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FIRST TRAINING COURSE ON OBSTETRIC AND PERINATAL COMPLICATIONS

MOTHERCARE/COCHABAMBA REGIONAL SECRETARY OF HEALTH

SUPERVISORY REPORT

PRESENTED BY:

CIENTIFICA CONSULTORA SRL

IN CONSIDERATION OF

MOTHERCARE

LA PAZ - BOLIVIA

1997

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FIRST TRAINING COURSE ON OBSTETRIC AND PERINATAL COMPLICATIONS

*MOTHERCARE/COCHABAMBA REGIONAL HEALTH OFFICE*

FINAL REPORT

LIC CARMEN GOMEZ - SUPERVISOR

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INTRODUCTION

MotherCare Bolivia, in agreement with the National Secretary of Health, developed a strategy for contributing to the National Health Plan in the accelerated reduction of maternal and perinatal deaths. Following the conclusions and recommendations of the study of Barriers and Feasibility Mechanisms performed by MotherCare Bolivia in 1996, a joint decision was made regarding the need to train health care personnel from the areas and districts of the Regional Health Secretary of Cochabamba in the handling of obstetric and neonatal complications. Said training had to be based on the standardized norms, procedures and protocols, in addition, the performance of the health care personnel had to be evaluated periodically and learning programs in obstetric and neonatal procedures had to be incorporated in the College of Medicine and in the Nursing and Nursing Assistance Schools, thereby bringing these up to date.

The main objective of this training was to ensure that the trained health care personnel, upon returning to their services, be capable of interrelating with the community in their customary medical practice, be able to define and develop plans, and be equipped to take the appropriate actions to adequately treat or refer high risk patients and save the lives of mothers and children in these stages.

- 1 Training course needs and objectives for health care providers
- 2 The training curriculum was designed taking into account the results from the research on the training needs expressed by the health care personnel and the risk situation of pregnant women and newborns using the characteristic conditions of Level I (health care posts and Health Care Centers) and Level II (District Hospitals) health care posts

The training program seeks to achieve the following objectives

- a Train the personnel in making appropriate decisions to preserve the life of mother and child in an obstetric or perinatal emergency and
- b Improve the quality of services provided by physicians, nurses

and nursing assistants in the areas of interpersonal communication and counseling and competence in terms of the diagnosis, handling, treatment and referral of obstetric and neonatal emergencies

The training is directed to health care personnel in the three aforementioned professions, at level I (health care posts and Health Care Centers) and level II (District Hospitals) from five provinces in the Department of Cochabamba Quillacollo, Sacaba, Capinota, Independencia and Arque

## 2 Course plan, programs and schedules

The course was given for a period of four weeks, from Monday, February 17, 1997 through Friday, March 14, 1997

It had two main axes

- the theory discussion sessions which took place during the first week from 8 00 a m to 12 00 noon and from 12 00 noon to 6 00 p m , for a total of 8 [sic] hours daily, and continued for three more weeks from 2 00 p m to 6 00 p m , that is a total of 4 hours daily
- the practice sessions which were held in the GERMAN URQUIDI Maternal-Infant Hospital installations both during the morning from 8 00 a m to 12 00 noon, as well as during night shifts from 8 00 p m to 8 00 a m , subject to a special program designed to allow all the participants to take part in the morning rotation for 4 services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology

A total of 104 hours of theory sessions was held, including an additional 4 hour workshop on Sexuality and Gender which was held on Saturday, March 1

Each participant also completed a total of 48 practice hours distributed over the various day and night services Each participant's hours of attendance totalled 152

## 3 Physical location

The theory sessions were held in the conference room located in the otorhinolaryngology service ward of the Viedma Hospital

The practice sessions took place at the Germán Urquidí Maternal-Infant Hospital during the morning, from 8 00 a m to 12 00 noon in four services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology The nightly practice activities took place in the same hospital in the emergency services and internment wards from 8 00 p m to 8 00 a m

## 4 Instructors and methodology

The course had 12 instructors trained in the training course for trainers (TOT) The group of trainers in Cochabamba decided to fully participate in each of the four courses to be held In this manner, the complete team would participate in each of the courses with a previously decided and balanced schedule distribution

The trainers used interactive methodology following adult learning principles The trainers used various animation dynamics, group dialogues for the construction of concepts, and reinforcement dynamics such as role-playing They also followed the interactive work suggestions with special emphasis on the exercises proposed for the group work for each topic and pursuant to the problem resolution method

## 5 Participants

During the first week, thirty people attended the course Dr Wilfredo Chiri, of Bolívar, had to stop on the fourth day due to a flood in Bolívar caused by heavy rain Consequently, the course had a total of 29 participants

The group was made up of

- 7 physicians from the provinces
- 8 licensed nurses
- 14 nursing assistants

working in Quillacollo, Sacaba, Capinota, Arque and Independencia, for a total of 20 locations represented in the course

The following represents the origin of these individuals

- 13 work in district hospitals (level II)
- 16 work in health care posts and centers (level I)

The group was punctual and only three people were absent from any of the sessions, two of whom had sufficient justification (pursuant to the daily attendance lists filed with the course documents)

The group had good levels of participation facilitated by the group work and methodology used Notwithstanding, there is a marked tendency toward the majority participation of the physicians in the group work presentations with outstanding exceptions by very few nursing assistants and nurses

## 6 Achievements and results obtained in the course

6.1 Qualitative aspects The program complied in its totality both in the theory as well as in the practice sessions

The trainer team had a first experience which was evaluated and

assimilated

On some occasions, at least two trainers were present in the classroom to support and collaborate in the process

The participant group increasingly developed the formation of work teams made up of members from the three professions

The participants demonstrated a growing interest in the progress of the course and highly valued the practice sessions

## 6 2 Quantitative indicators

The training course has held

- 104 theory hours
- 52 practice hours
- 12 trainers involved

1 course report  
1 day of evaluation

- 10 hours with coordinators and trainers
- 6 hours with the course supervisor

29 trained participants

- 7 physicians
- 8 licensed nurses
- 14 nursing assistants

29 certificates distributed  
20 posts, centers and hospitals represented  
5 participating health care districts

Quillacollo  
Sacaba  
Capinota  
Independencia  
Arque

22,134 potential beneficiaries women and newborns

11,130 direct beneficiaries women and newborns (own estimate based on the number of pregnant women seen in their services every year, as indicated on the record pages)

