

ENC FIRE DRILL: No. 6

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 (Ambuba	g) 3. Size 0 and 1 round facemasks				
4. Size 6,8 and 10 suction catheters 5. Handspray	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 NC	C Comment				
Prepares for birth					
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 resuscitaire 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 and is not cryin	ng and appears limp. 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 not breathing."					
15. Positions skin to skin on mothers chest with neck extended					
16. Clears airway (if meconium or secretions present)					
17. Stimulates breathing by rubbing the back					
18. Assesses breathing (Asks or looks for breathing) **					
State: "Baby is not breathing."					
19. Cuts cord and moves to area for ventilation					
20. Starts ventilation within the golden minute					
(at seconds)					
21. Ventilates at 40-60bpm (breath 2,3, breath2,3) for 1 minute **					
22. Assesses breathing (Asks or looks for breathing) **					
State: "Baby is not breathing."					
Improves Ventilation					
Improves Ventilation 23. Continues ventilation.					
Improves Ventilation 23. Continues ventilation. 24. Calls for help					
Improves Ventilation 23. Continues ventilation. 24. Calls for help State: "How would you assess the effectiveness of your bagging?"					
Improves Ventilation 23. Continues ventilation. 24. Calls for help State: "How would you assess the effectiveness of your bagging?" 25. Looks for chest movement **					
Improves Ventilation 23. Continues ventilation. 24. Calls for help State: "How would you assess the effectiveness of your bagging?" 25. Looks for chest movement ** 26. Looks for improved colour					
Improves Ventilation 23. Continues ventilation. 24. Calls for help State: "How would you assess the effectiveness of your bagging?" 25. Looks for chest movement **	ventilation?"				

Improves Ventilation cont.		NC	С	Comment	
29. S- Suctions **					
30. O-Opens mouth slightly					
31. P-Pressure increase **					
32. A-Alternate airway					
33. Assesses breathing (Asks or looks for I	oreathing)				
34. Assesses heart rate (Asks or listens for	heart beat)				
State: "The baby is still not breathing and the heart rate is 60bpm. Another nurse is available to assist you"					
Commences advanced resuscitation					
35. Continues ventilation.					
36. Adds oxygen					
37. Asks assistant to commence cardiac co	ompressions				
38. Places thumbs midline half way between nipple line and xiphisternum with fingers tightly wrapped around chest. **					
39. Compressions and ventilation given at a rate of 3 compressions to 1 breath (1 and 2 and 3 and breath and) **					
40. Compresses chest by 1/3 rd					
41. Continues compressions and ventilation for 30 seconds					
42. Assesses breathing (Asks or looks for breathing)					
43. Assesses heart rate (Asks or listens for heart beat)					
44. Assesses colour/saturations					
State: "The baby has started breathing & the heart rate is 120bpm. The baby is now pink. Describe what you would do now"					
On-going management					
45. Commences baby on nasal prong oxyg	gen				
46. Monitors closely for apnoea/desaturations					
47. Arranges for urgent transfer to Neonatal unit.					
48. Informs mother of change in condition and reassures					
Totals:		X0	X1		
Total:			/48 *		
Percentage:					
Assessed By: Print	Sign:				

^{*} Must score 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?