## Respectful Maternity Care (RMC) Education

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R ESPECTFUL MATERNITY





# Activity

Sit down if you've never experienced disrespect







#### **FPQC MFC Initiative Definition**

#### Respectful maternity care refers to care that:

- 1. Maintains dignity, privacy, and confidentiality
- 2. Ensures freedom from harm and mistreatment
- 3. Enables informed choice, self-determination, and respect for a patient's preferences
- 4. Ensures access to continuous support during pregnancy, labor, childbirth and postpartum
- 5. Enables access to equitable maternity services including evidence-based care, a safe and inclusive physical environment, and necessary resources



**Global AIM:** Improve maternal health by transforming hospital culture and environments to respectfully serve all mothers and their families, and by helping them meet their needs.

#### **Primary Key Driver**

Respectful Maternity Care (RMC)
Learn, define, commit, and
implement respectful care for
mothers and learn over time how
well they are performing

#### **Secondary Drivers**

Educate providers and staff about RMC and its components and strategies

Develop a hospital commitment with providers and staff support

Implement and use an ongoing RMC survey and other methods of maternal feedback to improve care

#### Where are We Now?

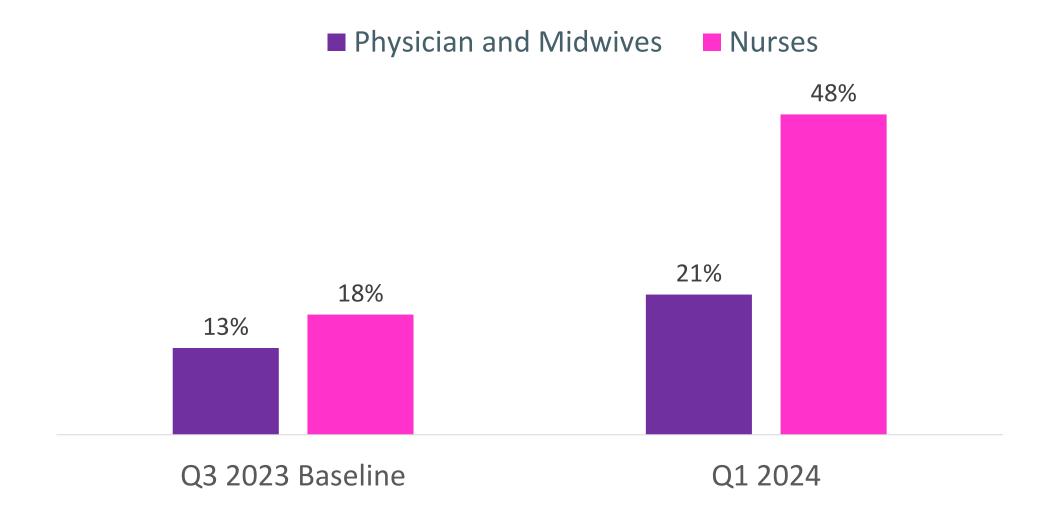
#### Respectful Maternity Care (RMC)



