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Prevention of Postpartum  
Hemorrhage Initiative

# INTEGRATED MATERNAL AND NEWBORN CARE

## SUPERVISORY AND EVALUATION CHECKLISTS

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September 2009

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This publication is one in a series that make up the USAID/BASICS Newborn Health tool kit. The tool kit comprises:

- Reference Manual
- Technical Presentations
- Facilitator's Guide
- Participant's Notebook
- Clinical Logbook
- Tools for Monitoring and Evaluation



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## List of Abbreviations

AMTSL	active management of the third stage of labor
ART	antiretroviral therapy
ARV	antiretroviral
BCG	Bacille Calmette-Guérin (vaccine)
CCT	controlled cord traction
HIV	human immunodeficiency virus
HLD	high-level disinfection/disinfected
IM	intramuscular
MOH	Ministry of Health
OI	opportunistic infection
OPV	oral polio vaccine
PMTCT	preventing mother-to-child transmission
PPH	postpartum hemorrhage
RPR	rapid plasma reagin



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## Supervisory/Evaluation Checklist for Active Management of the Third Stage of Labor (AMTSL)

Training facilitators should use the following checklist to evaluate the health worker's performance, first on an obstetric model and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist covers AMTSL only and should be used with the checklists for essential newborn care at birth, neonatal resuscitation in the delivery room, and for monitoring the woman and baby in the immediate postpartum.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off!

Supervisory/Evaluation Checklist: AMTSL					
Step/Task	Rating				
<b>Evaluated on an anatomic model (M) or with a client (C)</b>					
<b>Date</b>					
<b>Prepare the woman during the first stage of labor (8 points)</b>					
1. Assesses for and manages all emergency and priority signs immediately.					
2. Explains to the woman and her support person what will be done and encourages questions.					
3. Listens to what the woman and her support person have to say.					
4. Reviews the woman's chart.					
5. Obtains her permission to apply AMTSL.					
6. Obtains the woman's permission to place the newborn first on her abdomen and then on her chest.					
7. Helps the woman take a bath.					
8. Provides emotional support and reassurance.					
<b>Points for skill/activity</b>					

Supervisory/Evaluation Checklist: AMTSL					
Step/Task	Rating				
<b>Preparation for childbirth (8 points)</b>					
9. Checks that all needed equipment and instruments are ready, available, clean, sterile/HLD, and in good working order.					
10. Checks that all needed supplies are ready and available.					
11. Makes sure that the room is warm (at least 25-28 °C/ 77.0-82.4 °F) and free from drafts from open windows, doors, or fans.					
12. Makes sure that all surfaces the woman and baby will come in contact with are clean, warm, and dry.					
13. Makes sure the room is well-lit.					
14. Provides PMTCT interventions if the woman is infected with HIV.					
15. Prepares a uterotonic drug (oxytocin is the uterotonic of choice) as soon as the woman's cervix is completely dilated.					
16. Asks the woman to empty her bladder when the second stage is near.					
<b>Points for skill/activity</b>					
<b>Preparation for the second stage of labor (9 points)</b>					
17. Verifies permission to apply AMTSL.					
18. Verifies permission to place the baby first on the mother's abdomen and then on her chest.					
19. Asks if the woman would like the person accompanying her to remain in the delivery room.					
20. Does not encourage the woman to push until she has the urge to do so.					
21. Assists the woman to assume the position of her choice (squatting, semi-sitting) and allows her to change position according to what's most comfortable for her.					
22. Provides emotional support.					
23. Wears a clean plastic or rubber apron, rubber boots, mask, and eye goggles.					
24. Washes hands thoroughly with soap and water and dries them with a clean, dry cloth (or air-dries them).					
25. Wears sterile or high-level disinfected (HLD) surgical gloves on both hands.					
<b>Points for skill/activity</b>					
<b>Assist with the birth of the baby</b>					
<b>Immediate newborn care (3 points)</b>					
26. Thoroughly dries the baby while assessing the baby's breathing.					



Supervisory/Evaluation Checklist: AMTSL					
Step/Task	Rating				
27. If the baby is not crying or breathing well at birth, <b>calls for help</b> and begins resuscitation.					
28. If the baby breathes well, places the baby in skin-to-skin contact on the mother's abdomen and covers the baby, including the head, with a clean, dry cloth.					
<b>Points for skill/activity</b>					
<b>Administration of a uterotonic drug (2 points)</b>					
29. Palpates the uterus to make sure no other baby is present.					
30. If no other baby is present, administers a uterotonic drug (oxytocin 10 IU IM is the uterotonic drug of choice) within one minute of delivery. (If the woman has an IV transfusion, an alternative is giving oxytocin 5 IU IV bolus slowly.)					
<b>Points for skill/activity</b>					
<b>Clamp and cut the cord (3 points)</b>					
31. Clamps and cuts the cord approximately 2-3 minutes after the baby's birth or cessations of pulsation, whichever comes first.					
32. Places the baby on the mother's chest in skin-to-skin contact.					
33. Covers the baby, including the head.					
<b>Points for skill/activity</b>					
<b>Controlled cord traction (7 points)</b>					
34. Places the palm of one hand on the lower abdomen, just above the woman's pubic bone, to palpate uterine contractions.					
35. Keeps slight tension on the cord with the other hand and waits for a strong uterine contraction.					
36. Applies gentle but firm traction to the cord during a contraction, while at the same time applying countertraction abdominally.					
37. Waits for the next contraction and repeats the action if the maneuver is not successful after 30-40 seconds of controlled cord traction.					
38. As the placenta delivers, holds it with both hands.					
39. Uses a gentle upward and downward movement or twisting action to deliver the membranes.					
40. Places the placenta in a receptacle provided (e.g., kidney basin).					

