

*Helping Babies Breathe*SM

THE GOLDEN MINUTESM



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American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDRENSM



An Introduction to Helping Babies BreatheSM

Helping Babies Breathe (HBB) is an evidence-based educational program to teach neonatal resuscitation techniques in resource-limited areas. It is an initiative of the American Academy of Pediatrics (AAP) in consultation with the World Health Organization (WHO) and in collaboration with the US Agency for International Development (USAID), Saving Newborn Lives/Save the Children, the National Institute of Child Health and Development (NICHD), and a number of other global health stakeholders.

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Addressing the Challenge

The WHO estimates that one million babies die each year from birth asphyxia (the inability to breathe immediately after delivery). The HBB curriculum addresses this challenge as well as helping to move forward Millennium Development Goal #4 (MDG4)—reduction of child mortality by two thirds from 1990 to 2015.

The objective of HBB is to train birth attendants in developing countries the essential skills of newborn resuscitation, with the goal of having at least one person who is skilled in neonatal resuscitation at the birth of every baby.

The Golden MinuteSM

A key concept of HBB is *The Golden Minute*. Within one minute of birth, a baby should be breathing well or should be ventilated with a bag and mask. *The Golden Minute* identifies the steps that a birth attendant must take immediately after birth to evaluate the baby and stimulate breathing.

One Part of Newborn Care

The HBB curriculum is designed for use as part of a coordinated educational approach to early neonatal care and can be effectively combined with other curricula. It can be locally taught to birth attendants in diverse venues and locations. HBB focuses on practices that all persons who care for babies at birth can learn to care for healthy babies, and assist babies who do not breathe on their own.

Systems-based Focus

HBB is much more than a classroom-based educational program. Its system-based focus is designed to change clinical practice across systems of care. In order to impact MDG 4, medical units must be ready for ongoing training and practicing of the skills learned to help babies breathe at birth. HBB training should be considered as part of continuing practice improvements for facilitators, learners, and health systems.



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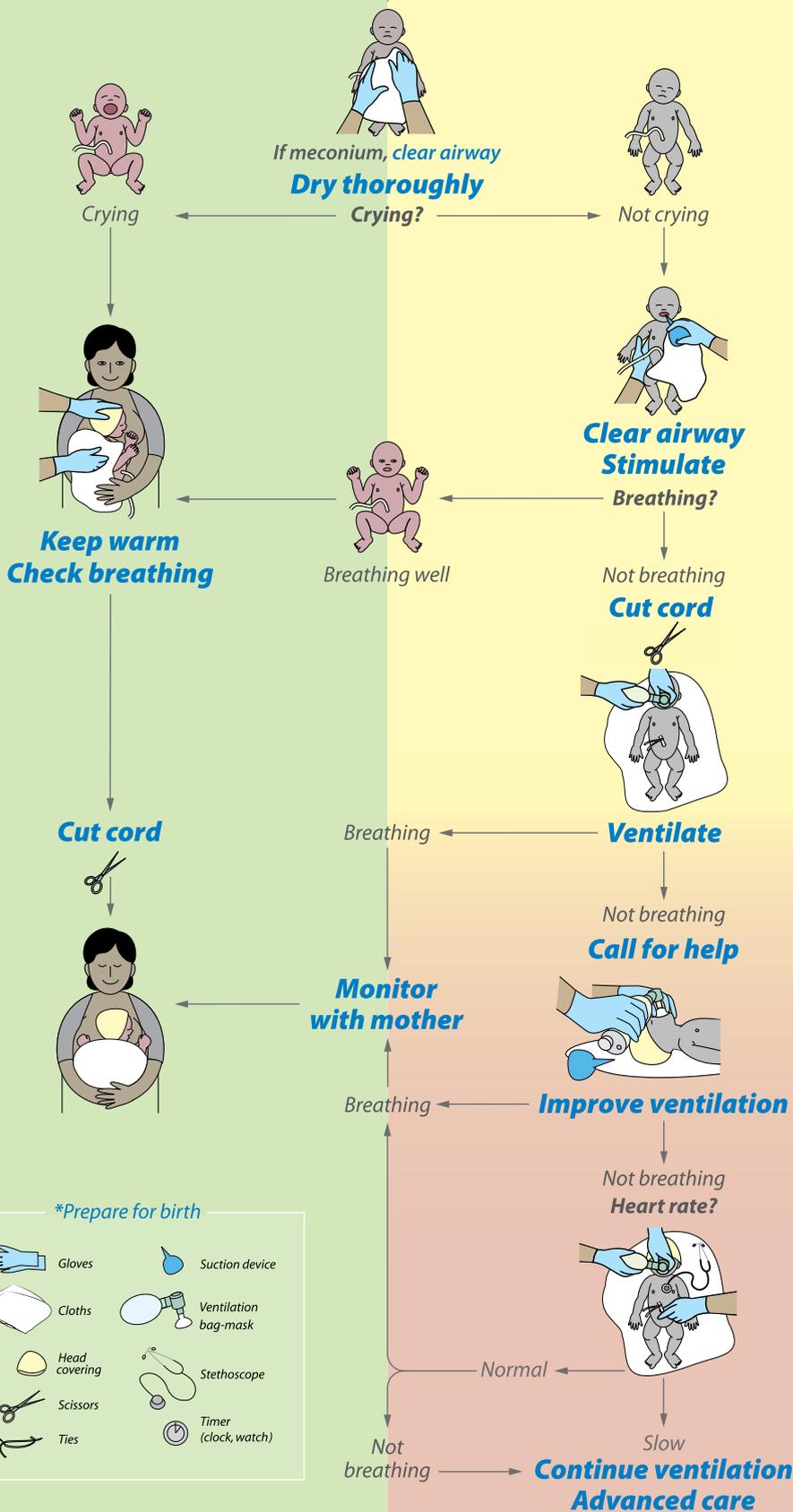
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Action Plan Helping Babies BreatheSM