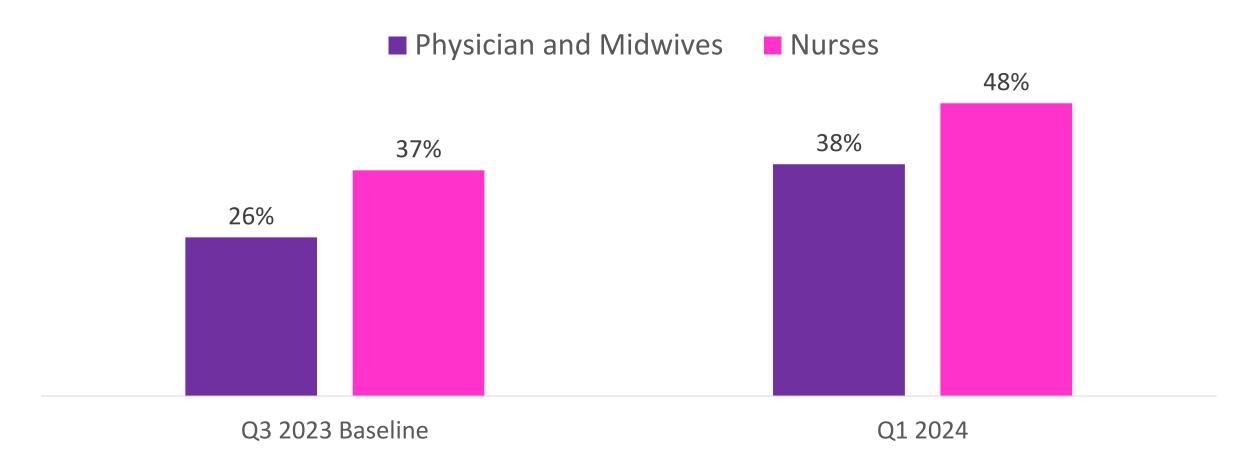




## By December 2024, MFC hospitals will have 80% of providers and nurses attend an RMC training since January 2023



## Processes for developing an agreed-upon plan of care utilizing a shared decision making model



## Educate Providers about RMC



### Strategies

- Provide Respectful Maternity Care Training for providers and staff
- Develop a welcoming and supportive environment that is respectful of each patient and their values

#### Resources

FPQC Tool: Suggested Key Components for RMC Trainings









members about RMC

Acknowledgment of (patient) past pregnancy and birthing experiences and loss

Stigma

**Bodily autonomy and Consent** 

**Role of doulas in RMC** 

Suggested Key
Components
for RMC
Trainings

What does Respectful Maternal Care look like?

Cultural Humility/Cultural Competence

Recognizing healthcare worker burnout

Patient as center/meeting patients where they are

Partners and other family members

**Trauma Informed Care** 



# Develop a hospital commitment with providers Strategies and staff support

- Adopt and commit to appropriate Respectful Care Practices to best serve the identified needs in their communities
- Create a strategy for sharing expected respectful care practices with obstetrical clinical team and patients including appropriately engaging support partners and/or doulas

#### Resources

FPQC Tool: Hospital Commitment to Provide Respectful Care



#### Our Respectful Care Commitments for Every Patient

- Treating the patient with dignity and respect throughout their hospital stay. Working
  to understand the patient (their background, home life, and health history) so we can
  make sure they receive the care they need during their birth and recovery.
- 2. Communicating effectively across the patient's health care team to ensure the best care for them. Introducing ourselves and our role on the patient's care team to the patient and their support persons upon entering the room. Practicing "active listening"—to ensure that the patient, and their support persons are heard. Being ready to hear any concerns or ways that we can improve patients' care.
- **3. Learning the patient's goals for delivery and postpartum:** What is important to the patient for labor and birth? What are their concerns regarding their birth experience? How can we best support them?
- 4. Welcoming the patient's chosen support persons to be present throughout their stay.
- 5. Following evidence-based guidelines and partnering with the patient for all decisions so that they can make informed choices that are right for them.
- 6. Valuing personal boundaries and respecting the patient's dignity and modesty at all times, including asking their permission before entering a room or touching them.
  Protecting the patient's privacy and keeping their medical information confidential.
- 7. Recognizing a patient's prior experiences with healthcare may affect how they feel during their birth. We will strive at all times to provide safe, equitable and respectful care to reduce the risk of harm and mistreatment.
- 8. Making sure the patient is discharged after delivery with an understanding of postpartum warning signs, where to call with concerns, and with appropriate postpartum follow-up care visits arranged. Ensuring the patient is discharged with the skills, support, and resources to care for themself and their baby.

As a provider, nurse, or staff member caring for pregnant and postpartum patients on this unit, I have reviewed and commit to these respectful care practices with every patient.

Signature

Date





Florida Perinatal Quality Collaborative



V. 7/18/23

## RMC Commitment Handout



- Teams can use this version or adapt for their facilities
- Can serve as a standard part of new team member onboarding





#### Suggested Trainings with RMC Component

While many trainings exist on issues related to respectful maternity care, the FPQC highlights three focused RMC trainings:

- ACOG: Respectful Care eModules
- AWHONN: Respectful Care Implementation Toolkit (RMC-IT)
- ICM: Respect Workshops: A Toolkit





#### **ACOG RMC Offerings**

Clinical organizations continue to complement and expanded upon efforts related to RMC.

#### ACOG Respectful Care eModules

"Some clinicians may be unfamiliar with the concept of respectful maternity care, so supporting the spread of information and knowledge around respectful maternity care and its implementation is critical."