29 verification lists signed by the practice supervisors, reviewed and returned to the participants

98 pre- and post-test evaluations (49 pre-tests and 49 post-tests)

19 daily evaluations

1 final course evaluation  
13 trainers evaluated by the course participants (including Jaime Tellería of the Sexuality and Gender workshop)

#### Materials submitted to the participants

29 sets of course materials (notebook, pen, eraser and gafete\*)  
29 Module I participant guides  
29 Module II to VI participant guides  
29 verification lists for practice sessions  
29 books on "Standard of Care for the Woman and the Newborn"  
29 pregnancy calculators  
29 metric tapes  
29 pamphlets on "Breastfeeding A Natural Resource"  
29 guides for breastfeeding and MELA  
29 guides for recording MotherCare information  
19 MELA Module 7 texts one per center

The duly signed receipt lists are in the course documents file

#### 7 Work plan

Each participant developed a work plan to be implemented in his or her service. The results of this are in the course documents file, including exercises 32 and 33 as well as a worksheet containing the response to the question "How could I improve my service with what I learned in Module I Interpersonal Communication and Counseling?"

These work plans will be the basis for the follow-up to be conducted in the different work centers

#### 8 Lessons learned in the training experience

The day of evaluation conducted for two days permitted the identification of strengths, problems and proposals to improve the second course

8.1 In relation to the curriculum It is considered that it contains too much information and the suggestion was to adapt the level of information to the group's needs, selecting the relevant aspects

## 8 2 In the theory part

- It was suggested that the partograma\* and HCPN (perinatal clinical history) be included
- Extend the time assigned to the topic on "Normal Delivery "
- Decrease the time assigned to MELA, and instead increase the interpersonal communication and counseling practice sessions on the same topic
- It is considered that the work method favors physicians who participate more in the presentations It is suggested that participation by the nurses and nursing assistants be facilitated
- The evaluation was discussed in full The suggestions indicate that it is necessary to adequately explain to the participants how to fill out the evaluation forms, give clear instructions for each pre- and post-test form, and that each trainer have the daily evaluation available to solve difficulties
- It was also agreed that the pre- and post-test be used not as in the first course, but as a reading guide for homework and for use by the participants Each trainer could request the number of copies needed and verify the results for him/herself These forms would not be sent to the Central Office
- It was agreed that only one pre-test would be used at the beginning of the course and one post-test would be applied at the end of each module or at the end of the course

8 3 In the practice sessions One problem consisted of the assignation of supervisors for specific topics such that if the participant worked on other topics during the practice session, the supervisor did not evaluate these And, in some cases, the practitioner did not rotate the designated person and, consequently, this person too was not evaluated for the specific topic This procedure was changed such that the assignation of a group of verification lists be the responsibility of the team of trainers who are members of each service Given the rotation system, each practitioner necessarily would go through all the services

The hospital system does not always welcome outside people This happened especially during the night shifts It was suggested that an explanatory letter be shown to the resident physician or the person in charge of the shift in order to facilitate the acceptance of the participants

It is important that the participants establish a good relationship with the hospital personnel It was suggested that

at the beginning of each course the participants be given very detailed explanations regarding how to go forward with the practice session and other necessary standards for their proper progress

Due to the difficulty of having practice sessions in all topics, it is suggested that simulated practice sessions be held in the topics which allow it, such as is the case with delivery

It is necessary to monitor attendance at the practice sessions. In the case of morning practice sessions, a list will be available at the hospital office. The participants should sign it upon arrival and departure.

There is an imbalance between the evaluations of the theory and practice sessions. Some proposals were evaluated in order to evaluate the practice sessions without arriving at a definitive agreement.

Clearly, a course strength is that all the participants have the chance to take part in practice sessions.

8.4 In relation to the logistical aspects. The limitations of the assigned room were remarked upon in terms of lighting, ventilation, size and other conditions (it is not a room for the exclusive use of the course). Dr. Juan Carlos Molina indicated that for the next courses we could eventually have a room in the new Departmental Health Office building.

A rear projector was lent by that Office for this course.

Dr. Molina promised to also lend video equipment and a television to be available on a permanent basis. It is indispensable in order to avoid the wastes of time which occurred during the first course when this valuable didactic element was used.

Regarding the materials, it was mentioned that more markers are needed. In reality, these were available, but were of poor quality and did not perform well. Better quality markers are needed.

8.5 In relation to the participants. The group's heterogeneity was emphasized in terms of the difficulties this connotes. There was a fruitful discussion in this regard on the responsibility of the course for strengthening the health care team (physician, nurse, nursing assistant) within the reality of its heterogeneity.

Attendance was outstanding. Two people were absent with adequate justification and only a third was absent minus this formality.

Punctuality was also notable although it was mentioned that the participants on occasion took more time than was allotted for the break. It is suggested that 15 minutes be given and that

standards be established for restarting the class

8 6 In relation to the supervision and coordination A favorable contribution to the evolution of the course was remarked upon

9 Recommendations for future events

Following is a summary of the aspects to be considered for future courses

- 1 It is necessary to present clear, detailed and complete standards to the participants at the beginning of each course
- 2 Explain the objectives of the training course in a very detailed manner emphasizing the strengthening of teamwork in health care and favoring the development of this spirit throughout the course
- 3 A room in better conditions would be desirable
- 4 It is necessary to design a sheet which gathers the practice session work recorded in the verification list and which allows each participant's practice sessions to be systematized
- 5 It is suggested that changing the trainer/topic in each course be avoided because this does not allow the experience acquired by the trainer in the topic to be used nor does it allow the trainer's experience or specialty in a certain area to be used to its fullest
- 6 One of the course's strengths is certainly the combination of theory and practice sessions In the final evaluations, many of the participants from the first course suggested increasing the number of hours assigned to the practice sessions
- 7 It is necessary that the use of methodology with the trainers be reinforced, noting the need to optimize and fully use the various didactic resources with an emphasis on the use of video, in high demand by the participants in the evaluation

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FINAL REPORT ON THE SECOND COURSE ON OBSTETRIC AND PERINATAL  
COMPLICATIONS

COCHABAMBA

PRESENTED BY  
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MOTHERCARE - DEPARTMENTAL HEALTH OFFICE  
SECOND TRAINING COURSE  
COCHABAMBA

