

11.1, 11.2 and 11.3. RECOMMENDATION:

Should AUXILIARY NURSE MIDWIVES (a) administer intravenous fluid for resuscitation as part of postpartum haemorrhage treatment, (b) perform internal bimanual uterine compression for postpartum haemorrhage, and (c) perform suturing for minor perineal / genital lacerations?

Problem: Poor access to treatment for post-partum haemorrhage
Option: Auxiliary nurse midwives delivering a range of interventions to treat haemorrhage
Comparison: Care delivered by other cadres 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 with targeted monitoring and evaluation</i>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>We recommend these options. We suggest implementing these interventions where auxiliary nurse midwives are already an established cadre and where a well-functioning referral system is in place or can be put in place. These interventions should be operationalised in the context of the WHO PPH guidelines, which outline a comprehensive approach to managing PPH.</p>			
Justification	<p>There is insufficient evidence on the effectiveness of auxiliary nurse midwives delivering these interventions. However, the panel considered these interventions to be part of the core skills of auxiliary nurse midwives. In addition, they may be acceptable, are probably feasible and may also reduce inequalities by extending care to underserved populations.</p>		
Implementation considerations	<p>The following should be considered when using auxiliary nurse midwives to (a) administer intravenous fluid for resuscitation, (b) perform internal bimanual uterine compression, and (c) suture genital lacerations:</p> <ul style="list-style-type: none"> - The relevant professional bodies should be involved in the planning and implementation of the intervention to ensure acceptability among affected health workers - The distribution of roles and responsibilities between auxiliary nurse midwives and other health workers needs to be made clear, including through regulations and job descriptions - Changes in regulations may be necessary to support any changes in auxiliary nurse midwives' scope of practice - 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 - 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 - Supplies of drugs and other commodities need to be secure - Responsibility for supervision needs to be clear and supervision needs to be regular and supportive - Auxiliary nurse midwives and their supervisors need to receive appropriate initial and ongoing training 		
Monitoring and evaluation	-		
Research priorities	-		