- Estimated ~90 minutes to completion
- Includes a discussion guide that can be used individually or in a group setting with conversation starters, a reading list, and a reflection sheet
- Free for members
- 1.5 hours to complete
- ♣ 1.5 AMA PRA Category 1 Credits<sup>TM</sup>

#### **AWHONN RMC Offerings**

- The RMC Framework
- AWHONN RMC Evidence-Based Guidelines
- AWHONN RMC Implementation Toolkit
- Videos, links to relevant resources from AWHONN and other agencies, articles of interest, tools and resources for staff, patient-facing brochures and infographics in several languages, and more!
  - Free for members, low-cost for non-members
  - CNE Offered
- AWHONN RMC webinar (59 min session)

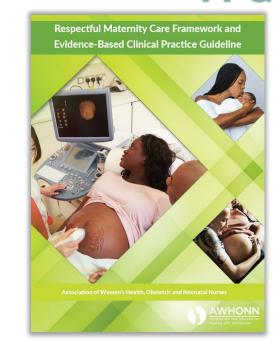
#### **Helpful Links:**

• Huggies/AWHONN RMC Education: <a href="https://www.huggieshealthcare.com/en-us/education-and-research/birth-equity/respectful-maternity-care-guideline-toolkit">https://www.huggieshealthcare.com/en-us/education-and-research/birth-equity/respectful-maternity-care-guideline-toolkit</a>

Rose Horton (AWHONN President) respectful care roleplay example (5 minutes): https://www.youtube.com/watch?v=QETjSOP0zQw

- Intro From Advocacy to Action: Real Stories of the Maternal Morbidity & Mortality Crisis (2 minutes): <a href="https://www.youtube.com/watch?v=vFzuVxHirjU">https://www.youtube.com/watch?v=vFzuVxHirjU</a>
- Real Stories of the Maternal Morbidity and Mortality Crisis (full-length, 16 minutes): https://www.youtube.com/watch?v=SACbCnEr7WI

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#### **RMC Train-the-Trainer Sessions**



- International Confederation of Midwives
  - Respect Workshops: A Toolkit (FREE to all!) (Revised January 2024)

Toolkit intended for midwives, doctors, educators, researchers, nurses, health care workers, doulas, managers, policy-makers, advocates, and leaders to facilitate workshops promoting respectful maternity care. Comes

with handouts, activities, and PPTs.

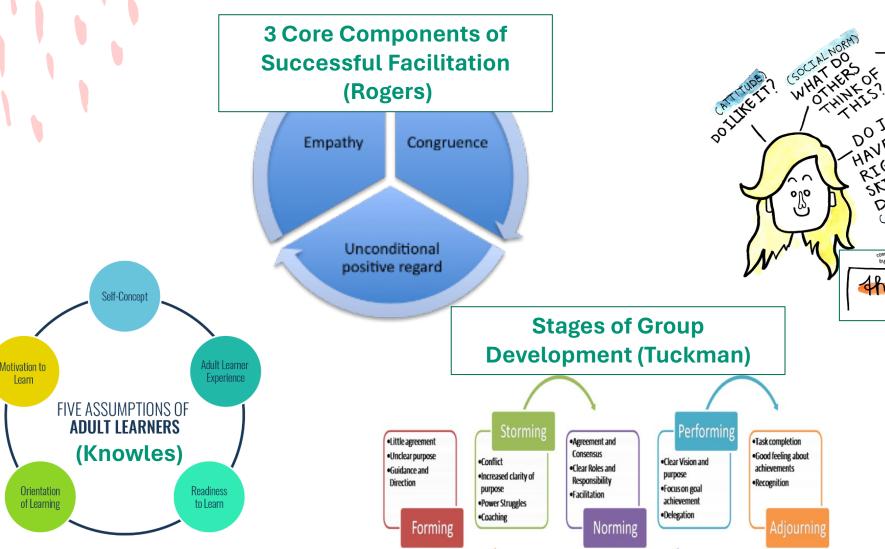
- Discusses Background to RESPECT
- Building RESPECT
- RESPECT Resources



## ICM Curriculum: Theoretical Frameworks



Intention to do it



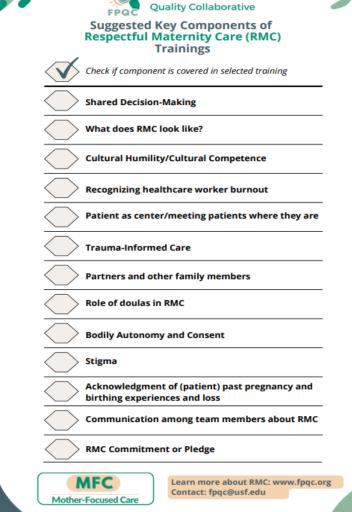


## How FPQC Adapted the ICM Curriculum



#### Uses the RESPECT Curriculum, discussing:

- RESPECT Background
- Building RESPECT
- RESPECT Resources
- Uses "Recommended Key Components of RMC
   Trainings" created by the RMC workgroup of the
   MFC advisory committee; while the ICM training
   covered most of these points, FPQC added
   additional topics and resources when adapting.