Supervisory/Evaluation Checklist: AMTSL					
Step/Task	Rating				
Points for skill/activity					
<b>Actions to take if problems are encountered when applying AMTSL (2 points)</b>					
41. If the <b>membranes tear</b> , gently examines the upper vagina and cervix.					
42. If the cord is ruptured, asks the woman to squat and deliver the placenta.					
Points for skill/activity					
<b>Uterine massage (4 points)</b>					
43. Immediately massages the fundus of the uterus through the woman's abdomen until the uterus is contracted (firm).					
44. Ensures that the uterus does not become relaxed (soft) after stopping uterine massage.					
45. If the uterus becomes soft after massage, repeats uterine massage.					
46. Instructs the woman how to massage her uterus.					
Points for skill/activity					
<b>Immediate postpartum care (9 points)</b>					
47. Inspects and repairs lacerations or tears (if necessary) of the lower vagina and perineum.					
48. Repairs episiotomy (if one was performed).					
49. Examines the maternal surface of the placenta and membranes for completeness and abnormalities.					
50. Disposes of the placenta.					
51. Removes soiled bedding and makes the woman comfortable.					
52. Estimates blood loss.					
53. Assists the woman and baby to begin breastfeeding within the first hour after birth.					
54. Documents all findings.					
55. Documents all care provided.					
Points for skill/activity					
<b>Infection prevention and decontamination (6 points)</b>					
56. Before removing gloves, disposes of gauze swabs and other waste materials in a leak-proof container or plastic bag.					
57. Disposes of needles and sharps in a sharps disposal container.					



Supervisory/Evaluation Checklist: AMTSL					
Step/Task	Rating				
58. Cleans apron with decontamination solution.					
59. Places instruments in a 0.5% chlorine solution.					
60. Decontaminates and disposes of gloves.					
61. Washes hands thoroughly with soap and water and dries them.					
<b>Points for skill/activity</b>					
<b>Counseling the woman on self-care (5 points)</b>					
62. Encourages the woman to eat, drink, and rest.					
63. Asks the woman's companion to watch her and call for help if bleeding or pain increases, if the mother feels dizzy or has a severe headache, visual disturbance, or epigastric discomfort or pain.					
64. Reminds the woman how the uterus should feel and how she can massage it herself.					
65. Encourages the mother to empty her bladder and ensures that she has passed urine.					
66. Counsels the woman on hygiene.					
<b>Points for skill/activity</b>					
<b>A: Total points for the case observed =</b>					
<b>B: Total points that were not applicable (N/A) =</b>					
<b>C: Total possible points for the case observed (66 minus B) =</b>					
<b>Score: A divided by C multiplied by 100 =</b>					
<b>Facilitator or supervisor's signature:</b>					

## Supervisory/Evaluation Checklist for Essential Newborn Care at Birth

Training facilitators should use the following checklist to evaluate the health worker's performance, first on a model and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist should be used with the checklists for AMTSL, neonatal resuscitation in the delivery room, and for monitoring the woman and baby in the immediate postpartum.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off!

Supervisory/Evaluation Checklist: Essential Newborn Care at Birth				
Step/Task	Rating			
<b>Evaluated on an anatomic model (M) or with a client/baby (C)</b>				
<b>Date</b>				
<b>Preparing the woman during the first stage of labor (6 points)</b>				
1. Explains to the woman and her support person what will be done and encourages questions.				
2. Listens to what the woman and her support person have to say.				
3. Reviews the woman's chart.				
4. Discusses with the mother and highlights the advantages of the plan to place the baby on her abdomen after delivery and later on her chest in skin-to-skin contact and to initiate breastfeeding in the delivery room.				
5. Encourages the woman to take a bath.				
6. Provides emotional support and reassurance.				
<b>Points for skill/activity</b>				
<b>Preparing the room and equipment for delivery (6 points)</b>				
7. Checks that all needed equipment and instruments are in good working order, ready, available, clean/sterile/HLD.				
8. Checks that all needed disposable/consumable supplies/linen are clean, preferably sterile.				



Supervisory/Evaluation Checklist: Essential Newborn Care at Birth					
Step/Task	Rating				
9. Makes sure that the room is warm (25-28 °C/77.0-82.4 °F) and free from drafts from open windows, doors, or from fans/air conditioners.					
10. Makes sure that all surfaces the woman and baby will come in contact with are clean, dry and warm.					
11. Makes sure the room is well-lit.					
12. Prepares for/provides PMTCT interventions if the woman is infected with HIV, making sure that ARV prophylaxis is available for the baby.					
<b>Points for skill/activity</b>					
<b>Preparation if the mother comes during the second stage of labor (4 points)</b>					
13. Provides emotional support.					
14. Wears a clean plastic or rubber apron, rubber shoes, (sandals, slippers), mask, and eye goggles.					
15. Washes hands thoroughly with soap and water and dries them with a clean, dry cloth (or air-dries them).					
16. Wears sterile (preferable) surgical or HLD gloves on both hands.					
<b>Points for skills/activity</b>					
<b>Immediate newborn care (4 points)</b>					
17. Wipes the eyes and face when the head is delivered.					
18. After full delivery of the baby, thoroughly dries the baby while assessing the baby's breathing.					
19. If the baby is not crying or breathing well within 30 seconds of birth, calls for help, clamps and cuts the cord and takes the baby to the table designated for resuscitation, and begins the steps for resuscitation.					
20. If the baby is breathing well, places him/her in skin-to-skin contact on the mother's abdomen and covers the body, including the head, with a fresh, dry cloth.					
<b>Points for skill/activity</b>					
<b>Clamp and cut the cord (6 points)</b>					
21. Clamps the cord approximately 2-3 minutes after the birth or after cessation of cord pulsations, whichever is earlier.					
22. Cuts the cord with sterile scissors or a sterile blade (attached to the scalpel) between the 2 sterile clamps, taking care to cover the site with a sterile gauze while cutting to prevent splashes.					