Prepare for birth*

Birth



The Golden MinuteSM

60 sec

- *Prepare for birth
- Gloves
 - Cloths
 - Head covering
 - Scissors
 - Ties
 - Suction device
 - Ventilation bag-mask
 - Stethoscope
 - Timer (clock, watch)

The Educational Design of Helping Babies BreatheSM



The HBB Action Plan

The HBB Action Plan uses pictures and only a few words to guide birth attendants through the evaluation, decision, and action steps in neonatal resuscitation. The HBB Action Plan wall poster is the core of the educational program and the guide for clinical care in the workplace. The wall poster can be used for teaching in the classroom, and it can be hung in the delivery area.

Three color zones signify the level of help needed:

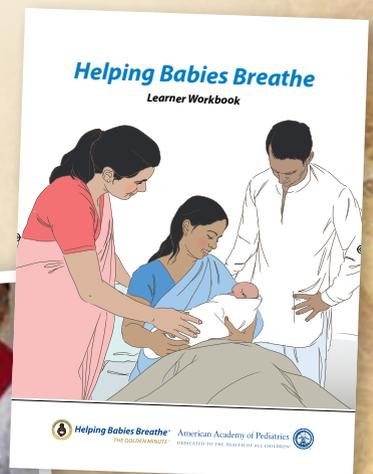
- Green – routine care
- Yellow – initial steps of help to breathe
- Red – continued ventilation and possible need for advanced care

The HBB Learner Workbook

The HBB Learner Workbook presents the knowledge needed to resuscitate a baby and provides exercises to build skills and integrate knowledge and skills into performance. It has visual links to the steps in the HBB Action Plan and the HBB Facilitator Flip Chart. Group discussion questions provide an opportunity for facilitators to explain local variations in practice and help learners apply their skills in the workplace.

Additional resources for practice and reference can be found at the end of the HBB Learner Workbook:

- Full action plan with six case scenarios
- Individual case scenarios to provide additional practice
- Recognizing danger signs
- Care of pre-term birth
- Encouraging early breastfeeding and monitoring after help to breathe
- Technique for hand cleaning
- Cleaning and testing of resuscitation equipment
- Glossary of terms
- Apgar scoring system



Helping Babies Breathe

Facilitator Flip Chart



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The HBB Facilitator Flip Chart

The HBB Facilitator Flip Chart has information on both sides of each page:

The front illustration faces the learners and has a pictorial representation of an evaluation, action step, or skill. It also has an inset of the action plan with the corresponding step circled in red. The back pages serve as a presentation guide for the facilitator with a consistent format.

- **Present and demonstrate** the main points of knowledge and skills presented in the front illustration and text on the corresponding page of the learner workbook.
- **Practice with the Action Plan** encourages learners to refer to the action plan and to practice individual evaluations and skills.
- **Ask the learners** to review the *Check Yourself* questions from the learner workbook.
- **Background and educational advice** provides additional information for facilitators to amplify the main points and some issues that may have variations in practice.

Exercises and group discussion questions end each color-coded section of the HBB Facilitator Flip Chart:

- Preparation for Birth
- Routine Care
- *The Golden Minute*SM
- Prolonged Ventilation with Normal or Slow Heart Rate

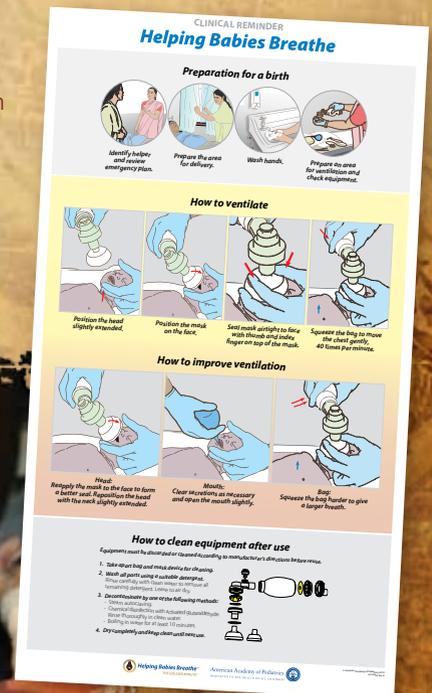
Learner evaluations (written/verbal and objective structured clinical evaluations) can be found at the back of the HBB Facilitator Flip Chart.

