



## Women's Health Research Day

*"Why XX Matters: Focus on Cancer and Regenerative Medicine Therapies for Women"*

Dorothy B. Parnian

MS

Center for Experiential & Applied Learning (CEAL), WFSM

Curriculum Management & Design Specialist

### **The role of training & simulation in preparing staff for their roles upon the opening of the Wake Forest Birth Center**

Alisa Starbuck, DNP, Joshua Nitsche, MD; Stacy Schmauss, PhD; Maria Crawford; Carty Beaston, Louise Nixon, JaNae Joyner, MHA, PhD

The 2019 opening of the Birth Center at Wake Forest Baptist Medical Center was a massive undertaking involving a variety of stakeholder groups. Various subgroups met for many months working in their areas of expertise and influence to prepare for the facilities, hiring, workflow, technology, training, and staffing to ensure opening day would occur. The Center for Experiential and Applied Learning (CEAL) was part of the Birth Center training initiative and has subsequently partnered with Birth Center leadership to evaluate how those involved in the opening felt about the process and day-one readiness to care for pregnant women and their babies. The objective for this abstract was to evaluate the impact of training and simulation in preparing stakeholders, including women's health care providers, for the opening of the Birth Center. Data was collected using a survey design that included both quantitative, 5-point Likert scale questions and qualitative opportunities to determine lessons learned. The quantitative survey data on training effectiveness (n=62) showed that 81% of respondents found simulation training to be useful in preparing them for their role or job in the Birth Center as compared to other training modalities (online modules - 47%; coaching/mentoring - 56%; preceptorship - 57%; classroom/didactics - 55%; on-the-job (OTJ) - 61%). When evaluating whether or not the preparation/training respondents received had equipped them for the job once the Birth Center opened, we found that 72% felt fully equipped while 26.8% did not. The 26.8% of respondents who did not feel well-equipped to do their jobs, were asked what type of additional training might have better equipped them. The data showed that the respondents wanted more OTJ training (25%); more coaching/mentoring (25%); increased preceptorship opportunities (21%); more simulation training (13%); additional classroom instruction (12%); and additional online modules (4%). The quantitative data was supported by qualitative comments and themes including the need for more hands-on training and simulation, as well as OTJ training/preceptorships. Altogether, this data shows that most Birth Center staff felt prepared for their role in the Birth Center when it opened, and that simulation training was an effective tool in preparing them. However, additional training, especially those involving one-to-one learning, should be considered when undertaking a highly specialized service line stand-up.

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