FINAL REPORT ON THE SECOND COURSE

1 Training course needs and objectives for health care providers

The training curriculum was designed taking into account the results from the research on the training needs expressed by the health care personnel and the risk situation of pregnant women and newborns using the characteristic conditions of Level I (health care posts and Health Care Centers) and Level II (District Hospitals) health care posts

The training program seeks to achieve the following objectives

- Train the personnel in making appropriate decisions to preserve the life of mother and child in an obstetric or perinatal emergency and
- Improve the quality of services provided by physicians, nurses and nursing assistants in the areas of interpersonal communication and counseling and competence in terms of the diagnosis, handling, treatment and referral of obstetric and neonatal emergencies

The training is directed to health care personnel in the three aforementioned professions, at level I (health care posts and Health Care Centers) and level II (District Hospitals) from five provinces in the Department of Cochabamba Quillacollo, Sacaba, Capinota (including Arque and Bolívar), Independencia and Tapacarí

2 Course plan, programs and schedules

The course was given for a period of four weeks, from Monday, March 31, 1997 through Friday, April 25, 1997

It had two main axes

- the theory discussions which took place during the first week from 8 30 a m to 12 30 p m and from 2 00 p m to 6 00 p m , for a total of 8 hours daily according to the established program
- the practice sessions which were held in the GERMAN URQUIDI Maternal-Infant Hospital during morning sessions from 8 00 a m to 12 00 noon, Monday through Friday, subject to a special program designed to allow all the participants to

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take part in the morning rotation for 4 services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology, as well as 12 hour night shifts (from Monday through Friday, from 8 00 p m to 8 00 a m ) and a weekend day shift (Saturdays and Sundays from 8 00 a m to 8 00 p m )

The theory sessions totaled 104 effective hours, including an additional 4 hour workshop on Sexuality and Gender which was held on April 19

Each participant also completed a total of 68 practice hours distributed over the various day and night services

The hours of attendance totalled 172

### 3 Physical location

During the first three days, the course occupied the otorhinolaryngology service ward of the Viedma Hospital Given the limitations of this ward, as discussed during the evaluation of the first course and by request by Dr Juan Carlos Molina, the course coordinator, a transfer was made to the auditorium at the Departmental Health Office The new location consists of a large new space, equipped for the exclusive use by the course, with a small adjacent storage area for materials and work tools

The practice sessions took place at the Germán Urquidí Maternal-Infant Hospital during the morning, from 8 00 a m to 12 00 noon in four services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology The night and weekend practice activities took place in the same hospital in the emergency services and internment wards

### 4 Instructors and methodology

Again, the course had 12 instructors trained in the training course for trainers There was a more precise application of the methodology and some perfected work group skills The proposal of the various topics from the Interpersonal Communication and Counseling module was strictly followed

The trainers used group dialogues for the construction of concepts and reinforcement dynamics and followed the work suggestions emphasizing group exercises

In the second course, the practice was planned differently both in terms of organization (a set of verification lists was assigned to a specific service and not to just one trainer as was the case in the first course) as well as follow-up, including

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monitoring attendance and recording the total number of cases practiced and evaluated by each participant

This set of measures made it such that the practice sessions were conducted under very favorable conditions for this second group of participants, a total of 720 cases were evaluated with verification lists, averaging 30 cases per participant (the summary of the verification lists is filed with the course documents)

## 5 Participants

A total of 25 people attended the second course and there were no dropouts

The group was made up of

- 7 physicians from the provinces
- 1 licensed nurse
- 17 nursing assistants

working in Quillacollo, Sacaba, Capinota and Bolívar, for a total of 19 locations represented in the course

The following represents the origin of these individuals

- 11 work in district hospitals (level II)
- 14 work in health care posts and centers (level I)

Three people were incorporated into the sessions on the second day of the course. Only one person was absent from two sessions throughout the course, in one case due to illness and in the other because of transportation difficulties due to a civil strike (Friday, April 4)

It should be noted that the participant decided that the course should meet in a normal manner on the day that bridges and other access routes were blocked to prevent normal circulation. All three trainers as well as 24 of the 25 participants made provisions to be at the meeting on time.

The participants made up a very integrated and flexible group according to one trainer's observations. The level of participation was very good and the group of physicians favored greater participation by the nursing assistants.

## 6 Achievements and results obtained in the course

### 6.1 Qualitative aspects

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- The program complied in its totality both in the theory as well as in the practice sessions
- The trainer team and the coordinators implemented the recommendations of the evaluation of the first course and improved the development of the theory sessions and practices with a notable increase in the quality of this second course
- The participants clearly understood the objectives of the course and showed greater willingness to work in teams
- The participants highly valued the contribution by the Interpersonal Communication and Counseling Module, the practice sessions, learning to recognize obstetric and neonatal risks, as well as the problem resolution method and teamwork, in that order
- 100% of the participants expressed that they are trained in the areas of demand, according to their professions

## 6 2 Quantitative indicators

- 1 training course held
- 104 theory hours
- 68 practice hours
- 12 trainers
- 1 course report
- 1 day of evaluation with the coordinators and trainers
- 25 trained participants

7 physicians  
 1 licensed nurse  
 17 nursing assistants

- 25 certificates distributed
- 19 posts, centers and hospitals represented
- 3 participating health care districts

Quillacollo  
 Sacaba  
 Capinota

- 21 proposed work plans
- 25,318 potential beneficiaries women and newborns Of this number, only 6,874 people are new beneficiaries in relation to the first course held
- 11,776 direct beneficiaries women and newborns (own estimate based on the number of pregnant women seen in their services every year, as indicated on the record pages) Of

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- this number, the new beneficiaries in relation to the first course consist of 1,684 people
- 25 verification lists signed by the practice supervisors, reviewed and returned to the participants
  - 720 evaluated practice cases, an average of 30 cases per participant
  - 2 pre- and post-test evaluations (1 pre-test and 1 post-test)
  - 19 daily evaluations
  - 1 final course evaluation
  - 12 trainers evaluated by the course participants
  - Material submitted to the participants

25 sets of course materials (notebook, pen, eraser and gafete\*)  
25 Module I participant guides  
25 Module II to VI participant guides  
25 verification lists for practice sessions  
25 books on "Standard of Care for the Woman and the Newborn"  
25 manuals on technical obstetric and neonatal procedures  
25 pregnancy calculators  
25 metric tapes  
25 pamphlets on "Breastfeeding A Natural Resource"  
25 guides for breastfeeding and MELA  
25 guides for recording MotherCare information

The duly signed receipt lists are in the course documents file

## 7 Work plan

Each participant developed a work plan to be implemented in his or her service. The results of this are in the course documents file. There are 21 work proposals since the people working together created one joint plan of action.