<b>Supervisory/Evaluation Checklist: Essential Newborn Care at Birth</b>				
<b>Step/Task</b>	<b>Rating</b>			
23. Ties the cord when the mother and baby are stable and AMTSL has been performed.				
24. Ties the cord firmly about 2 fingers (2-3 cm) from the baby's abdomen and cuts the cord 1-2 cm away from the tie.				
25. Checks the cord for bleeding.				
26. If recommended by the MOH, applies alcohol/antiseptic solution on the cord.				
<b>Points for skill/activity</b>				
<b>Care of the eyes (2 points)</b>				
27. Wipes the eyes and gives one drop of tetracycline or erythromycin ophthalmic solution in each eye. When using an ointment, depresses the lower eyelid and inserts a length/strip of the ointment inside the lid from the inner to the outer corner of the eye.				
28. Makes sure that the tip of the dropper or the tube does not touch the eyes of the baby or other objects.				
<b>Points for skill/activity</b>				
<b>Identification of the baby (1 point)</b>				
29. Places at least one identification band on the wrist or the ankle of the baby, with names of the mother and father (where available), date and time of birth, and sex of the baby.				
<b>Points for skill/activity</b>				
<b>Maintain the baby's body temperature/thermal protection (4 points)</b>				
30. Keeps the baby in skin-to-skin contact on the mother's chest. Covers the baby, including the head, with a linen/blanket. If the baby cannot be placed in skin-to-skin contact with the mother (in case of Cesarean section or if the mother is ill), wraps the baby well, including the head, in a clean linen/blanket.				
31. Checks the baby's axillary temperature with a thermometer.				
32. Informs the mother that the baby's weighing will be delayed until the baby is stable and warm.				
33. Informs the mother that the bath will be delayed at least six hours to avoid chilling the baby.				
<b>Points for skill/activity</b>				
<b>Administer vitamin K1 (4 points)</b>				
34. Explains to the mother that an injection of vitamin K1 prevents bleeding in the baby. Explains what is going to be done.				
35. Administers vitamin K: 1 mg to a normal weight baby/0.5 mg to a baby weighing less than 1500 grams.				
36. Gives the injection intramuscularly in the antero-lateral part of				



Supervisory/Evaluation Checklist: Essential Newborn Care at Birth				
Step/Task	Rating			
the thigh.				
37. Discards the needle and syringe in a secure container for sharp instruments.				
<b>Points for skill/activity</b>				
<b>Commence exclusive breastfeeding (2 points)</b>				
38. Assists the mother in breastfeeding her baby within one hour after birth, before transfer out of the delivery room.				
39. Checks that latching on the breast is appropriate.				
<b>Points for skill/activity</b>				
<b>Brief counseling of the mother before transfer from the delivery room (6 points)</b>				
40. Informs the mother that early, exclusive breastfeeding, including the colostrum, protects the baby against major life-threatening infections.				
41. Advises the mother to breastfeed frequently on demand, day and night.				
42. Specifically advises the mother not to give any other fluids, including water or semi-solids, to the baby.				
43. Advises the mother not to apply any harmful substances on the cord, such as clay, ash, or herbal preparations.				
44. Counsels the mother to keep the baby warm and checks the baby's temperature by touching the hands, feet, and abdomen to make sure that all these parts are warm.				
45. Advises the mother to inform the nurse/midwife if she has any concerns or problems.				
<b>Points for skill/activity</b>				
<b>Weigh the baby (6 points)</b>				
46. Delays taking the weight of the baby until he/she is stable and warm.				
47. Places a clean, ideally sterile, cloth/paper on the pan of the weighing scale.				
48. Adjusts the needle to bring it back to "zero."				
49. Places the naked baby on the cloth/paper.				
50. Notes the weight of the baby when the pan/scale is not moving.				
51. Records the weight of the baby in the partogram/relevant records/registers and informs the mother.				
<b>Points for skill/activity</b>				

<b>Supervisory/Evaluation Checklist: Essential Newborn Care at Birth</b>				
<b>Step/Task</b>	<b>Rating</b>			
<b>Decontamination, cleaning, and sterilization (3 points)</b>				
52. Removes the gloves after having dipped them in the decontamination solution.				
53. Gets equipment ready for subsequent deliveries (including sorting out and discarding waste, decontamination, cleaning, and sterilization of relevant equipment).				
54. Washes hands and air-dries them or wipes them with a clean cloth.				
<b>Points for skill/activity</b>				
<b>Record all the key data/information (1 point)</b>				
55. Writes the key findings in the partogram/neonatal/maternal charts and in the delivery room register.				
<b>Points for skill/activity</b>				
<b>A: Total points for the case observed =</b>				
<b>B: Total points that were not applicable (N/A) =</b>				
<b>C: Total possible points for the case observed (55 minus B) =</b>				
<b>Score: A divided by C multiplied by 100 =</b>				
<b>Facilitator or supervisor's signature:</b>				



## Supervisory/Evaluation Checklist for Monitoring the Woman and Newborn during the First Six Hours Postpartum

Training facilitators should use the following checklist to evaluate the health worker's performance, first on obstetric and baby models and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist should be used with the checklists for AMTSL, essential newborn care at birth, and neonatal resuscitation.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off!

