



Date:		Unit:	
Health care worker- Name:		Designation:	
Trained in HBB: Y / N		Year:	
Month:			

Non-Compliant (NC) Compliant (C) ** Critical items

Equipment required:

- | | | |
|--------------------------------------|-----------------------------------|---------------------------------|
| 1. Resus. Mannequin | 2. Resuscitation device (Ambubag) | 3. Size 0 and 1 round facemasks |
| 4. Size 6,8 and 10 suction catheters | 5. Handspray | 6. Stethoscope |
| 7. Two towels/ blankets | 8. Cap | 9. Cord ties /clamp |

State: "You are called to assist the birth of a term baby. There are no complications in the pregnancy, mother is fully dilated. Introduce yourself and show what you will do"

	NC	C	Comment
Prepares for birth			
1. Introduces herself and prepares the mother			
2. Identifies a helper			
3. Makes an emergency plan			
4. Prepares the area for delivery (Clean, warm and well lit)			
5. Cleans hands			
6. Prepares an area for ventilation –turns resuscitator on and ensures there is a temp probe			
7. Checks equipment-suction, oxygen			
8. Checks that resus trolley has been checked & is easily accessible			
9. Checks duck billed valve on resus device is present			
10. Checks pressure release valve is working			
11. Checks there are no leaks in the resus device **			

Give baby to health care worker and say, "The baby is delivered onto the mothers abdomen. Show how you will care for the baby."

Golden minute

- | | | | |
|--|--|--|--|
| 12. Dries thoroughly and removes wet cloth | | | |
| 13. Covers with warm, dry towel and covers head | | | |
| 14. Assesses breathing/crying (Asks or looks for breathing) ** | | | |

State: "Baby is crying."

Monitors with Mother

- | | | | |
|---|--|--|--|
| 15. Securely attaches the baby skin to skin, with the neck extended | | | |
| 16. Asks mother to continue feeling baby's breathing and assessing colour | | | |
| 17. Communicates with mother and reassures | | | |
| 18. Clamps and cuts the cord after a minimum of 1-3 minutes | | | |
| 19. Assists mother with the establishment of breastfeeding | | | |

Totals: X0 X1

Total: /19*

Percentage:

Assessed By: Print **Sign:**

*** Must achieve 80%**

Use the questions below to help the participant reflect on his or her own performance and then provide feedback.

1. What happened at the birth?
2. Did you follow the Action Plan?
3. What went well and what could have gone better?
4. What did you learn?
5. What will you do differently next time?