Background

Globally, every Minute a woman dies from complications related to pregnancy or childbirth. The United States continues to rank poorly compared to other countries.

Evidence and data have shown 50% of maternal deaths reported could have been Prevented! (Green, Rider, Ratcliff, & Woodring, 2015)

Purpose

Reduction in Maternal Mortality and Morbidity
The purpose of this quality improvement project was to implement a best practice Obstetric Rapid Response Team (OB-RRT)

Sample

- Eighty-five nurses with at least two years of labor and delivery experience ranging from 2–40 years
- Emergency Backpack Kit equipped with OB response supplies
- Response Team members: Four primary responders and back-up team

Methods

Roles and Responsibilities

Quarterback: (L&D Charge Nurse) Oversees all Code-OB emergencies
Running back: (L&D RN) Carries emergency backpack kit, assists with IV and medications
Center: (L&D RN) Assists physicians with care of patient
Wide Receiver: (L&D RN) Documents all activities of code
Back-up Team: Comprised of L&D RN’s who back-fill for primary members when responding to an OB Emergency

Education & In Situ Drills: Educational PowerPoint and In Situ Drills describing various obstetric emergencies over a four week period

Results

- Overall outcomes showed a strong confidence of the nurses and staff during the implementation phase
- Nursing and medical staff expressed positive feedback and willingness to learn
- Student Satisfaction and Self-Confidence in Learning questionnaires were completed by eighty-five of the eighty-seven eligible nurses for the team. This was rated on a 5-point Likert scale from 1 (strongly disagree) to 5 (strongly agree)

Strongly Agree = 86%
Agree = 14%

Implications for Nursing

- Obstetric emergencies require immediate action
- Collaboration between multiple professionals within a healthcare team
- Clinical guidelines (ACOG & AWHONN)
- Education, training, and communication of the team resulted in positive patient outcomes
- Effectively reducing complications such as maternal hemorrhage, infant hypothermia, and extensive financial impact for both the family and the healthcare system

References