Supervisory/Evaluation Checklist: Monitoring...during the First Six Hours Postpartum				
Step/Task	Rating			
<b>Evaluated on an anatomic model (M) or with a client/baby (C)</b>				
<b>Date</b>				
<b>Get ready (before each assessment) (8 points)</b>				
1. Prepares the necessary equipment and the exam area.				
2. Assesses and manages all emergency and priority signs immediately.				
3. Greets the woman respectfully and with kindness.				
4. Explains to the woman and the support person what he/she will be doing.				
5. Listens to what the woman has to say.				
6. Washes hands thoroughly with soap and water and dries them on a clean, dry towel (or air-dries them).				
7. Puts on disposable or HLD gloves.				
8. Ensures the baby is kept warm.				
<b>Points for skill/activity</b>				
<b>Monitoring the woman after childbirth (9 points)</b>				

<b>Supervisory/Evaluation Checklist: Monitoring...during the First Six Hours Postpartum</b>				
<b>Step/Task</b>	<b>Rating</b>			
Monitors the woman at the same time as her newborn every 15 minutes in the first 2 hours, every 30 minutes in the 3 <sup>rd</sup> hour, and every hour in the next 3 hours for the following:				
9. Blood pressure				
10. Pulse				
11. Uterine contraction				
12. Vaginal bleeding				
13. If any findings are not within normal limits, responds immediately.				
14. Reminds the woman how the uterus should feel and how she can massage it herself.				
15. Encourages the woman to empty her bladder as soon as possible after childbirth and ensures that she has done so.				
16. Asks the woman's companion to watch her and call for help if bleeding or pain increases, if the woman feels dizzy or has severe headaches, visual disturbance, or epigastric distress.				
17. Encourages the woman to eat, drink, and rest.				
<b>Points for skill/activity</b>				
<b>Monitoring the baby (10 points)</b>				
Monitors the baby along with the mother every 15 minutes in the first 2 hours, every 30 minutes in the 3 <sup>rd</sup> hour, and every hour in the next 3 hours for the following:				
18. Respiration				
19. Color				
20. Temperature: Checks the baby's hands and feet; checks the axillary temperature at least once in the 6 hours.				
21. Rechecks the axillary temperature if the baby's feet are cold.				
22. Checks the cord for bleeding.				
23. Reties the cord if there is bleeding.				
24. Checks for danger signs.				
25. Refers the baby even if one danger sign exists after giving the first doses of antibiotics.				
26. Checks breastfeeding and attachment at the breast at least once during the 6 hours.				
27. Asks the mother to inform the care provider if she notes any problem.				
28. Provides essential care for the mother and baby, including PMTCT interventions.				



Supervisory/Evaluation Checklist: Monitoring...during the First Six Hours Postpartum				
Step/Task	Rating			
Points for skill/activity				
<b>Comprehensive examination of the woman and newborn (2 points)</b>				
29. Performs a comprehensive exam of the woman and newborn at least once within six hours after childbirth.				
<b>Points for skill/activity</b>				
<b>Closing (after each assessment) (5 points)</b>				
30. Immerses both gloved hands in a 0.5% chlorine solution:				
• Removes gloves by turning them inside out.				
• If disposing of gloves, places them in a leak-proof container or plastic bag.				
• If reusing surgical gloves, submerges them in a 0.5% chlorine solution for 10 minutes to decontaminate before HLD.				
31. Washes hands thoroughly with soap and water and dries them with clean, dry cloth (or air-dries them).				
32. Shares findings with the woman.				
33. Asks the woman if she has any further questions or concerns.				
34. Records the relevant details of care for the woman and baby.				
<b>Points for skill/activity</b>				
<b>A: Total points for the case observed =</b>				
<b>B: Total points that were not applicable (N/A) =</b>				
<b>C: Total possible points for the case observed (34 minus B) =</b>				
<b>Score: A divided by C multiplied by 100 =</b>				
<b>Facilitator or supervisor's signature:</b>				

## Supervisory/Evaluation Checklist for Essential Postpartum Care for the Woman

Training facilitators should use the following checklist to evaluate the health worker's performance, first on an obstetric model and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist should be used with the checklists for newborn examination and essential newborn care at birth.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off! In many places it is not conventional to wear gloves when examining the mother and baby (except for vaginal examination).

Supervisory/Evaluation Checklist: Essential Postpartum Care for the Woman				
Step/Task	Rating			
<b>Evaluated on an anatomic model (M) or with a client/baby (C)</b>				
<b>Date</b>				
<b>Get ready (before each assessment) (8 points)</b>				
1. Prepares the necessary equipment and the exam area.				
2. Assesses for and manages all emergency and priority signs immediately.				
3. Greets the woman respectfully and with kindness.				
4. Makes sure the woman is comfortable.				
5. Asks the woman if she has a support person with her, and, if yes, has the support person in the room during the physical examination.				
6. Explains what will be done to the woman (and her support person) and encourages questions.				
7. Listens to what the woman has to say.				
8. Asks the woman if she now has or has had any danger signs and responds immediately if even one is present.				
<b>Points for skill/activity</b>				
<b>History: Ask/listen/check records (12 points)</b>				