These work plans will be the basis for the follow-up to be conducted in the different work centers.

## 8 Lessons learned in the training experience

Following are the aspects proposed in the evaluation of the first course, with mention of their implementation in the second course with notable contributions to the better achievement of the objectives.

### 8.1 In relation to the excessive broadness of the curriculum

A remarkable effort was observed by the trainers of the adequate implementation of dialogue sessions, with emphasis on group work, with a notable increase in the contents that are better adapted.

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to the needs of the group This is an aspect which requires greater attention

## 8 2 In the theory part

- The partograma\* and HCPN (perinatal clinical history) was included
- The time assigned to Normal Delivery was doubled
- MELA was decreased by an hour and Dr Sejas emphasized practice in interpersonal communication and counseling
- Incentives were provided for the participation by nursing assistants
- More detailed instructions were provided for filling out the evaluation forms for the facilitators and for the pre- and post-test forms
- The pre- and post-test evaluations were used as a reading guide for homework and as a check for reading in the classroom They were useful but some require a review before continuing to use them in the third course

Aspects which are suggested in the evaluation of this course are

- A party from Module I suggested the presence of at least one trainer for more support for the work groups in each session of this module
- The critique formulated by the participant group in the MELA pre- and post-test that it only has three questions, two of which are at issue, was transmitted
- In Module II, the definition of symptom and sign was pointed out as a source of confusion for the answer to question 16 of the test
- In Module III, a mistake was noted on the correction sheet corresponding to question 26 The extension, complexity and lack of practice that could have influenced the module were also discussed It is suggested that the third course keep these difficulties in mind with work alternatives for the subject in question
- The scarce reading and the consequent results in the participants' work were mentioned
- Several alternatives were evaluated to provide an incentive

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for reading and for the proposal of alternative means such as the use of recordings

8 3 In the practice sessions, a group of verification lists was assigned to the trainer team from each service

- Given the rotation system, each participant necessarily went through all the services and the results improved substantially
- Each participant received an explanatory letter for the hospital personnel on duty This greatly facilitated the presence of the participants in the emergency services and the collaboration of the hospital personnel
- At the beginning of the course, very precise instructions and recommendations were given in relation to the general and specific standards for the theory and practice sessions
- Simulated practices have been held in the topic of delivery as well as in the topic of prenatal care and others, due to the unforeseen strike which paralyzed out-patient consulting services from the beginning of the course up to and including the third week
- Daily attendance at the practice sessions has been monitored
- Two measures have been implemented in order to evaluate the practice sessions the creation of a skills baseline and the presentation of a summary of the practice sessions held
- The number of practice hours per person has been increased
- The evaluation allowed the discussion of the need to homogenize the application of the skills baseline

8 4 In relation to the logistical aspects

- There was a room available for use in optimum conditions in the new building of the Departmental Health Office
- There was a VCR and television permanently available in this room and MotherCare sent complementary equipment and materials

8 5 In relation to the participants

- The subject of heterogeneity was posed repeatedly in the first course and was discussed and clarified with the

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participants from the second course upon presenting the objectives of the training

- Attendance was outstanding, only one person was absent due to justified reasons and the group worked even during the day of civil strike in Cochabamba
- Punctuality was acceptable A lapse of 15 minutes without interruption was established, notwithstanding, several trainers restarted the work without a full room

8.6 In relation to the supervision and coordination, a favorable contribution to the evolution of the course was remarked upon

#### 9 Recommendations for future events

Following is a summary of the aspects to be considered for future courses

- 1 Presenting clear, detailed and complete instructions and standards to the participants at the beginning of each course has proven to be very efficient It is recommended that there be a written document to this effect
- 2 Reiterate the objectives of the training course in a very detailed manner reemphasizing the strengthening of teamwork in health care and favoring the development of this spirit throughout the course
- 3 Continue the reinforcement of the use of the methodology with the trainers, emphasizing innovation and the progressive disappearance of traditional expositions
- 4 It is considered very positive that the participants have individual results which constitute a motivation while allowing their personal advancement to be evaluated at the same time

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COURSE ON OBSTETRIC AND NEONATAL COMPLICATIONS  
EVALUATION OF THE SECOND COURSE  
COCHABAMBA

In order to carry out the evaluation of the Second Training Courses in Cochabamba, a meeting was held with the participation of the course trainers, the coordinators, and the supervisor. At this time, a review of the scope of this second experience was carried out, analyzing the achievements and, especially, compliance with the recommendations of the evaluation of the first course. Following are the main comments and recommendations.

2

EVALUATION TOPICS	STRENGTHS	WEAKNESSES	SUGGESTIONS
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<p>STUDENT PERFORMANCE</p>	<p>There was an agile system of information on the students' performance, in terms of both the pre-test and the post-test</p> <p>The trainers had the results of the students' performance in time to make decisions with regard to the content of the modules</p> <p>There were individualized records of the students' performance</p> <p>During the second course, it was observed that there were much more favorable expectations on the part of the participants with regard to the event, in response to better information on the objectives of the training</p>	<p>Some errors in the structure of the questionnaires were identified and need to be corrected</p> <p>Certain delays were reported in the return of information to the trainers since these were not always available</p> <p>The "resolución administrativa declaratoria en comisión" which authorizes the participation of the health care personnel in the course was not respected</p>	<p>The structure of the individual reports on the students' performance should be maintained since these were shown to be of importance in their motivation</p> <p>The supervisor should coordinate with Dr García in order to facilitate the submission of reports to the trainers</p> <p>It should be insisted upon to Dr Molina that the attendance of the students who have been released from their work responsibilities and are receiving the benefits of the "declaratoria en comisión" be guaranteed</p>
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<p>BEHAVIOR OF THE MODULES</p> <p>Module I</p>	<p>The docent guide was retooled and simplified to offer better assistance without generating confusion</p> <p>The printed materials are all available</p>	<p>The corresponding section (fifth) was distributed without the materials and printouts</p>	
<p>MELA Module</p>	<p>The problems identified during the evaluation of the first course were overcome</p>	<p>Problems with the pre- and post-test were detected and need to be corrected</p>	<p>It was suggested that question 12 be eliminated or substituted</p> <p>The other problems should also be clarified</p>
<p>Module II</p>		<p>No problems</p>	