- **The Written/verbal Evaluation** covers the knowledge to be gained in Helping Babies Breathe. Learners may complete the evaluation by reading the questions and answering on a printed form, or facilitators may choose to read the questions aloud to an individual learner or group of learners.
- **The Bag/mask Performance Evaluation** should be successfully completed by each learner.
- **The Objective Structured Clinical Evaluations (OSCEs)** may be used as practice and/or qualifying evaluations. OSCE A examines the skills and decision-making in Routine Care and the initial steps of *The Golden Minute*SM. OSCE B examines the skills of bag/mask ventilation and assessment of heart rate.

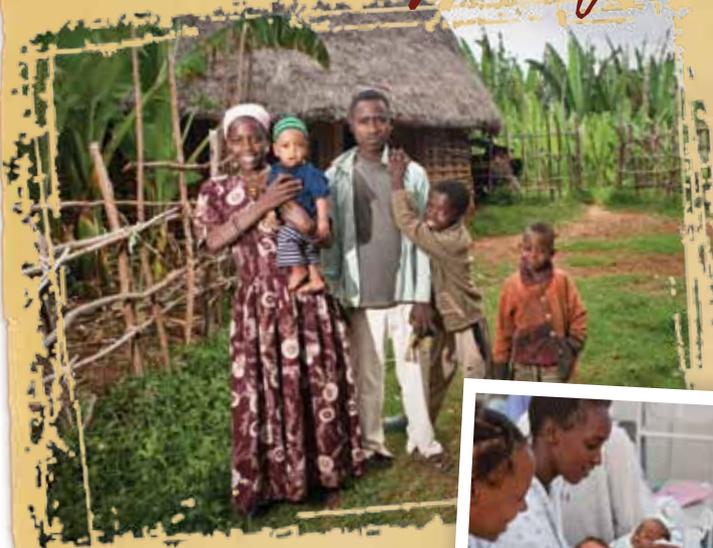
The HBB Clinical Reminder Poster

The HBB Clinical Reminder Poster emphasizes key actions in the HBB curriculum that should be practiced often. It is designed for use during and after the course and is a helpful reminder if placed along with the HBB Action Plan on a wall in the medical unit, perhaps in an area set aside for regular practice. Pictorial guides help to reinforce ongoing learning of:

- Preparation for birth
- How to ventilate
- How to improve ventilation
- How to clean equipment after use



Implementing Helping Babies BreatheSM



Global Development Alliance

Helping Babies Breathe is being implemented through a Global Development Alliance (GDA) between the American Academy of Pediatrics; the US Agency for International Development (USAID); Laerdal Medical, a manufacturer and distributor of resuscitation devices, who will increase access to high-quality, affordable resuscitation kits; the National Institute of Child and Human Development, a USG agency that will lead the evaluation of the alliance in selected countries; and Save the Children, which provides global technical expertise through its Saving Newborn Lives program and will represent civil society. USAID provides technical expertise in newborn health and will support the rollout and scale-up of the alliance through its Implementing Partner Programs: Maternal and Child Health Integrated Program (MCHIP), Health Care Improvement (HCI), HealthTech (PATH), and CORE Group.

Key principles of the Alliance include inclusiveness, supporting country ownership, encouraging integration with other maternal and child health programs, and commitment to shared goal, results, risks, and recognition. Through the GDA, partners plan to initiate country-wide implementation of HBB in targeted MDG 4 countries.

In order to accomplish country-wide implementation, the American Academy of Pediatrics encourages other interested organizations to work with GDA partners to expand HBB

training and programmatic scale-up. For this reason, HBB learning materials will only be available to other groups when the above principals are honored, sufficient planning is in place, and a condensed application has been approved. The application will require:

1. A defined relationship with the Ministry of Health
2. Demonstration of a documented alliance with a partner who has country level implementation experience
3. Proof of resources for sufficient scale-up and a completed analysis for implementation

Planning for Implementation of Helping Babies Breathe

The anticipated time to prepare to begin the training: 9-12 months. This may be longer or shorter depending on factors such as neonatal care and resuscitation programs that are already being taught locally, the role of the Ministry of Health, etc.

Assessing the environment for program readiness includes identifying local partners, working with the Ministry of Health, and identifying medical facilities where training can be provided. Experienced health care facilitators need to be identified to be trained as HBB master trainers and they should be representative of the disciplines to be trained. The facility should also commit to "owning" ongoing training. A system for data collection with capable staff support for effective administration is also necessary for ongoing training.

Initial planning after assessment includes determining what medical units will participate in HBB training and working with them regarding their infrastructure, needs, and expectations. Also necessary is working closely with the program manager and master training partners, determining time frames for training and the number of participants, facilitators, and course leaders. Developing a budget and obtaining sponsorship are instrumental at this point.

Helping Babies BreatheSM is made possible by an unrestricted educational grant from the Laerdal Foundation for Acute Medicine, Stavanger, Norway. Additional support has been provided by Latter-day Saint Charities and the US Agency for International Development.

For more information about Helping Babies BreatheSM please visit www.helpingbabiesbreathe.org.