Supervisory/Evaluation Checklist: Essential Postpartum Care for the Woman				
Step/Task	Rating			
9. Asks the woman how she is feeling.				
10. Checks the woman's record or asks about her pregnancy and delivery.				
11. Checks the woman's record or asks about RPR, TT status, treatment for anemia, treatment for TB.				
12. Checks the woman's record or asks about HIV status.				
13. Checks the woman's record or asks about medications being taken.				
14. Asks the woman how she is feeding her baby.				
15. Asks the woman about her experience with breastfeeding and if she is having any problems with it.				
16. Asks the woman about family planning.				
17. Asks the woman about social support.				
18. Records the relevant findings.				
19. Washes hands thoroughly with soap and water and dries them with clean, dry cloth (or air-dries them).				
20. Explains each step of the physical examination and encourages the woman to ask questions.				
<b>Points for skill/activity</b>				
<b>Physical examination: Look/feel (14 points)</b>				
21. Helps the woman on to the examination table and places a pillow under her head and upper shoulders.				
22. Observes general appearance.				
23. Takes the woman's vital signs.				
24. Checks the woman's conjunctiva, tongue, nailbeds, and palms for pallor.				
25. Does a breast exam.				
26. Examines the abdomen to assess involution and tenderness.				
27. Examines legs.				
28. Puts high-level disinfected or new examination gloves on both hands.				
29. Examines perineum and genitalia.				
30. Observes lochia.				
31. Immerses both gloved hands in a 0.5% chlorine solution: <ul style="list-style-type: none"> <li>• Removes gloves by turning them inside out.</li> </ul>				

<b>Supervisory/Evaluation Checklist: Essential Postpartum Care for the Woman</b>				
<b>Step/Task</b>	<b>Rating</b>			
<ul style="list-style-type: none"> <li>If disposing of gloves, places them in a leak-proof container or plastic bag.</li> <li>If reusing surgical gloves, submerges in a 0.5% chlorine solution for 10 minutes to decontaminate.</li> </ul>				
32. Washes hands thoroughly with soap and water and dries them with clean, dry cloth (or air-dries them).				
33. Helps the woman off the examination table and offers her a seat.				
34. Records all relevant findings from the physical examination.				
<b>Points for skill/activity</b>				
<b>Screening procedures (4 points)</b>				
35. Does/orders a hemoglobin test if indicated.				
36. Does/orders an RPR screening test if indicated.				
37. Provides HIV testing and counseling if indicated and the woman has given informed consent to do so.				
38. Orders additional tests if indicated.				
<b>Points for skill/activity</b>				
<b>Identify problems/needs (4 points)</b>				
39. Shares findings of the exam with the woman.				
40. Identifies needs/problems based on findings of history, physical examination, and screening tests.				
41. Develops a plan of care with the woman.				
42. Asks the woman if she has any additional questions.				
<b>Points for skill/activity</b>				
<b>Provide care/take action (11 points)</b>				
43. Treats based on results of history, physical examination, or laboratory examination results.				
44. Provides prophylactic prescriptions based on the care plan.				
45. Provides tetanus immunization based on need.				
46. Provides counseling about danger signs in the postpartum period and what to do about them.				
47. Provides counseling on nutrition and iron supplementation.				
48. Provides counseling on hygiene.				
49. Provides counseling on rest.				
50. Provides counseling on using insecticide-treated bednets.				
51. Provides counseling on safer sex and use of condoms.				
52. Explains the benefits of adequate birth spacing interval to the mother, child and the family.				



<b>Supervisory/Evaluation Checklist: Essential Postpartum Care for the Woman</b>				
<b>Step/Task</b>	<b>Rating</b>			
53. Informs the mother about the recommended birth interval after a live birth.				
54. If the woman is breastfeeding, provides counseling on LAM and other methods of family planning.				
55. If the woman is not breastfeeding, provides family planning method of the woman's choice.				
<b>Points for skill/activity</b>				
<b>Closing (6 points)</b>				
56. Asks the woman if she has any further questions or concerns.				
57. Tells the woman when to return for routine postpartum care.				
58. Reassures the woman that she can return at any time she has questions or concerns.				
59. Advises the woman to go to the hospital/health center immediately, day or night, <b>without waiting</b> if she has any danger signs.				
60. Thanks the woman for coming.				
61. Records the relevant details of care for the woman.				
<b>Points for skill/activity</b>				
<b>A: Total points for the case observed =</b>				
<b>B: Total points that were not applicable (N/A) =</b>				
<b>C: Total possible points for the case observed (61 minus B) =</b>				
<b>Score: A divided by C multiplied by 100 =</b>				
<b>Facilitator or supervisor's signature:</b>				

## Supervisory/Evaluation Checklist for Neonatal Resuscitation in the Delivery Room

Training facilitators should use the following checklist to evaluate the health worker's performance, first on a model (mannequin) and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed./not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist should be used with the checklists for AMTSL, essential newborn care at birth, and care of the mother postpartum.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off!

Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room					
Step/Task	Rating				
Evaluated on an anatomic mode (M) or with a client/baby (C)					
Date					
<b>Prepare equipment and room for resuscitation before each delivery at the place reserved for special care of the baby ("newborn baby's corner") (14 points)</b>					
Checks to see if the following are available, working, and sterile/clean:					
1 Wall thermometer to verify the room temperature is between 25 °C-28 °C.					
2 There are no open windows or a draft.					
3 The tabletop is clean.					
4 Has available 3-5 clean, preferably sterile, absorbent towels/linen to dry and wrap the baby (and a cap/bonnet if available) and covers the table.					
5 There is a functioning heater, if available, over the table.					
6 Pieces of gauze/cloth, preferably sterile					
7 Sterile gloves or HLD gloves					
8 Equipment/supplies for clearing the airways					
9 Self-inflating bag for neonatal resuscitation with two facial masks (#1 for normal size babies, #0 for low birth weight babies)					
10 Checks seal between the resuscitator bag and the mask.					



Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room					
Step/Task	Rating				
11 Oxygen source (if available); if cylinder(s), checks that they have sufficient oxygen.					
12 Clinical thermometer for recording axillary temperature					
13. Wall clock with a second hand					
14. Stethoscope, if available					
<b>Points for skill/activity</b>					
<b>Steps just before delivery (3 points)</b>					
15. If a heater is available, switches it on and places the linen below/near the heater to get them warmed.					
16. Washes hands well with soap and water.					
17. Wears apron, gown, sterile/HLD gloves masks and goggles, if available.					
<b>Points for skill/activity</b>					
<b>Management in case of thick meconium in the amniotic fluid (3 points)*</b>					
18. Wipes the eyes and face and asks the mother not to push for few seconds in order to suction the mouth of the baby.					
19. Suctions the mouth first and then the nose of the baby as soon as the head is at the perineum, <b>before</b> the shoulders deliver.*					
20. After full delivery, if the baby is not breathing, suctions the mouth and nose <b>before</b> drying and stimulating the baby.					
<b>Points for skill/activity</b>					
<b>Immediate management at birth (5 points)</b>					
21. Once the baby is delivered, receives the baby in a dry, clean, preferably sterile, cloth, and wipes the eyes, face, and whole body.					
22. Places the baby on the abdomen of the mother in skin-to-skin contact and covers him/her with fresh, dry linen.					
23. Observes the baby while performing steps 1 and 2 (within 30 seconds) to verify that he/she is breathing well.					
24. If the baby does not breathe, initiates steps for resuscitation.					

\*Note: International recommendations no longer support this step. Instead, it is recommended to suction the mouth and nose of the baby who is not crying immediately after birth even **before** drying and stimulation and later if necessary carry out endotracheal suction. As the latter may not be possible in many peripheral centers, some may prefer to suction the mouth and nose before delivery of the shoulders where there is thick meconium in the amniotic fluid.

<b>Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room</b>					
<b>Step/Task</b>	<b>Rating</b>				
25. If the baby breathes normally, begins routine essential newborn care, including announcing the time of birth and the sex of the baby.					
<b>Points for skill/activity</b>					
<b>Begin resuscitation and clearing of the airways (9 points)</b>					
26. Clamps and cuts the cord immediately.					
27. Takes the baby to the “newborn baby corner,” places him/her on the back with the head placed towards the provider.					
28. If a heater is not available, makes sure the baby remains wrapped, except for the face and chest.					
29. Places the head in slight extension by gently pulling the head and neck with the hand or by placing a small roll of towel/linen (2-3 cm) under the shoulders.					
30. Introduces the suction catheter/device, first in the mouth, then in the nostrils.					
31. Introduces the suction catheter sufficiently deep enough to obtain an efficient suction, but does not advance it more than 5 cm in the mouth and 3 cm in the nostrils.					
32. Suctions the airways gently and only while withdrawing the catheter and not at the time of introduction.					
Re-examines the baby for breathing:					
33. If the baby starts breathing, observes the baby for at least 5 minutes and then commences routine essential newborn care, continuing to monitor respiration.					
34. If the baby still does not breathe, prepares for ventilation but may quickly try 2-3 flicks/slaps on the soles of the feet to stimulate breathing. If no response, starts ventilation as noted below.					
<b>Points for skill/activity</b>					
<b>Ventilation with bag and mask; initial steps (6 points)</b>					
35. Before beginning ventilation, verifies that the neck of the baby is in slight extension.					
36. Applies the bag on the face of the infant, so that it covers the nose, mouth, and chin.					
37. Creates a good fit (“seal”) between the mask and the face of the infant.					
38. Squeezes the bag 2-3 times and makes sure that the chest rises/expands. If not, readjusts the masks and tries again.					
39. If the baby’s chest rises, starts ventilation with the bag.					



Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room				
Step/Task	Rating			
40. If the chest of the baby does not rise, suction airways again, adjusts neck extension, repositions the mask, and resumes ventilation.				
41. Makes sure that the ventilation is commenced within one minute of birth.				
<b>Points for skill/activity</b>				
<b>Ventilation with bag and mask; continued (6 points)</b>				
42. Ventilates the baby 40 times/minute (range 40-60/minute). The rhythm- is 1 – 2 – ‘breathe’/squeeze the bag.				
43. Checks periodically (every 1-2 minutes) for spontaneous breathing and for color.				
44. If the baby cries and has spontaneous breathing, stops ventilation and continues to observe the baby’s breathing for at least 5 minutes. If the baby continues breathing well, commences essential newborn care under continued monitoring.				
45. If the baby does not cry nor breathe spontaneously, continues ventilation.				
46. If the lips and tongue are blue, administers supplemental oxygen, if available, until the lips turn pink.				
47. If the baby does not breathe spontaneously after 20 minutes of ventilation, stops resuscitation.				
<b>Points for skill/activity</b>				
<b>Steps at the end of resuscitation (6 points)</b>				
48. Discards used disposable equipment in an appropriate manner.				
49. Makes sure that other equipment that can be reused is decontaminated, clean, and sterilized as required.				
50. Decontaminates and removes gloves.				
51. Washes hands with soap and water.				
52. Notes all key findings and treatment provided in the partogram/maternal and newborn records and delivery register.				
53. Replenishes all disposable items and keeps the “baby’s corner” ready for the next delivery, including resuscitation.				
<b>Points for skill/activity</b>				
<b>Follow-up care (6 points)</b>				
54. Explains to the mother/family, when appropriate and in a manner they can understand, what has been done and the condition of				