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<p>Module III</p>		<p>The information on student performance indicated scarce use of Module III</p> <p>There are difficulties in the maternity in offering optimum practice conditions for all the students</p>	<p>It is recommended that the model be reviewed in terms of content and the analysis of the evaluation instrument</p> <p>It is recommended that the possibility of diversifying the practice centers (perhaps in the Quillacollo hospital) be analyzed</p>
<p>Module IV, V and VI</p>	<p>No important problems came to light The problems perceived during the first course were resolved</p>		

<p>BASELINE</p>	<p>During the second course, and as recommended by MotherCare/USA , the measurement of the skills during practice performance was introduced This was called the Baseline</p>	<p>Presumably due to communication problems in Cochabamba, the minimum methodological requirements for the adequate application of the baseline were not complied with The nurses who applied it did not do so in the context of practical performance and therefore only the theoretical measurement is available</p>	<p>The minimum conditions needed to achieve the application of the Baseline, pursuant to the purpose for which it was created (as the initial measurement for follow-up in the field), should be clarified</p>
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<p>VERIFICATION LISTS</p>	<p>During the second course, a new organizational modality for the practice sessions was introduced based on "service rotation " As a result, there was an important increase in the number of student practice cases A total of 720 practice cases recorded during the second course was reported</p> <p>The system likewise allowed an increase in the responsibility and participation by the practice session tutors</p> <p>Currently, there is a summary of each student's practice sessions</p>		<p>The modality of the adopted practice should be maintained</p>
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<p>COURSE ACTOR EVALUATION Trainers</p>	<p>The evaluation of the trainers by the students was generally very satisfactory as demonstrated by the reports attached to the corresponding report from the second course. The evaluation reflects the high degree of satisfaction by the health care personnel at being able to count on an event which satisfies their professional background expectations.</p> <p>The trainer team has been able to achieve a better assembly and acquire greater confidence in the handling of topics and in the use of the methodology.</p>	<p>There are still some conceptual insecurities with regard to Interpersonal Communication and Counseling.</p>	<p>Notwithstanding, it is recommended that the supervision continue supporting the section on Interpersonal Communication and Counseling.</p>
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	<p>It should be noted that the attitude toward the work group's heterogeneity has improved. In spite of the change in the Office on Maternity, the roles of coordination did not suffer any modifications as agreed upon by the interested parties.</p>		
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Coordinators		<p>There were problems in complying with the "Resolución Administrativa de Declaratoria en Comisión " There is also some difficulty with the authorization so that Dr Sejas can comply with her work duties</p>	<p>It was recommended to Dr Molina that the students be informed on the rights conferred by the "declaratoria en comisión " Dr García should make a personal request of Dr Villaroel (Chief of Pediatric Services) in order to facilitate Dr Sejas's work On the other hand, it was recommended that the coordination create a letter introducing the future students to the residents and physicians on duty</p>
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Supervisors	<p>The trainers made very complimentary remarks regarding the course supervisor, praising her work</p>		
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<p>LOGISTICS Environment</p>	<p>All the problems from the first course were resolved. The course is currently held in a new and adequate environment.</p>		
<p>Equipment</p>	<p>MotherCare completed the donation of the equipment and supplies for the course and the trainers already have the facilities they did not have for the first course.</p>		

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Material	The graphic material is already in conditions to be distributed for the third course		<p>It was recommended that more audiovisual material be obtained since this was very successful with the students</p> <p>A new copy of the resuscitation video was required since this copy was poorly recorded and only shows half the content</p> <p>A coffee maker was also requested in order to have hot water during the course</p>
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<p><b>INSTRUMENTS AND PROCEDURES</b></p>	<p>Pursuant to the recommendations from the evaluation of the first course, this course included readings as complementary methodology based on the material that is the product of the reformulation of the pre- and post-test questionnaires</p> <p>In this course, the time for the treatment of Normal Delivery was increased</p>	<p>Notwithstanding, since in some topics this material presents terms of some complexity, the reading generated some confusion</p> <p>The directed readings presented much difficulty for the nursing assistants who had problems with reading comprehension</p>	<p>It was recommended that this material continue to be used for consulting although only those sections presenting the greatest clarity should be worked with</p> <p>It was recommended that the interpersonal communication processes and model be emphasized as complementary to the individual or group reading, since this is generally the most common learning strategy among the nursing assistants</p> <p>It is recommended that the tables of cases of acute diarrhea be reintroduced which were removed from the guides in the second version</p>
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<p>METHODOLOGY</p>	<ul style="list-style-type: none"> <li>- All the trainers routinely employ interactive methodology</li> <li>- Except for two cases, the trainers are promoting reading checks</li> <li>- All complied with the content of the course and the practice session procedures</li> <li>- The verification lists were applied without exception</li> <li>- Generally, the majority is capable of creating a good climate of group motivation</li> </ul>	<p>In spite of the fact that they all use interactive methodology, the majority of the trainers tend to stereotype it and do not use it creatively, such as by introducing variations and innovations</p>	<p>It is recommended that the supervision continue to support the trainers at the methodological level, especially those who still have problems with the didactic procedures</p> <p>The production of audio cassettes has been suggested in order to reduce the need for reading some of the important contents</p> <p>It is recommended that a greater number of activities be introduced</p>
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AUTHOR

Cientifica Consultora SRL

TITLE

Final Report on the Third Training Course on Obstetric and Perinatal  
Complications - Cochabamba

PROGRAM

MotherCare II, Subcontract 5025-82

CONTRACT #

HRN-5966-C-00-3038-00

CNTRCTR NAME

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FINAL REPORT ON THE THIRD TRAINING COURSE ON OBSTETRIC AND  
PERINATAL COMPLICATIONS

COCHABAMBA

PRESENTED BY  
CIENTIFICA CONSULTORA SRL

IN CONSIDERATION OF:  
MOTHERCARE

LA PAZ - BOLIVIA

1997

## CONTENTS

1. Course needs and objectives for health care providers
2. Course plan, programs and schedules
3. Physical location
4. Instructors and methodology
- 5 Participants
6. Achievements and results obtained in the course
- 7 Work plan
- 8 Experiences learned in the training experience
- 9 Conclusions and recommendations for future events

