The present paper documents the recently introduced On-site Nurse Mentoring programme in Bihar, and is part of a wider study carried out by the National Health Systems Resource Centre to review the status of nursing in five Indian states.

Methods Our study involved primary data collection at state and block levels. This included in-depth discussions and interviews, with key stakeholders at nursing section at state level, State Health Society (SHS), Indira Gandhi Institute of Medical Sciences (IGIMS), and CARE India. Interviews also included interaction with trainees and block-level implementers and supervisors for the training programme.

Findings In Bihar, the pace and extent of nursing initiatives, many of them in early implementation stage, has been very encouraging. In 2011–2012, the SHS established a dedicated nursing section to strengthen the nursing cadre. Since its inception, the nursing section has extended its support and worked closely with relevant organisations resulting in effective collaboration in the state. One of these accomplishments is the on-site mentoring programme for nurses and auxiliary nurse midwives (ANMs).

This programme commences with a situation analysis of the skills infrastructure, and of equipment gaps at health facilities. Subsequently, mentoring teams visit the public health facilities and train a small cohort of nurses for one week each month over a 6–8 month period, using a combination of bedside teaching, simulations and theory.

Our study revealed that various essential skills imparted through this comprehensive training approach enabled participants to effectively perform tasks that they felt unaccomplished at performing earlier, either due to lack of knowledge, hands-on practical skills or both. Nurses also indicated that support and involvement of supervisors and medical officers to coordinate activities had a positive influence on their uptake of training. The supervisors and medical officers at the facilities observed that there had been a significant improvement in knowledge, skills and attitude of nursing staff post-training. They expressed apparent improvement in management of critical maternal and neonatal cases. As the training is offered on-site, with adequate handholding and supportive supervision, this generated confidence among participants and enabled them to perform clinical duties more efficiently.

In addition, an internal evaluation has shown the benefits of this approach with significant improvements in the active management of the 3rd stage of labour (8.6% to 75.0%), in kangaroo mother care (30.9% to 62.5%), breastfeeding (49.1 to 71.5%) and infection control (13.0% to 43.5%).

Discussion The hands-on, on-site training in familiar surroundings creates an enabling environment to practice and refresh clinical skills. The added improvement in infrastructure and equipment further ensures adequate application of these skills. After completing the pilot training programme in 80 public health facilities, the government of Bihar is now planning to scale up the On-site Nurse Mentoring programme across the state.

The On-site Nurse Mentoring programme model has been effective in management of critical maternal and neonatal cases. As a result, the Indian government has encouraged other states to replicate this initiation. Key factors for the success of this intervention in Bihar includes a needs-based training strategy, learning in familiar settings, a flexible curriculum, a participative approach and a collaborative approach between the health department and development partners.

However, movement of nurses across facilities and the lack of adequate support from senior staff act as barriers to the successful rolling out of the training programme. Trainees also express the need to have refresher training to maintain the continuum of learning.

OP-51 THE ON-SITE NURSE MENTORING PROGRAMME: A NEEDS-BASED NURSING INNOVATION IN BIHAR, INDIA

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Background Nurses and midwives act as the backbone of any public health system; their skills are critical in delivering quality health care. Bihar, a north Indian state, has considerable number of nurse vacancies. Besides, its newly graduated nurses do not possess necessary skills and competencies required for managing critical maternal and neonatal cases. Therefore, the state decided to focus on strengthening nursing skills in these areas.

While Bihar still has some way to go in ensuring high quality of nursing care, there is much that other states can learn from the significant innovation to improve nursing care by provision of on-site mentoring initiatives.

No competing interest.