<b>Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room</b>				
<b>Step/Task</b>	<b>Rating</b>			
the baby after resuscitation, as well as the supplemental care needed at the peripheral health center and later at home.				
55. If the condition of the baby improves, keeps him/her warm, in skin-to-skin contact with the mother.				
56. Measures axillary temperature of the baby keeping the thermometer in the axilla for 4 minutes.				
57. Facilitates breastfeeding as soon as the baby is stable and ready to be fed.				
58. After resuscitation, checks breathing and color and for danger signs: every 15 minutes for 2 hours, every 30 minutes in the 3 <sup>rd</sup> hour, every hour during the following 3 hours (same as monitoring for AMTSL), and then every 3-4 hours for the next 2 - 3 days while at the facility.				
59. If resuscitation was difficult or if the baby develops even a single danger sign, arranges transfer of the baby with the mother to the referral center after stabilization and giving the first doses of antibiotics.				
<b>Points for skill/activity</b>				
<b>Provides essential newborn care (5 points)</b>				
Provides the following as necessary:				
60. Temperature maintenance/thermal protection				
61. Eye care				
62. Cord care				
63. Records the weight				
64. Facilitates breastfeeding as soon as baby is ready for it				
65. Vitamin K1 (1 mg for normal baby and 0.5 mg for a baby weighing less than 1500 grams)				
<b>Points for skill/activity</b>				
<b>Counsels the mother and family (5 points)</b>				
Counsels the mother/family about the following:				
66. To continue breastfeeding on demand, day and night				
67. To keep the baby warm				
68. To wash hands and maintain good hygiene				
69. To maintain clean cord care				
70. To call the health worker if there are any problems/danger signs				
<b>Points for skill/activity</b>				
<b>A: Total points for the case observed =</b>				



Supervisory/Evaluation Checklist: Neonatal Resuscitation in the Delivery Room				
Step/Task	Rating			
<b>B: Total points that were not applicable =</b>				
<b>C: Total possible points for the case observed (70 minus B) =</b>				
<b>Score: A divided by C multiplied by 100 =</b>				
<b>Facilitator or supervisor's signature:</b>				

## Supervisory/Evaluation Checklist for History Taking, Basic Systematic Examination, and Postnatal Newborn Care at Peripheral Health Centers

Training facilitators should use the following checklist to evaluate the health worker's performance, first on a model and then on a client.

After training activities are complete, supervisors can use the checklist to evaluate the health worker's skills with a client, when one is available, and on a model or mannequin when a client is not available at the time of the evaluation.

### Directions

Rate the performance of each step or task using the following rating scale:

**1** = Performs the step or task completely and correctly.

**0** = Is unable to perform the step or task completely or correctly or the step/task was not observed.

**N/A** (not applicable) = Step was not needed.

**NOTE:** This checklist should be used with the checklists for newborn examination and essential newborn care at birth.

**NOTE:** Wash hands and wear gloves every time you come in contact with the woman and newborn. Don't forget to wash your hands after taking your gloves off!

Supervisory/Evaluation Checklist: History Taking, Basic Systematic Examination and Postnatal Care at Peripheral Health Centers					
Step/Task	Rating				
Evaluated on an anatomic model (M) or with a client/baby (C)					
Date					
<b>Preparation for the evaluation (6 points)</b>					
1. Prepares the necessary equipment and supplies.					
2. Washes hands with soap and water and dries them with a clean towel (or air-dries them).					
3. Tells the mother what is going to be done and encourages questions.					
4. Listens to the mother.					
5. If the baby is quiet, starts with counting the respiratory rate.					
6. If the baby cries or is restless, asks the mother to breastfeed and takes advantage of this to observe how well the baby latches on to the breast.					
<b>Points for skill/activity</b>					



<b>Supervisory/Evaluation Checklist: History Taking, Basic Systematic Examination and Postnatal Care at Peripheral Health Centers</b>					
<b>Step/Task</b>	<b>Rating</b>				
<b>History taking for danger signs: Asks/listens/checks record (8 points)</b>					
Asks the mother/family if the baby has any of the following danger signs:					
7. Poor sucking/not sucking					
8. Lethargy/inactivity					
9. Fever or hypothermia					
10. Respiratory distress/fast breathing					
11. Convulsions					
12. Persistent vomiting or green-colored vomitus/abdominal distention					
13. Redness/swelling surrounding the umbilicus and/or foul smell with or without pus discharge.					
14. Asks about the presence of any other problems.					
<b>Points for skill/activity</b>					
<b>History taking for other features: Asks/listens/checks record (8 points)</b>					
Checks mother's chart and asks about:					
15. Risk factors for infection					
16. Duration of the pregnancy (to note if it was full term or preterm )					
17. Time of first cry after birth, if baby needed resuscitation, and what was done					
18. Birth weight					
19. Eye care given at birth					
20. Cord care given at birth					
21. Administration of vitamin K1					
22. Administration of immunizations and which ones					
<b>Points for skill/activity</b>					
<b>Prevention of hypothermia during the exam (2 points)</b>					
23. Checks that the place/mother's bed is free from drafts.					
24. If a heat source is not available, covers the baby, exposing only the part to be examined.					
<b>Points for skill/activity</b>					
<b>Physical exam for danger signs: Looks/feels (5 points)</b>					