MOTHERCARE - DEPARTMENTAL HEALTH OFFICE  
THIRD TRAINING COURSE  
COCHABAMBA

FINAL REPORT ON THE THIRD COURSE

1 Training course needs and objectives for health care providers

The training curriculum was designed taking into account the results from the research on the training needs expressed by the health care personnel and the risk situation of pregnant women and their newborns due to the characteristic conditions of Level I (Health Care Posts and Health Care Centers) and Level II (District Hospitals) health care posts

The training program seeks to achieve the following objectives

- Train health care personnel in making appropriate decisions to preserve the life of mother and child in an obstetric or perinatal emergency and
- Improve the quality of services provided by physicians, nurses and nursing assistants in the areas of interpersonal communication and counseling (IC/C) and competence in the diagnosis, handling, treatment and referral of obstetric and neonatal emergencies

The training is directed toward health care personnel in the three aforementioned professions, at level I (Health Care Posts and Health Care Centers) and level II (District Hospitals) from five provinces in the Department of Cochabamba Quillacollo, Sacaba, Capinota (including Arque and Bolívar), Independencia and Tapacarí

## 2 Course plan, programs and schedules

The course took place over a period of 4 weeks, from Monday, May 5, 1997 through Friday, May 30, 1997

As was the case in the previous two courses, the third course had two main axes

- the theory discussions, which took place during the first week from 8 30 a m to 12 30 p m and from 2 00 p m to 6 00 p m , for a total of 8 hours daily, and during the three complementary weeks from 2 00 p m to 6 00 p m , for a total of 4 hours daily according to the established program
- the practice sessions, which were held in the GERMAN URQUIDI Maternal-Infant Hospital during both morning sessions from 8 00 a m to 12 00 noon, Monday through Friday, subject to a special program designed to allow all the participants to take part in the morning rotation for 4 services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology, as well as during 12 hour night shifts (from Monday through Friday, from 8 00 p m to 8 00 a m ) and a weekend day shift (Saturdays and Sundays from 8 00 a m to 8 00 p m )

The theory sessions totaled 104 effective hours, including an additional 4 hour workshop on Sexuality and Gender which was held on May 24

Each participant also completed a total of 64 practice hours distributed over the various day and night services

Consequently, the total number of hours of attendance per participant totalled 168 hours This number of hours (4 hours less than the total used by the participants in Course No 2) was due to the Corpus Christi holiday which impinged upon the four hours of the morning practice session programmed for that day at the regular services at the Germán Urquidí maternity

### 3 Physical location

The course was conducted entirely in the auditorium at the Departmental Health Office, a new and spacious environment equipped for and for exclusive use by the course with a small adjacent office

The practice sessions were carried out in the Germán Urquidí Maternal-Infant Hospital, from 8 00 a m to 12 00 a m in four services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology The night and weekend practice activities took place in the same hospital in the emergency services and internment wards

### 4 Instructors and methodology

The course had 12 trained instructors who used the interactive methodology and emphasized the practice sessions

Dr Juan Carlos Molina gave a 4 hour presentation on the maternal-infant situation in Bolivia and health insurance In a workshop on Saturday, Jimmy Tellería covered the topic on sexuality and gender in 4 additional hours The five hours assigned to the MotherCare Information System, suspended in this course, were covered by Dr Maida who used three hours for the topic on clinical perinatal history and partograma\* and the other two hours for reinforcement of the work plan and post-test by the course supervisor

The practice sessions followed a special program detailed in the annex to this document. The participants rotated on a day schedule from 8 00 am to 12 00 a m for four services and were under the responsibility of different trainers. In the night and weekend schedule, Dr René Terán and Dr Olga Cartagena were in charge of the group two nights per week and Dr Antonio García, the Hospital Coordinator, was in charge on Saturdays.

This third course confirms the adequate planning of the practice sessions effected by Dr Antonio García, the Hospital Coordinator, both in terms of organization as well as follow-up, including monitoring attendance and, finally, in the recording of the total number of cases practiced and evaluated by each participant using a specific form.

Dr Antonio García guided each group to the different services in the morning practice sessions and made a letter of introduction to the night personnel available to the participants in order to facilitate the necessary cooperation.

The practice sessions were carried out in adequate conditions for this third group in spite of the difficulties posed by the excessive number of participants (33 people), which totalled 617 cases evaluated with verification lists, with an average of 19 cases per participant (see course documents file).

During the third week of the course, the baseline was recorded (see annex).

## 5 Participants

A total of thirty three people attended the third course and there were no dropouts.

The group was made up of

- 7 physicians from the provinces
- 3 licensed nurses
- 23 nursing assistants

working in Quillacollo, Sacaba, Capinota and Bolívar, for a total of 24 locations represented in the course.

- 10 work in district hospitals (level II)
- 23 work in health care posts and centers (level I)

Three people were added to the sessions on the second day of the course. Two people were absent on one occasion due to force majeure as is recorded in the daily attendance lists found in the course documents archive. The theory session hours on the holiday (Corpus Christi) were made up on Saturday, May 24, from 8 00 a m to 12 00 noon, pursuant to an express agreement between the participants and the trainer for that day, Dr Rosalía Sejas

The total of 33 participants constituted a group that was too large, it having been established that the ideal number is 25 and that in no case should the number exceed 30. The group had a remarkable level of integration and communication. The level of participation was very good and the group of physicians acted within the team spirit that the project sought to strengthen.

## 6 Achievements and results obtained in the course

### 6.1 Qualitative aspects:

- The program complied in its totality both in the theory as well as in the practice sessions
- The team of trainers and coordinators applied the instruments and procedures in an optimum manner in the development of the theory and practice sessions for the qualitative strengthening of this third course
- The participants clearly understood the objectives of the course and demonstrated this in the configuration of optimal working teams
- The participants expressed a highly assessment of the course in general and for the contribution by the Interpersonal Communication and Counseling Module, the practice and theory sessions, and the handling of obstetric and neonatal emergencies, in that order
- 97% of the participants expressed that they feel trained in the areas of demand, according to their professions

### 6.2 Quantitative indicators.

- 1 training course held
  - 104 theory hours
  - 64 practice hours
  - 12 trainers
- 1 course report
- 1 day of evaluation with the coordinators and trainers
- 33 trained participants
  - 7 physicians
  - 3 licensed nurses
  - 23 nursing assistants
  - 33 certificates distributed
- 24 posts, centers and hospitals represented in the third course
- 4 participating health care districts
  - Quillacollo
  - Sacaba