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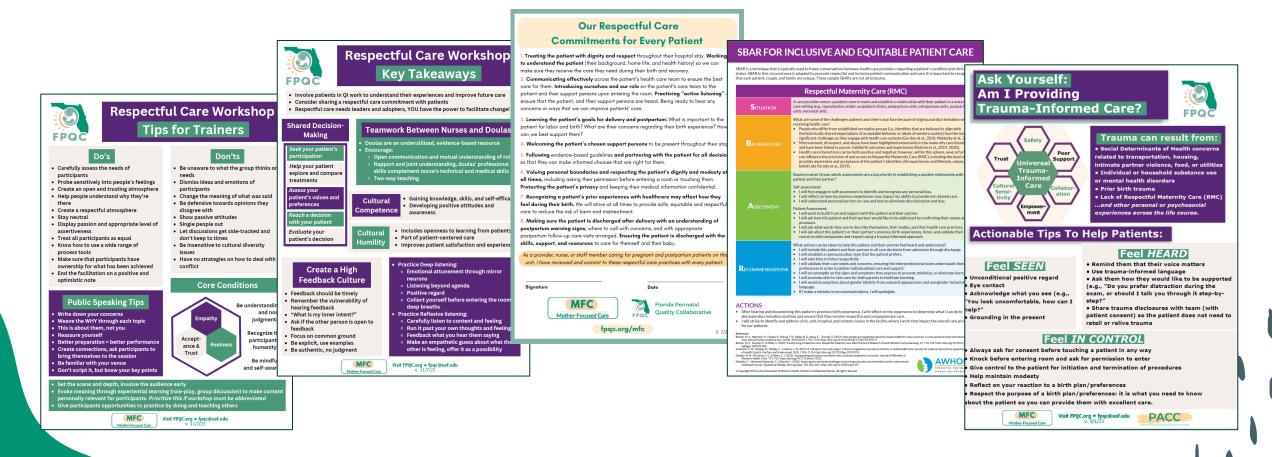
## **How FPQC Adapted the ICM**





Added additional resources (either created by FPQC or free materials from other

organizations) to the ICM training to make it more relevant to our MFC Teams:



## FPQC RMC Trainings: Focus on

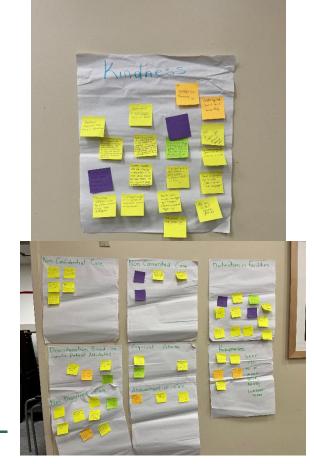
### **Experiential Learning Activities**

Materials: large wall post-its, regular post-its, markers to write

headings on the large wall post-its, pens, 3 role plays printed out (one for you, one for each volunteer).

- Can you think of a time when someone's kindness had an impact on you?"
- "What Disrespectful Care is Happening in your facility?"
   can use same facilitation style.
- How will you implement what you learned today (some
   attendees even wrote quick 30-60-90 day plans on their post-





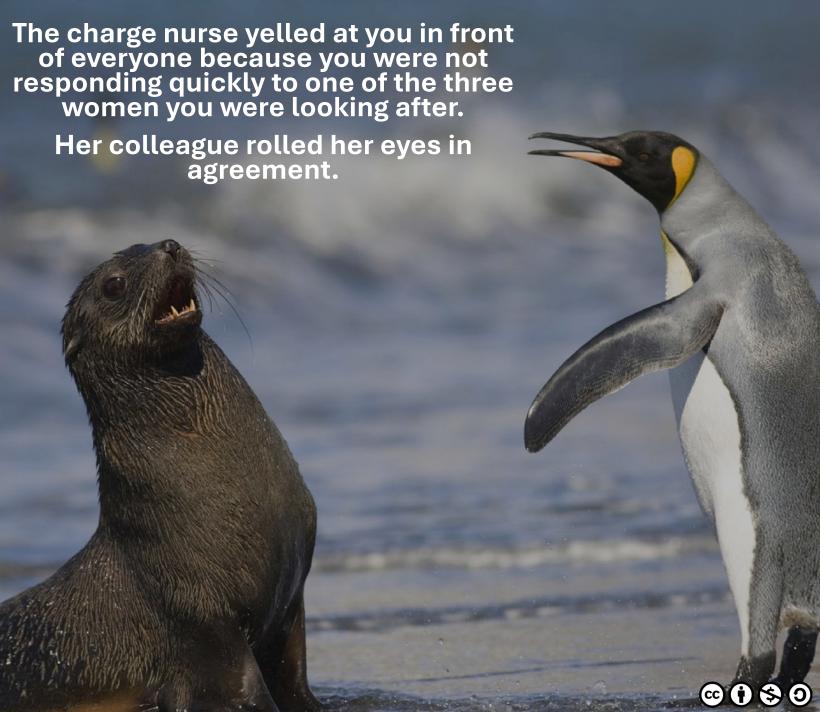
## FPQC RMC Trainings: Focus on Experiential Learning Activities



