
Training

Introduction

The Safe Births report stated ‘Staff that work together must train together’. This approach not only helps staff to recognise their unique but complementing roles but also helps to remove barriers to effective communication and teamwork. The Safe Births report recommended the use of simulation-based training, which assesses clinical skills as well as communication and teamworking. Skills and drills training within the staff’s own unit would be most beneficial.

At the core of a safe team is a well-trained and skilled workforce. This could not be more essential in identifying and responding to emergency situations within maternity. Both midwives and junior doctors can often feel ill-equipped or lacking in confidence when presented with an emergency situation in the hospital or the community. Indeed, with childbirth taking place at home, in midwifery-led units, or out of hours, staff need to be effectively prepared for any eventuality.

Safer Births projects to improve staff training

The Safer Births maternity team at Ipswich Hospital NHS Trust (IHT) was committed to supporting community midwives in home deliveries through a series of training programmes and initiatives. Home birth deliveries are often in high demand. However, it requires the skills and confidence of community midwives to not only deliver babies unaided in such a setting, but to recognise early on if the labour requires medical attendance or intervention. While a large number of home births are without complications, and are safe, a clinical incident in the home can have dire consequences for mother and baby.

The aim of the Safer Births project delivered by the team at IHT was to strengthen the confidence and skill of the workforce around home births. Improving teamworking, in particular communication, between the hospital and community teams, was identified as a key issue at an awayday for senior midwives from both teams. This had a positive outcome, helping to clarify roles and providing networking opportunities. More importantly, it created a sense of teamwork instead of a ‘them and us’ culture. A similar team approach was also used to update the emergency guidelines. The obstetric emergency training programme was revised and developed further to include the use of Situation, Background, Assessment, Recommendation (SBAR), and emergency scenarios delivered within the community setting were acted out in training. The improvement in training has led to increased confidence among community midwives and improved teamworking.

The maternity team at South Warwickshire NHS Foundation Trust developed training for labour ward co-ordinators and reviewed and developed the monthly multidisciplinary clinical incidents meeting. Although lessons learned from these meetings were published in their bimonthly newsletter, similar clinical incidents continued to occur. Following consultation with staff, they changed the format of the

meetings to include more interaction through the use of structured questions, as well as clearly defined learning outcomes. In addition, junior staff were specifically targeted to attend and take part.

Other maternity teams within the Safer Births programme implemented different initiatives to improve the skills of staff within labour wards, for example, cardiotocography (CTG) training programmes. Northampton General Hospital NHS Trust reviewed staff training around CTG interpretation. This included the redesign of prompting stickers to help interpret CTGs. The maternity team at Medway NHS Foundation Trust introduced a new multidisciplinary CTG training day which included a pre-course training manual and an assessment test at the end. North Middlesex University Hospital included CTG training on all emergency skills and drills days. Mid Cheshire Hospitals NHS Foundation Trust reviewed and developed its existing buddy system so more experienced midwives work with junior midwives to review CTG recordings and the resulting course of action. This helped reduce CTG misinterpretation.

Medway NHS Foundation Trust introduced a new multidisciplinary training package called Practical Obstetrics Multi-Professional Training (PROMPT), in conjunction with other tools such as SBAR and Modified Early Obstetric Warning Score (MEOWS) to create a more realistic representation of an emergency. Such joint training programmes can help to break down barriers between professional groups and departments, and provided a greater insight into professional cultures and pressures, in a non-threatening environment.

Key points for improving training

- **Undertake a training needs analysis for all key staff groups.**
- **Review current training including schedules and content to make the most of opportunities for joint training.**
- **Adopt a multidisciplinary approach to reviewing, developing and delivering training programmes.**
- **Use lessons gained from clinical incidents to aid and inform training sessions.**
- **Embed tools used in practice such as SBAR and MEOWS into training sessions.**
- **Develop a framework around training to support staff and address poor performance or poor attendance.**

This section provides a brief overview of some of the tools used by the Safer Births maternity teams to help improve training. The tools considered are:

- **Practical Obstetrics Multi-Professional Training (PROMPT)**
- **cardiotocography (CTG) online training programme**
- *see also* 'Midwifery team awayday' on page 28 as this tool can be used for both teamworking and training.

| Tool | |
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| PRACTICAL Obstetrics Multi-Professional Training (PROMPT) | |
| Description | The PROMPT course is a multi-professional training package that enables midwives, obstetricians and anaesthetists to implement a fully evaluated obstetric emergencies course within their own maternity units. |
| Benefits | <ul style="list-style-type: none"> ■ Provides a framework for multi-professional training programmes. ■ Can be used for developing teamwork. ■ Endorsed by professional bodies such as the Royal College of Midwives and the Royal College of Obstetricians and Gynaecologists. ■ Its use is in line with national recommendations from bodies such as the National Health Service Litigation Authority (NHSLA), The King's Fund and CMACE. ■ It is used worldwide, eg, in the United Kingdom, the United States, Italy, Australia, New Zealand, Hong Kong, Singapore, Fiji. |
| How is it used? | <ul style="list-style-type: none"> ■ It includes fully evaluated obstetric emergencies in the format of interactive drills and workshops for use in maternity units as part of a training programme. ■ The package includes manuals, a 'train the trainer' course, and CD of lectures/interactive lectures. ■ A follow-up support package is available and includes email support and 12 months' telephone support. ■ The package is delivered as part of the ongoing training programme for staff. ■ The structure of the day can be formatted around the PROMPT material. ■ Staff must be given the opportunity to evaluate workshop effectiveness. ■ Areas identified for further improvement can be included in future workshops. |
| Tips for use | <ul style="list-style-type: none"> ■ Consult widely with staff to get co-operation to attend and use materials. ■ Ensure PROMPT is incorporated in teaching sessions and educational programmes/training. |
| Where to find this tool | www.prompt-course.org |

Tool**Cardiotocography (CTG) online training programme****Description**

Continuous cardiotocography (CTG) is a form of electronic fetal monitoring for assessment during labour. A growing number of organisations are developing training tools to equip staff to interpret the CTG traces. These training tools are being made available online.

The website package provides a structured and flexible method for training staff in monitoring and interpreting CTG recordings.

Benefits

- Enhances CTG interpretation and improves staff performance and practice.
- Real-life cases are often used.
- Staff receive feedback on their actions.
- Administrators can set assessments with pass marks.

How is it used?

- The designated administrator is issued with a clear start-up guide specific to the type of package used.
- The administrator includes the trainees/users into an account by adding their names and email addresses and activates their accounts.
- Users are sent their login details.
- The administrator assigns the trainees into groups based on either their skillsets or their roles, eg, all midwives, junior doctors. This is useful for assigning CTG tests or practice cases.
- The administrator monitors the uptake of the programme and the progress of staff, identifying any areas for further training for individual staff or groups of staff.

Tips for use

- Give staff briefing sessions before online training to allay anxieties and provide an opportunity to ask questions.
- Develop a performance framework around its use, eg, pass marks, and actions to be taken if staff perform below the pass mark, eg, further tutoring, coaching or supervision.
- Consider a team approach to the programme – in practice it is the norm for CTG interpretation to take place as part of a team intervention.
- Incorporate CTG online training into the training schedule.
- Appoint a designated administrator who has the authority and respect of staff – they will have access to staff results, etc.
- Consider appointing support staff to help with monitoring uptake, and sending reminders, etc, to the staff.
- Ensure there is IT support to address any online/technical difficulties staff may have.

Where to find this tool

Information on CTG training is available from a number of places including:

www.rcog.org.uk/stratog/elfh-resources

www.e-Ifh.org.uk/projects/efm/index.html