Capinota  
Independencia

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- 28 proposed work plans (see course documents file)
- 26,204 potential beneficiaries women and newborns Of this number, only 5,796 people are new beneficiaries in relation to the two courses held previously
- 2,706 direct beneficiaries women and newborns (own estimate based on the number of pregnant women seen in their services every year, as indicated in the record pages) Of this number, the new beneficiaries in relation to the two previous courses consist of 2,592 people
- 33 verification lists signed by the practice session supervisors, reviewed and returned to the participants
- 617 evaluated practice cases, an average of 19 cases per participant
- 2 pre- and post-test evaluations (pre-test and post-test)
- 19 daily evaluations
- 1 final course evaluation
- 12 trainers evaluated by the course participants See course documents file
- Material submitted to the participants
  - 33 sets of course materials (notebook, pen, eraser and gafete\*)
  - 33 Module I participant guides
  - 33 Module II to VI participant guides
  - 33 verification lists for practice sessions
  - 33 books on "Standard of Care for the Woman and the Newborn"
  - 33 manuals on technical obstetric and neonatal procedures
  - 33 pregnancy calculators
  - 33 metric tapes
  - 33 pamphlets on "Breastfeeding A Natural Resource"
  - 33 guides for breastfeeding and MELA
  - 33 documents on MELA

The duly signed receipt lists are in the course documents file

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## 7 Work plan

Each participant developed a work plan to be implemented in his or her service (Exercise 26) The results of this are in the course documents file There are 28 work proposals since the people working together created one joint plan of action

These work plans will be the basis for the follow-up to be conducted in the different work centers

## 8. Lessons learned in the training experience

### 8.1 In the theory sessions:

- The trainers implemented interactive sessions with working groups and other interactive techniques
- The topics of partograma\* and HCPN (perinatal clinical history) were extended to three hours instead of two

### 8.2 In the practice sessions:

- In spite of the rotation system and organization of the practice sessions, the quantitative results of group 3 are inferior to those of group 2, partially due to the fact that a holiday reduced the practice session time by 4 hours

- Each participant received an explanatory letter for the hospital personnel on duty. Notwithstanding, the final evaluation of the course by the participants indicates that there was ill treatment in some cases, particularly toward the nursing assistants, by the personnel on duty. The fact that, in the majority of cases, they were assigned the simple role of spectators without the option of participating directly in the delivery care and other emergencies was the main criticism. Therefore, it was suggested that the trainers perform a more direct follow-up in the practice sessions.
- Daily attendance at the practice sessions was monitored.
- There are summaries of the aforementioned verification lists which allow a quantitative assessment of the practice sessions of both the number of practice cases per participant as well as of the number of cases supervised by each trainer.
- The creation of a baseline study on Interpersonal Communication and Counseling was carried out during the first week of the course. The baseline in clinical skills was only able to be performed during the third and fourth week of the course. Therefore, only 4 participants had a complete evaluation. The rest of the participants have partial evaluations.

### 8 3 In relation to the logistical aspects

- There was a room available for use in optimum conditions in the new building of the Departmental Health Office which, notwithstanding, was too small for the number of participants in this course.
- During this course, the cafeteria was inaugurated with the support of the Health Office which provides janitorial services and installations for this purpose.

### 8 4 In relation to the participants

- The difficulty involving the subject of heterogeneity, which was posed repeatedly in the first course and was discussed and clarified with the participants from the second course, was definitely overcome in this third course.
- Attendance was excellent, only two people were absent for justified reasons and the group worked on a Saturday to compensate for the Corpus Christi holiday.

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- Punctuality was very good Since we had a cafeteria service for the first time, the breaks were better complied with and, seemingly, the space and time shared allowed for the establishment of closer interpersonal ties

#### 9. Recommendations for future events

Following is a summary of the aspects to be considered for future courses

- 1 Continue reinforcing the use of the methodology with the trainers
- 2 It is considered very positive that the participants have individual results available which provide motivation while allowing their personal advancement to be evaluated at the same time It is important to have this information before the end of each course
- 3 It is necessary that the practice sessions be reinforced by an alternative method to be implemented by the same trainers
- 4 It has been suggested that the topic on normal delivery be granted even more time (it has already been extended to two hours) since, in spite of the fact that it is basic and simple, it still requires a step-by-step explanation, especially for the nursing assistants

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Final Report on the Fourth Training Course on Obstetric and Perinatal  
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CNTRCTR NAME

John Snow, Inc

DATE

1997

detailed in the annex to this document. The participants rotated on a day schedule from 8 00 am to 12 00 a m for four services and were under the responsibility of different trainers. Dr René Terán, Dr Olga Cartagena and Dr Antonio García, the Hospital Coordinator, were in charge of the group three nights per week. In addition, each participant had a tutor assigned to solve eventual problems.

Dr Antonio García guided each group to the various services in the morning practice sessions and Dr Angel Maida, Director of Maternity, provided the participants with a letter of introduction to the night personnel in order to facilitate the necessary cooperation.

The practice sessions were carried out under adequate conditions for this fourth group in spite of the significant number of people. There were a total of 28 participants totalling 703 cases evaluated with verification lists, an average of 25 cases per participant (see course documents file under Summary of Verification Lists).

The baseline was recorded during the first week of the course for Interpersonal Communication and Counseling and during the second week for clinical skills. This record was repeated for Module I Interpersonal Communication and Counseling during the last week of the course.

## 5 Participants

A total of 28 people attended the fourth course and there were no dropouts (alphabetical list - annex and professional list - see annex).

The group was made up of

- 12 provincial physicians
- 1 licensed nurse
- 15 nursing assistants

working in Quillacollo, Sacaba, Capinota and Bolívar, for a total of 21 locations represented in the course.