- "Sit down if you've never experienced disrespect" activity
- Adapted role-play SBAR (write your own!): show a
  negative clinician/patient interaction and then ask
  the participants what disrespectful behavior was
  present (verbal and non-verbal), and then do it
  again but in a respectful manner.
- Creating a "High Feedback" Culture
- ...and more!







## Create a high feedback culture

• What feedback do you like to hear?

What do you yearn to hear?

How do you show your colleagues you have their back?







What kind of feedback do you want to receive?



## **RMC Promising Training Practices**



- Include in resident training
- Offer RMC Grand Rounds
- Talk up ACOG eModules amongst colleagues
- Work with your Medical Staff Office on training strategies, CME, etc.
- Sign Commitment to RMC form and banner
- Offer brief RMC presentation at OB Section Meeting
- Provide Lunch & Learn session on RMC with an RN colleague
- Include RMC discussions in debriefs



## **RMC Promising Training Practices**



- Combine on-demand and in-person training strategies
- Take "bite-sized pieces" of trainings
- Bring RMC change package to your Unit Based Councils!
- Provide patient education handouts, laminated scripting on MFC- "We Ask Because We Care"
- Upload ACOG eModules to learning platform
- Work with your Medical Staff Office on training strategies, CME, etc.
- Post Commitment to RMC Banner visible on unit with all clinicians signing
- Include RMC "pearls" at huddles
- Add RMC education as standing item on agenda for Perinatal Safety Meetings



## FPQC 2023/2024 Trainings

Five trainings held statewide,

















### **Fall 2023 Training Evaluations**



#### **Objectives:**

- Gauge changes in knowledge, attitudes, self-efficacy and empowerment before and after the training amongst clinician participants (e.g. physicians, midwives, nurses, administrators, and quality improvement specialists).
- Administer additional post-test questions to obtain participant feedback on training acceptability, feasibility, and satisfaction.

#### Fall 2023 Training Evaluations







- We linked the QR codes to a pre and post-workshop evaluation on Qualtrics, but could use SurveyMonkey or something similar
- Anonymous responses allowing participants to answer without vulnerability or embarrassment
- Allows for deeper analysis than just marking attendance at a training
- This type of evaluation may be replicable for your facility as you administer trainings

### **RMC Evaluation Initial Findings**

For the five Fall 2023 trainings, improvements in three domains were assessed in a pre-/post test.

Items that showed significant differences from the beginning to the end of the workshop include:

#### 1) Knowledge

- Disrespect during maternity care is a human rights violation
- Attempting to convince a patient into a medical intervention that you believe is needed is disrespectful care
- Experiences in which a patient feels mistreated may lead to a slow or stalled labor
- Shared decision-making includes providing the patient with unbiased information on all of their care and treatment options
- Ongoing labor support, such as that from a doula, is an important tool for improving labor and delivery outcomes

#### 2) Attitudes

- It is important to confront colleagues who provide disrespectful care
- Zero tolerance for disrespectful care includes providing clear feedback to colleagues

#### 3) Self-Efficacy and Empowerment

I feel comfortable providing feedback to a colleague when I witness disrespectful care



### **RMC Evaluation Initial Findings**

We also conducted a post-workshop evaluation where participants were asked to rank on a scale of 1 (strongly disagree) -5 (strongly agree. A mean score between 5-6 (agree or strongly agree) was reported for the following items:

- This training was useful
- This training meets my approval
- This training is appealing to me
- I like this training
- I welcome this training
- I intend to utilize what I learned in this training with my staff
- This training is applicable to people like me
- I am satisfied with this training

- This training is applicable to people like me
- This training is a good match for me
- I feel comfortable facilitating an RMC workshop in the future
- The facilitators were knowledgeable about the content provided
- The facilitators were effective at communicating the workshop content

### Support for RMC In Hospitals





# Questions? Contact FPQC

fpqc@usf.edu
Visit
www.fpqc.org/mfc
for RMC resources



