Abstract

Quality Improvement:
- To alleviate the subjectivity in blood loss with participant understanding of the impact the assessment has on patient care.
- Improve individual practice with increased self-awareness.
- Increase the need for using QBL, an objective method that will aid in assessment of excessive bleeding, significantly more accurate than EBL with simulation.

Methods & Materials

Analysis Methods:
- Program evaluation
- Group discussion
- Follow-up with teams on changes made within their system (such as protocol changes, policy updates, purchase of scale, tracking of blood loss, continued education)

Results:
- 100% of Participants shared:
  1) Likely to Using QBL Method
  2) Understanding the need for Quality Improvement will likely Change their Practice
  3) Increase Self-Awareness and Accountability to Practice Challenges and Strengths
  4) Training was Beneficial

Discussion

Summary of Findings:
- 100% of the participants felt that being aware of their own personal practice facilitates understanding for the need to change from EBL to QBL.

Facilitators:
- New Jersey is ranked at number 35 in the USA for managing PPH with EBL being a contributing factor. To improve patient outcomes, healthcare professionals, medical students, and nurses need to understand what the implications are of using EBL versus QBL. In addition, how they can help in changing the practice. Simulation offers an approach to increase self-awareness to practice.

Barriers:
- Scheduling for participants for training due to work schedule or clinical rotation.
- Changing systems in practice that participants are a part of.
- Funding for equipment was unavailable to implement change(s)

Implications and Insights:
- As educators and management, we need to understand different learning methods in order to use different approaches in helping the individual to grow, increase morale, increase support, and be a part of the initiative to facilitate change. Simulation offers opportunities to improve their practice by understanding the self and what guides and bends them from raising their bar for improving the care provided.

References


Acknowledgements

This project was supported by AWHONN and a grant from Merck for Mothers.

Introduction

The Joint Commission in 2010 reported that the leading cause of maternal morbidity and mortality is failure to recognize excessive blood loss during childbirth. However, no single definition of postpartum hemorrhage is standard. Estimates of blood loss (EBL) are imprecise, inaccurate, and often overestimated at low volumes and underestimated at high volumes. The lack of accurate assessment can lead to delay in diagnosis and treatment. Limited visual instruction has been shown to significantly improve accuracy of estimation; however, this is subjective to the provider(s) experience, knowledge, frame of reference and group dynamic.

Discussion

Summary of Findings:
- 100% of the participants felt that being aware of their own personal practice facilitates understanding for the need to change from EBL to QBL.

Facilitators:
- New Jersey is ranked at number 35 in the USA for managing PPH with EBL being a contributing factor. To improve patient outcomes, healthcare professionals, medical students, and nurses need to understand what the implications are of using EBL versus QBL. In addition, how they can help in changing the practice. Simulation offers an approach to increase self-awareness to practice.

Barriers:
- Scheduling for participants for training due to work schedule or clinical rotation.
- Changing systems in practice that participants are a part of.
- Funding for equipment was unavailable to implement change(s)

Implications and Insights:
- As educators and management, we need to understand different learning methods in order to use different approaches in helping the individual to grow, increase morale, increase support, and be a part of the initiative to facilitate change. Simulation offers opportunities to improve their practice by understanding the self and what guides and bends them from raising their bar for improving the care provided.

References


Acknowledgements

This project was supported by AWHONN and a grant from Merck for Mothers.

Abstract

Quality Improvement:
- To alleviate the subjectivity in blood loss with participant understanding of the impact the assessment has on patient care.
- Improve individual practice with increased self-awareness.
- Increase the need for using QBL, an objective method that will aid in assessment of excessive bleeding, significantly more accurate than EBL with simulation.

Methods & Materials

Analysis Methods:
- Program evaluation
- Group discussion
- Follow-up with teams on changes made within their system (such as protocol changes, policy updates, purchase of scale, tracking of blood loss, continued education)

Results:
- 100% of Participants shared:
  1) Likely to Using QBL Method
  2) Understanding the need for Quality Improvement will likely Change their Practice
  3) Increase Self-Awareness and Accountability to Practice Challenges and Strengths
  4) Training was Beneficial

Discussion

Summary of Findings:
- 100% of the participants felt that being aware of their own personal practice facilitates understanding for the need to change from EBL to QBL.

Facilitators:
- New Jersey is ranked at number 35 in the USA for managing PPH with EBL being a contributing factor. To improve patient outcomes, healthcare professionals, medical students, and nurses need to understand what the implications are of using EBL versus QBL. In addition, how they can help in changing the practice. Simulation offers an approach to increase self-awareness to practice.

Barriers:
- Scheduling for participants for training due to work schedule or clinical rotation.
- Changing systems in practice that participants are a part of.
- Funding for equipment was unavailable to implement change(s)

Implications and Insights:
- As educators and management, we need to understand different learning methods in order to use different approaches in helping the individual to grow, increase morale, increase support, and be a part of the initiative to facilitate change. Simulation offers opportunities to improve their practice by understanding the self and what guides and bends them from raising their bar for improving the care provided.

References


Acknowledgements

This project was supported by AWHONN and a grant from Merck for Mothers.