

# Care of women who have experienced a stillbirth: A quality improvement project

Authors: Sanele Lukhele<sup>1</sup>, Christél Jordaan<sup>2</sup>, Christa van der Walt<sup>3</sup>,

<sup>1</sup>University of Johannesburg, South Africa, <sup>2</sup>Private Midwifery Practice,<sup>3</sup> previously from University of the Northwest, South Africa

## Summary

This quality improvement project was conducted in a district hospital in Johannesburg. The project entailed improving the training of midwives regarding caring for women who are experiencing a stillbirth and compiling a memento booklet at the birth to ensure that the woman has a memory of her baby.

## Key words

Maternal and Child Health, Stillbirths, Memento.

## Introduction / Background

Globally there are 2.6 million stillbirths occurring every year with 7500 stillbirths taking place daily. It is therefore highly imperative to train midwives on bereavement care to be able to care for families who are experiencing a stillbirth. The training of healthcare professionals often focuses on disease prevention and management, however, there is a minute focus on palliative and bereavement care.

Mothers who have experienced a stillbirth have identified mementoes as one of the interventions that have assisted them to deal with their grief. In line with this recommendation by women who had experienced a stillbirth, a memento booklet was designed which includes the following: name of the baby, date of birth, time of birth, weight of the baby, length of the baby, and head circumference of the baby at birth. The booklet also has a space for the baby's footprints.

## Methods

The Kouzes and Posner's (KP) Leadership Model underpinned this quality improvement project. The principles of the KP model guided all engagement with stakeholders and implementation of the project. Below are the different phases of the project:

### Hospital Management

- Project was presented to the hospital management.
- Buy-in from management and midwives was obtained.

### Training of Midwives

- Training was done on bereavement care for midwives.
- Simulation was done on collecting mementoes at birth.

### Implementation

- Compilation and use of memento booklets were implemented.
- Checklist was made available on key steps to providing bereavement care based on the Canadian Pediatric Society statement on perinatal loss.

## Results

- During training on bereavement, midwives indicated compassion fatigue.
- Midwives indicated that the memento booklet assisted them to express empathy to bereaved mothers.
- They felt that the memento booklet allowed mothers to take the memories of their babies home as opposed to leaving empty handed.
- Some adjustments have been made to the booklet as recommended by the midwives.
- The mothers responded with appreciation to the memento booklets.
- The KP Leadership Model provided importance guidance during the project.

### Important Information Collected At Birth

Name \_\_\_\_\_

Date of birth \_\_\_\_\_

Time of Birth \_\_\_\_\_

Weight \_\_\_\_\_

Length \_\_\_\_\_

Head circumference \_\_\_\_\_



## Conclusion

The practice of providing birth mementoes to women who have experienced a stillbirth has been integrated into the ward policy regarding the care of women experiencing a stillbirth.

## Checklist During Stillbirths

Important actions to take during and after the birth of a baby	Yes	No	N/A
Assure parents that is normal to feel uncomfortable at this time			
Allow parents to spend as much time as they need with their baby			
Make repeated offers for holding the baby			
Name the baby			
Provide privacy, but do not abandon the parents			
Encourage relatives and friends to see the baby, according to the parents' wishes			
Reassure parents that nothing more could be done			
Provide mementos to create memories <ul style="list-style-type: none"><li>• Photos</li><li>• Footprints</li><li>• Lock of hair</li></ul>			
Ensure that spiritual support is available			
Explain the need and procedure for an autopsy			
Explain options and procedures for memorial services			

## Implications / Take away message

It was evident that the success of a quality improvement project of this nature is dependent on the support from hospital management., as well as the five exemplary practices described by the Kouzes and Posner Leadership Model.

## Questions I would like audience to respond to

- Is bereavement care in public hospitals an unrealistic expectation?
- Should bereavement care be included in interprofessional healthcare curricula?
- How can interprofessional collaboration contribute to dignified care of bereaved women?

## Acknowledgements / Funding

I would like to acknowledge Johnson & Johnson and Sigma Theta Tau International for the support and opportunities provided to conduct the project. I would like to thank the midwives who participated in this quality improvement project.

## References

- Beck, C.T., LoGiudice, J. and Gable, R.K., 2015. A mixed-methods study of secondary traumatic stress in certified nurse-midwives: shaken belief in the birth process. *Journal of Midwifery & Women's Health*, 60(1), pp.16-23.
- Davies, S. and Coldridge, L., 2015. 'No Man 's Land': an exploration of the traumatic experiences of student midwives in practice. *Midwifery*, 31(9), pp.858-864.
- Fisher, M. and Stanyer, R., 2018. Peer mentoring: Enhancing the transition from student to professional. *Midwifery*, 60, pp.56-59.
- Grant, L. and Kinman, G., 2014. Emotional resilience in the helping professions and how it can be enhanced. *Health and Social Care Education*, 3(1), pp.23-34.
- Kouzes, J.M. & Posner, B.Z. 2017. The leadership challenge. 6th edn. New Jersey: John Wiley & Sons Inc.
- Pezaro, S., Clyne, W., Turner, A., Fulton, E.A. and Gerada, C., 2016. 'Midwives Overboard!' Inside their hearts are breaking, their makeup may be flaking but their smile still stays on. *Women and Birth*, 29(3), pp.e59-e66.
- Polit, D.F., Beck, C.T. 2012. Nursing research : generating and assessing evidence for nursing practice. 9th edn. Philadelphia: Lippincott Williams & Wilkins
- Power, A., Mullan, J. 2017. Vicarious birth trauma and posttraumatic stress disorder: Preparing and protecting student midwives. *British Journal Of Midwifery*, 25(12): pp 799- 802.
- Rice, H. and Warland, J., 2013. Bearing witness: midwives experiences of witnessing traumatic birth. *Midwifery*, 29(9), pp.1056-1063.
- Wheeler, H. 2012. Law, ethics and professional issues for nursing. A reflective and portfolio-building approach. Abingdon. Routledge.