Of these

- 10 work in district hospitals (level II)
- 18 work in health care posts and centers (level I)

## 6 Achievements and results obtained in the course

## 6.1 Qualitative aspects.

- The program complied in its totality in the theory as well as in the practice sessions
- The participants clearly understood the objectives of the course and demonstrated this in the configuration of optimal working teams. It was a very cohesive group with excellent levels of interpersonal communication
- The team of trainers and coordinators complied with the work requirements. Although three of them had to travel for work, this did not hinder either the theory or practice sessions because of the organized substitute system

## 6.2 Quantitative indicators

- One training course held
  - 104 theory hours
  - 64 practice hours
  - 12 trainers
- One course report
- One day of evaluation with the coordinators and the trainers
- 28 trained participants
  - 12 physicians
  - 1 licensed nurse
  - 15 nursing assistants
- 21 posts, centers and hospitals represented
- 28 certificates distributed
- 5 participating health care districts
  - Quillacollo
  - Sacaba
  - Capinota
  - Independencia
  - Tapacarí
- 23 proposed work plans (see course documents file)
- 20,308 potential beneficiaries women and newborns (own estimate based on the number of pregnant women seen in their

services each year as is indicated on the record sheets in the course documents file) Of this number, 1,462 people are new beneficiaries in relation to the three previous courses

- 28 verification lists signed by the practice session supervisors
- 703 evaluated practice cases, an average of 25 cases per participant
- 2 pre- and post-test evaluations
- 19 daily evaluations
- 1 overall course evaluation
- 12 trainers evaluated by the course participants - annex
- Material submitted to the participants
  - 28 sets of course materials (notebook, pencil, pen, eraser and gafete\*)
  - 28 Module I participant guides
  - 28 Modules II to VI participant guides
  - 28 verification lists for practice sessions
  - 28 books on "Standard of Care for Women and Newborns"
  - 28 manuals on technical obstetric and neonatal procedures
  - 28 guides on breastfeeding and MELA

The participants in this course did not receive metric tapes or pregnancy calculators

## 7 Work plan

Each participant developed a work plan to be implemented in his or her service The results of this are in the course documents file (Exercise 26) There are a total of 23 work proposals

## 8 Lessons learned in the training experience

There are no substantial variations with respect to the theory and practice aspects of the last course Notwithstanding, the review of the contents of the curriculum made it so that we were not able to deliver the materials to the trainers and the participants well in advance

8 1 With regard to the trainers.

- Three of the trainers had to be absent because of work reasons. The absences were covered in both the theory and the practice sessions.
- One of the trainers, without any warning, sent a substitute who had also participated in the training course for trainers.

## 8.2 With regard to the baseline

- This was completed for all the course participants.

## 8.3 With regard to the participants

- They were a very integrated group.
- Attendance was good with only four justified absences.

## 9 Recommendations for future events

1. Although the group of trainers worked in a very coordinated fashion, it is necessary to perform an evaluation which allows us to determine whom we can continue to work with in future training sessions.
2. Due to the various institutional and other difficulties presented in the implementation of the practice sessions, it is important to define the functions of the trainers and the expected results very specifically.

It is necessary to review the curriculum and reduce its contents such that only that which is relevant to the established objectives is maintained.

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FINAL REPORT ON THE FOURTH TRAINING COURSE ON OBSTETRIC AND  
PERINATAL COMPLICATIONS

COCHABAMBA

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FINAL REPORT ON THE FOURTH TRAINING COURSE ON OBSTETRIC AND  
PERINATAL COMPLICATIONS

COCHABAMBA

PRESENTED BY  
CIENTIFICA CONSULTORA SRL

IN CONSIDERATION OF  
MOTHERCARE

LA PAZ - BOLIVIA

1997

## CONTENTS

Training course needs and objectives for health care providers  
Course plan, programs and schedules  
Physical location  
Instructors and methodology  
Participants  
Achievements and results obtained in the course  
Work plan  
Experiences learned in the training experience

MOTHECARE - DEPARTMENTAL HEALTH OFFICE  
FOURTH TRAINING COURSE  
COCHABAMBA

FINAL REPORT ON THE FOURTH COURSE

1 Training course needs and objectives for health care providers

The training curriculum was designed taking into account the results from the research on the training needs expressed by the health care personnel and the risk situation of pregnant women and their newborns due to the characteristic conditions of level I (Health Care Posts and Health Care Centers) and level II (District Hospitals) health care posts

The training program seeks to achieve the following objectives

- Train health care personnel in taking the appropriate actions to preserve the life of mother and child in an obstetric or perinatal emergency, and
- Improve the quality of the services provided by physicians, nurses and nursing assistants in the areas of interpersonal communication and counseling (IC/C) and competence in the diagnosis, handling, treatment and referral of obstetric and neonatal emergencies

The training is directed toward level I (Health Care Posts and Health Care Centers) and level II (District Hospitals) health care personnel from the three aforementioned professions in five provinces in the Department of Cochabamba Quillacollo, Sacaba, Capinota (including Arque and Bolívar), Independencia and Tapacarí

2 Course plan, programs and schedules

The course took place over a period of 4 weeks, from Monday, June 23, 1997 through Friday, July 18, 1997

As was the case in the previous three courses, the third course had two main axes

- the theory discussions, which took place during the first full-time week and during the three complementary weeks from 2 00 p m to 6 00 p m (course program theory session document file)
- the practice sessions, which were held in the GERMAN URQUIDI

Maternal-Infant Hospital during both morning sessions from 8 00 a m to 12 00 noon, Monday through Friday, subject to a special program designed to allow all the participants to take part in the morning rotation for 4 services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology, as well as during 12 hour night shifts (from Monday through Friday, from 8 00 p m to 8 00 a m ) and a weekend day shift (Saturdays and Sundays from 8 00 a m to 8 00 p m - see annex - rotation program by services, night rotation, list of tutors and verification list supervisors)

The theory sessions totaled 104 effective hours, including an additional 4 hour workshop on Sexuality and Gender which was held on Saturday July 13

Each participant also completed a total of 68 practice hours distributed over the various day and night services

Consequently, the number of hours of attendance per participant totalled 172

### 3 Physical location

The course was conducted in the auditorium at the Departmental Health Office, a new and spacious environment equipped for and for exclusive use by the course with a small adjacent office

The practice sessions were carried out in the Germán Urquidí Maternal-Infant Hospital, from 8 00 a m to 12 00 a m in four services General Wards, Out-Patient Consulting, Delivery Wards and Neonatology The night and weekend practice activities took place in the same hospital in the emergency services and internment wards

### 4 Instructors and methodology

The course had 12 trained instructors for the theory sessions (Dr Erwin Hochstatter had to travel, and was unable to perform his two hour participation in the theory session, Dr Maida substituted for him and therefore he was not evaluated in this course) and 12 trainers for the practice sessions

Dr Juan Carlos Molina gave a 4 hour presentation on the maternal-infant situation in Bolivia and health insurance Jimmy Tellería covered the topic on sexuality and gender during 4 additional hours Carmen Gómez, the course supervisor, used two hours for the pre-test, post-test and administrative aspects

The practice sessions followed a special program which is