**Standardization Training for Counselor**

**September 2017 Schedule**

By the end of the training the participant counselor should acquire below mentioned knowledge and skills and should be able to implement the intervention at the site.

1. Counsel mothers and family on health care needs of a sick newborn in collaboration with the health care team.
* Psycho-social assessment of the family.
* Counsel the mother and family on daily basis on the health status of the newborn in consultation with the treating specialist and nurse.
* Provide feedback to health care team on challenges faced by the mother and family on feeding, providing KMC, and following the recommendations of the health care team.
* Assist mothers in feeding difficulties: teaching her how to express breast feed; store it and feed with a pallada.
* Assist mothers in providing KMC.
* Provide emotional support to the mother and family by talking to them and helping them to find solutions for their challenge.
* Learning to work as part of the healthcare team for welfare of newborn, mother and family -- working with doctors, nurses and other staff in the hospital; roles and responsibilities of counselors.
* Learn soft skills such as empathy, interpersonal skills, negotiation skills, time management.
1. Facilitate in transitioning of the responsibility of care newborns from health care personnel to mothers and family.
* Teach mothers and family members about care required for the newborn in consultation with the doctor and nurse.
* Assist the mother to feed her baby along with the nurse.
* Assist the mother / family member to provide KMC if recommended.
* Do group counseling along with the nurse on care of LBW babies at home

3. Educate mothers and family members on care of the newborn.

* Keeping the baby warm,
* KMC,
* Exclusive breast feeding,
* Prevention of infection,
* Follow up
* Recognition of danger signs
1. Adolescent Antenatal mother counseling

5. Assist in health information management system.

* Assist data entry operator in maintaining records of status of newborns and service.
* Successfully link with ASHA through Phone call and link card on discharge.

**Day 1: Monday**

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| **Timings** |  | **Facilitator** |
| 9:00 – 9:15 a.m. |  Pre-test  |  |
| 9:15 – 10:15 a.m. |  |  |
| 10:15– 10:30 a.m. | TEA |  |
| 10.30-11.30 |  Counseling principles and skills* Respect/
* Confidentiality
* Autonomy
* Rapport building

Steps for Counseling – ALPAC (Ask/Listen/Praise/Advise-Suggest/Clarify |  |
| 11:30 – 1:00 p.m. |  |  |
| 1.00-2.00pm | Lunch |  |
| 2:00 – 3:30 p.m. | Introduction to Preterm and LBW babiesKMC overview – discussion* Requirements, Position, Eligibility
* Benefits
* Barriers to KMC
* How to overcome barriers in facility – counseling, AKKA
* Practice on Mannequins – for position
 |  |
| 3.30-5.00pm | Practice in KMC ward/NICU/OB Ward |  |

**Day 2: Tuesday**

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| --- | --- | --- |
| **Timings** |  | **Facilitator** |
| 9.00-10.30am | Counseling (Ask, Listen, Praise, Advise, Check understanding- ALPAC) a mother and family member for KMC (class room session with clinical scenarios)* Demonstration
* How to address the various barriers to improve duration of KMC

Practice of counseling with feedback* Role of counselor in addressing barriers / facilitators to implement KMC and managing difficult people – role play / case scenarios
 |  |
| 10:30 – 10:45 a.m.  | TEA |  |
| 10:45 – 1:00p.m.WARD | Practice in KMC ward/NICU/OB Ward |  |
| 1:00– 2:00 p.m. | LUNCH |  |
| 2:00 – 3:30 p.m. |  |  |
| 3.30-5.00pm | Class room discussion: Danger signs and common problems of LBW (videos); role of a counselor in facilitating QI of LBW in facilities / home |  |

**Day 3: Wednesday**

|  |  |  |
| --- | --- | --- |
| **Timings** |  | **Facilitator** |
| 9.00-10:30 a.m. | Discharge counseling of a LBW (Class room using ALPAC)* Warmth
* Danger signs
* KMC
* Breast feeding
* Prevention of infection – addressing traditional practices

Follow upCounseling a mother and family member for Discharge* Demonstration
* Do’s and don’ts at home

Practice of counseling with feedback |  |
| 10:45– 1:00 p.m. | Practice in the ward  |  |
| 1:00 – 2:00 p.m. | LUNCH |  |
| 2:00 – 4:00 p.m. | Breast feeding* Physiology
* Advantages
* Position
* Attachment
* Expression of breast milk
* Cleaning of articles
* Feeding with a pallada
 |  |
| 4:00 – 5:00 p.m. |  |  |
| **Day 4 -Thursday**  |
| 9.00-10.30am |  |  |
| 10:30 – 10:45 a.m.  | TEA |  |
| 10:45-12.00 p.m.  |  |  |
| 12:00 – 1:00p.m. | *
 |  |
| 1:00 – 2:00p.m. | LUNCH |  |
| 2:00– 5:00 p.m. | Practice in KMC ward/NICU (Breast feeding counseling ) |  |
| **Day 5-Friday**  |
| 9.00-10.00am | Antenatal care of mothers* Antenatal visit
* Diet and rest
* Danger signs during pregnancy
* Risk factor for preterm labour and institutional delivery
* Antenatal KMC counseling
 |  |
| 10-11.00 | Postnatal care of mothers* Diet and rest
* Social and cultural practices
* Danger signs in post-partum period

Problems related to breast feeding |  |
| 11.00 – 11:15 a.m.  | TEA |  |
| 11:15 – 1:00 p.m.  |  |  |
| 1:00 – 2:00 p.m. | LUNCH |  |
| 2:00 – 5:00 p.m.WARD | Practice in KMC ward/NICU (Antenatal and postnatal counseling ) |  |
| **Day 6-Saturday**  |
| 9.00-10.30am |  |  |
| 10:30 – 10:45 a.m.  | TEA |  |
| 10:45 – 11:45a.m. |  |  |
| 11.45 – 1.00 p.m. |  |  |
| 1:00 – 2:00 p.m. | LUNCH |  |
| 2:00 – 5.00p.m. | Practice in KMC ward/NICU (Group health education on KMC) |  |

**Class room -27 hours**

**Practical - 15 hours**

**Total – 42 hours/ 6 days (Monday to Saturday)**