Training for Obstetric Emergencies

Martin Sowter
National Women's Health
promptnz@gmail.com
Why Train?

“The MoH recommends that all staff involved in the care of pregnant women should undertake regular training in the management of obstetric emergencies”

PMMRC 2006
Key Issues

- 50-120 near misses per maternal death (UK data)
- Substandard care in 20-70% of maternal deaths (CEMACH)
- Recurring problems
  - Poor preparedness
  - Poor communication
  - Poor leadership
  - Poor knowledge – medical and procedural
What’s Available in NZ

- **ALSO** – Advanced Life Support in Obstetrics
- **MOET** – Managing Obstetric Emergencies and Trauma
- **PROMPT** – Practical Obstetric Multi-Professional Training
ALSO – **Advanced Life Support in Obstetrics**

- Developed 1991 by University of Wisconsin dept of Family Medicine
- Aimed at Doctors and midwives
- Run in USA, UK, Canada, China, Australia, across developing world
ALSO – www.also.co.nz

- Cost $1100
- Run in off-site at weekends over two days
- RANZCOG and MCNZ recognised
- Lectures and skill stations
- Includes neonatal resuscitation, instrumental delivery, fetal monitoring, pre-term labour
- 60 courses so far in Australia/NZ
MOET

- Managing Obstetric Emergencies and Trauma
- Run by (Advanced Life Support Group from UK
- Developed from ATLS and BATLS
- First course 1997
- Aimed at senior doctors
- First Australian course 2009
MOET – www.moetaustralia.com.au

- Three day course
- Cost - $2500
- Sim Centre
- Also covers trauma, twins, airway management, psychiatric illness
PROMPT - www.prompt-course.org

- Practical Obstetric Multi-Professional Training
- Developed in Bristol 2000
- TTT course every 3 months at RCOG
- 50% of UK trusts run PROMPT
- *All* staff must attend *two* yearly
- Courses run in NZ, Australia, Hong Kong, USA, South Pacific
Safe Births – Everybody’s Business

- **The Kings fund 2008** – [www.kingsfund.org](http://www.kingsfund.org)
  
  - “Teams that work together should also train together, with regular training taking place on the labour ward rather than on 'away days'…”
  
  - “Simulation-based training, which assesses clinical, communication and team skills within a single exercise, should be offered to all maternity staff, ideally within their own units.”
PROMPT – The Model

- All inclusive – not for experts
- Drill-based learning on delivery suite
- Emphasis on local relevance
- Emphasis on teamwork and leadership
- Units “own” the course
- Cheap as possible
- Kept as realistic as possible
PROMPT - New Zealand

- 12 Auckland courses since 2006
- Cost – Drs. $200, MWs $100
- 160 midwives and 50 doctors attended
- Courses in Christchurch and Tauranga
- TTT at PSRH and RANZCOG meetings 2009
- Soon - Middlemore, Wellington, Nelson, Dunedin
- Linking in with PEMOC (Pacific focused course)
PROMPT - Scenarios

- Blood loss estimation exercise
- Lectures, videos, drills
- Four multi-disciplinary teams
  - Maternal collapse
  - Eclampsia
  - Post-partum haemorrhage
  - Shoulder dystocia
  - Breech
PROMPT Themes

• Teamwork
  – How teams work

• Leadership
  – Types of leader, helicopter view

• Communication
  – Formulated, addressed, sent, heard, understood,

• Situational Awareness
  – Thinking “ahead of the plane”
Misoprostol

- Give 800ug (4 tabs)
- Give rectally
- Comes as 200ug hexagonal tablets
- On drug room shelf as Cytotec
Five Requirements for Communication

- It must be FORMULATED
- It must be ADDRESSED
- It must be SENT
- It must be HEARD
- It must be UNDERSTOOD
Chaos Training- nothing is too obvious...
Why Use PROMPT Model

- Cheaper
- More inclusive
- Local knowledge
- Troubleshoot protocol problems
- Well evaluated
NZ - The Future?

- Courses Complementary
- MOET – SMOs, Senior trainees
- ALSO – SMOs, RMOs, IMWs
- PROMPT – Regular drill based training at all NZ delivery units
  - Audited attendance of all staff
  - Funded by DHBs or MoH