

The Challenges of providing obstetric emergencies training in the Covid-19 pandemic

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Objective:

Preventable mortality and morbidity for mothers and babies is directly associated with poor teamwork, communication, and ineffective leadership as identified in previous MMBRACE-UK reports (Saving Lives, Improving Mothers' Care reports 2014, 2021). Research supports multi-disciplinary team (MDT) training and the use of obstetric emergencies training packages to run in-house courses such as PROMPT (Practical Obstetric Multi-Professional Training). This was identified and supported within the NHS England National Maternity Review: Better Births (2016) which emphasized the importance of multi-professional working and that 'those that work together should train together'. Enhancing and regularly updating skills and knowledge also improves the safety and quality of care provided.

This presentation describes how the Unit responded to the challenge of continuing to provide local multi-disciplinary training for obstetric emergencies during the Covid-19 pandemic.

Design:

This unit is a small District General with approximately 2,600 deliveries per year with all staff required to complete annual obstetric emergency training as per CNST mandate. Regular PROMPT was introduced to the unit in 2019 with initially four core trainers and subsequently expanded to include midwives, anaesthetists and obstetricians. The sessions include interactive lectures, small group simulation scenarios and skills drills.

Method:

Covid-19 introduced challenges to deliver socially distanced training in a safe, engaging and effective way. Initially this was via a PROMPT e-learning package which was replaced with virtual teaching via presentations and videos using Microsoft teams. This then progressed to hybrid teaching with face to face skills drills and simulation in smaller groups with PPE. Therefore, ensuring the maternity staff train together and the focus on communication, team work and co-ordination is not lost.

Results:

The majority of staff were compliant with annual updates both prior to and since the impact of Covid-19. Feedback has consistently been positive from all levels and staff groups but also highlights the value placed on face to face simulation and skills drills plus the professional multidisciplinary aspect to the sessions.

Conclusions:

Changing the way in which training is delivered to comply with Covid-19 recommendations has been challenging primarily in ensuring the provision for skills drills and team scenarios. Feedback has confirmed the significance of this and benefit in terms of improving and embedding practice. Staff shortages due to isolation and sickness have also impacted on attendance as has maximum room capacity and compliance with infection control measures. Strong leadership, enthusiasm and ownership of the local training have been imperative to its ongoing success.

References

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