<b>Supervisory/Evaluation Checklist: History Taking, Basic Systematic Examination and Postnatal Care at Peripheral Health Centers</b>					
<b>Step/Task</b>	<b>Rating</b>				
25. Checks for the danger sign of lethargy or diminished activity.					
26. Checks for the danger sign of respiratory distress, counting the respiratory rate, recounting if the rate is abnormal, and looking for subcostal retractions.					
27. Checks for the danger sign of fever or hypothermia: cleans the thermometer with cotton and alcohol and takes the temperature with the thermometer placed under the axilla for 3-4 minutes.					
28. Checks for the danger sign of abdominal distention.					
29. Checks for the danger sign of severe umbilical cord infection by lifting the cord to check the base or, if the cord has fallen off, by opening the folds to check depth of the umbilicus.					
<b>Points for skill/activity</b>					
<b>Physical examination for jaundice (2 points)</b>					
30. Gently with the pulp of the finger, presses the tip of the nose, releases the pressure, and observes the pale area for yellow color.					
31. Checks if the palms and soles are yellow.					
<b>Points for skill/activity</b>					
<b>Physical examination for minor infections (3 points)</b>					
32. Checks if the eyes are red and for pus discharge.					
33. Examines the tongue, mouth, and inner parts of cheeks for thrush.					
34. Examines for skin infection. Checks skin folds at the neck, the armpits, groin, and the back.					
<b>Points for activity/skill</b>					
<b>Checks feeding at any appropriate time during the exam (1 point)</b>					
35. Observes if the baby latches well to the breast.					
<b>Points for skill/activity</b>					
<b>Weighs the baby (5 points)</b>					
36. Places a clean linen or paper on the pan of the baby weighing scale.					
37. Adjusts the scale so that reading is "zero" with the cloth/paper on the scale.					
38. Places the baby on the paper/cloth.					
39. Notes the weight when the scale and basket do not move.					



<b>Supervisory/Evaluation Checklist: History Taking, Basic Systematic Examination and Postnatal Care at Peripheral Health Centers</b>					
<b>Step/Task</b>	<b>Rating</b>				
40. Writes the weight of the baby in the mother's and baby's records.					
<b>Points for skill/activity</b>					
<b>Tasks after the physical examination (6 points)</b>					
41. Washes hands with soap and water and dries them with a clean towel (or air-dries them).					
42. Discusses findings and plan of care with the mother/family, asks if they have questions, and listens attentively.					
43. Notes all pertinent details of the physical examination in the mother's/baby's chart/register.					
44. In the presence of even one danger sign, gives the first dose of antibiotics and refers to an appropriate higher center without carrying out any unnecessary steps/activities.					
45. Prescribes treatment for minor infections.					
46. Checks if the baby has received immunizations (BCG, OPV, hepatitis B based on MOH recommendations), gives the dose(s) if missed earlier, or gives appointments for the same.					
<b>Points for skill/activity</b>					
<b>Provides/arranges for counseling of the mother/family (5 points)</b>					
Counsels the mother/family about the following:					
47. Exclusive breastfeeding on demand					
48. Maintaining the baby's temperature					
49. Cord care					
50. General hygiene/prevention of infection					
51. The need for the mother to sleep with the baby under an insecticide-treated mosquito net.					
<b>Points for skill/activity</b>					
<b>Advises mother/family to seek care even if only one of the danger signs noted below is present (7 points)</b>					
52. Poor sucking/not sucking					
53. Lethargy/inactivity					
54. Fever or hypothermia (cold body)					

<b>Supervisory/Evaluation Checklist: History Taking, Basic Systematic Examination and Postnatal Care at Peripheral Health Centers</b>					
<b>Step/Task</b>	<b>Rating</b>				
55. Respiratory difficulty/fast breathing					
56. Convulsions					
57. Persistent vomiting or green-colored vomitus/abdominal distension					
58. Severe umbilical infection: extending redness and swelling around the cord/foul smell, with or without pus					
<b>Points for skill/activity</b>					
<b>Conclusion (5 points)</b>					
59. Asks mother/parents if they have any concerns and questions.					
60. Thanks the mother/family for their visit.					
61. Makes an appointment for the next visit.					
62. Places the mother/family in contact (if appropriate and available) with a competent community health worker or volunteer.					
63. Recommends to the mother/parents to bring the baby immediately to the hospital/health center, day or night, without delay, if even one of the danger signs is present.					
<b>Points for skill/activity</b>					
<b>A: Total points for the case observed =</b>					
<b>B: Total points that were not applicable (N/A) =</b>					
<b>C: Total possible points for the case observed (63 minus B) =</b>					
<b>Score: A divided by C multiplied by 100 =</b>					
<b>Facilitator or supervisor's signature:</b>					



## Checklist for Evaluating a Facility

Discuss your answers to these questions with your facilitator when you are in a facility for your practical training.

<b>I. Related to the places where newborns are cared for immediately after birth, such as the delivery room and postnatal room or ward:</b>	
Briefly describe the place	
List the strong points	
List the challenges or features that need to be improved	
<p>Suggestions for improvement</p> <ol style="list-style-type: none"> <li>1. Short-term changes with existing resources</li>   <li>2. Long-term changes needing additional resources</li> </ol>	

<b>II. Related to cleanliness and strategies/actions to prevent infection in the delivery room and postnatal ward:</b>	
List strong points you have noted	
List challenges	
<p>Suggest improvements</p> <ol style="list-style-type: none"> <li>1. Short-term changes with existing resources</li>   <li>2. Long-term changes needing additional resources</li> </ol>	
<b>III. With regards to the equipment and supplies for the care of the newborn in the</b>	

