

**2.3. RECOMMENDATION:**

**Should AUXILIARY NURSES administer oxytocin to prevent postpartum haemorrhage, using a compact, autodisable, prefilled injection device (CPAD) such as Uniject?**

**Problem:** Poor access to treatment for prevention of PPH

**Option:** Auxiliary nurses administering oxytocin using a CPAD to prevent PPH

**Comparison:** Care delivered by other cadre or no care

**Setting:** Community/primary health care settings in LMICs with poor access to health professionals

Recommendation	<i>We recommend against the option</i>	<i>We suggest considering the option only in the context of rigorous research</i>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	We recommend this option. We suggest using this where auxiliary nurses are already an established cadre.		
<b>Justification</b>	There is insufficient evidence on the effectiveness of using auxiliary nurses to administer oxytocin to <u>prevent</u> postpartum haemorrhage using a CPAD. Possible undesirable effects include use that is not timely for prevention of haemorrhage; failure to diagnose a second foetus prior to administration; and inappropriate use for other purposes. However, this intervention is probably acceptable and feasible. In addition, the panel feels that the benefits probably outweigh the harms; that minimal clinical decision making is required, and that the intervention may reduce inequalities by extending care to underserved populations.		
<b>Implementation considerations</b>	<p>The following should be considered when using auxiliary nurses to administer oxytocin:</p> <ul style="list-style-type: none"> <li>- The relevant professional bodies should be involved in the planning and implementation of the intervention to ensure acceptability among affected health workers</li> <li>- The distribution of roles and responsibilities between auxiliary nurses and other health workers needs to be made clear, including through regulations and job descriptions</li> <li>- Changes in regulations may be necessary to support any changes in auxiliary nurses' scope of practice</li> <li>- Implementation needs to be in the context of a comprehensive remuneration scheme, in which salaries or incentives reflect any changes in scope of practice. Giving incentives for certain tasks but not for others may negatively affect the work that is carried out</li> <li>- Referral systems need to function well, i.e. financial, logistical (e.g. transport) and relational barriers need to be addressed. Specifically, local health systems need to be strengthened to improve quality of care at the first referral facility</li> <li>- Supplies of drugs and other commodities (e.g. delivery kits) need to be secure</li> <li>- Responsibility for supervision needs to be clear and supervision needs to be regular and supportive</li> <li>- Auxiliary nurses and their supervisors need to receive appropriate initial and ongoing training</li> </ul>		
<b>Monitoring and evaluation</b>	-		
<b>Research priorities</b>	- Studies assessing the effects and the acceptability of using auxiliary nurses to administer oxytocin are needed		