where local staff are not taking the appropriate action, or when instructed by a clinical alert.

- **What should I do?**

You should follow the procedure algorithm for these events, instructions provided by a clinical alert will direct you to the correct part of the algorithm.

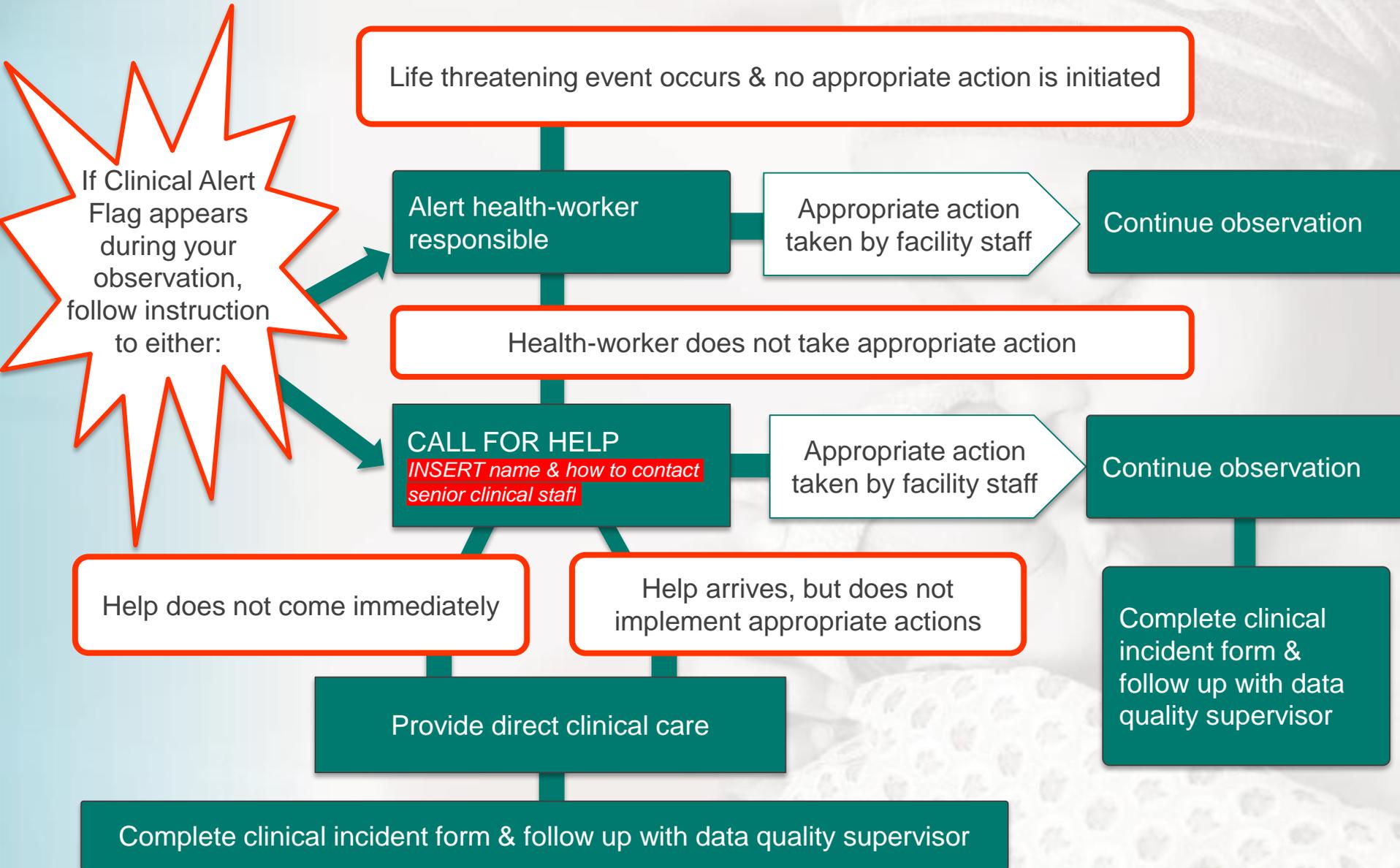
- **What is a clinical incident form?**

This is a mandatory form that should be completed with support from your supervisor and in all cases indicated by the procedure algorithm.

- **What next?**

Your supervisor will contact the named responsible from hospital management team and ensure they have a copy of the clinical incident form. This form will also be used as part of incident review management at facility, country and international level.

# Procedure



# *Activity J: Practise with simulation/video*

**Handout:** Tablets with the L&D checklist open

**Objective:** To give trainees the opportunity to practice completing the L&D checklist on the tablet using observation of either a simulation or video of a birth.

**Time:** 120 minutes

**Trainee Materials:** Stop watch and tablet with the L&D checklist open

## **Instructions:**

Using the L&D checklist on the tablet enter the relevant data from the video/simulation of a birth

After a group discussion shall be help on:

- What was the experience of observing labour and delivery?
- What was the experience of using the tablet to collect data on labour and delivery?
- What was difficult?
- What was easy?
- What would you do differently next time?

# DISCUSSION

