

Multiprofessional simulation-based obstetric team training and the effect on perceived quality of care during pregnancy and childbirth

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Background



Many adverse events can be explained by ineffective teamwork and communication. The Dutch obstetric care system is organised in primary care (responsible for low-risk pregnancies) and secondary care (for high-risk pregnancies). About 70% of the pregnant women are referred to an obstetrician during pregnancy or labour, resulting in multiple medical handovers. There is increasing attention to 'patient-centered care' with patient-reported outcomes becoming important indicators of 'quality of care'. Previous research showed that women who had been referred during pregnancy reported lower perceived quality of care.

Question



Does multiprofessional simulation-based obstetric team training improve quality of care as perceived by patients?

Methods



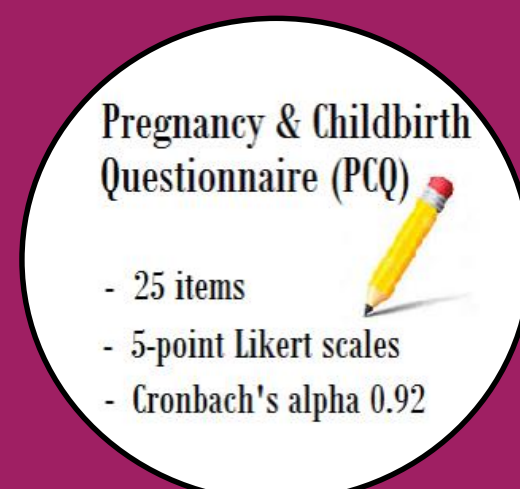
One-day training with 4 scenarios in a medical simulation centre. Five multidisciplinary teams of 15 care providers representing the obstetric collaborative network. The training focused on non-technical skills using SBAR-communication and CRM (Crew Resource Management).

Assessment



The 25-item Pregnancy & Childbirth Questionnaire (PCQ) was used to measure 'perceived quality of care' before (sample I, N = 76) and 3 months after the team training intervention (sample II, N = 68).

Results



Mean PCQ score after training (sample II, Mn \pm SD = 108.9 \pm 10.9) significantly higher than before (sample I, Mn \pm SD = 103.5 \pm 11.6) ($t = 2.75$, $P < 0.01$).

Medium effect size (Cohen's $d = 0.5$)

Items with largest increase were about: communication between care providers, clear leadership, involvement in planning, and better provision of information

Conclusion



Multiprofessional simulation-based obstetric team training might improve quality of care as perceived by women who recently gave birth.