

## **Interprofessional Collaboration in the Obstetrical Emergency Department:**

### **Enhances Nursing Job Satisfaction While Improving Care of the Laboring Patient**

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#### **Abstract**

In the coming years it is projected that there will be a shortage of obstetrical and gynecologic care providers for a growing patient population. A local Delaware Obstetrical Emergency Department is addressing this by using interprofessional collaboration for laboring patients and others seeking obstetric and/or gynecological emergency care. Empowering labor and delivery nurses to work at the top of their license reinforces patient-centered care and elevates nursing job satisfaction.

#### **Introduction**

Challenges in meeting the needs of maternal healthcare in the United States persist at the local, state, and federal levels. Although Delaware does not currently have any documented maternity care deserts according to the March of Dimes, the American College of Obstetricians and Gynecologists (ACOG) project there will be a shortage of providers over the next decade resulting in inadequate staffing levels.<sup>1,2</sup> A 2021 census by the Delaware Department of Public Health found that the number of women per Obstetric/Gynecological (OBGYN) provider ranged from 4001-6666 in the densest Census County Divisions, more than double the acceptable patient-provider ratio.<sup>3</sup> Leveraging available resources is one strategy to continue to meet the needs of the community, while ensuring safe and efficient patient care. Interprofessional collaboration in the Obstetrical Emergency Department (OB-ED) at a Delaware hospital provides an opportunity for nurses to work at the top of their license while reducing the demand on providers in evaluating term laboring patients thus expediting patient care.

#### **An Interprofessional Care Model**

Though staffing shortages are not currently impacting the State of Delaware, there are deserts along the Maryland-Delaware border. Local areas such as Queen Anne's County, MD, an established maternity desert, are unable to meet current demand for access to OB-GYN care.<sup>2</sup> to meet the demand. This challenge in healthcare sometimes translates into increased patient visits for non-urgent care in the OB-ED. The growing volume of patients in this OB-ED prompts ongoing evaluation of protocols and the use of resources to meet the needs of the community. Key stakeholders including hospital leadership, OB providers, and nurses collaborate to develop patient-centered strategies that support safe and efficient care. One of these strategies included a care set developed in 2014 for evaluation of full-term laboring and/or ruptured patients. This allows nursing to initiate a specific list of provider orders and expedite evaluations and care. This order set leverages the scope of practice and skills of labor and delivery nurses working in the OB-ED setting to efficiently assess these patients, communicate findings, and establish the next

step for the care plan with the covering provider. This team-based collaboration shifts the evaluation of approximately 700 stable patients annually, expanding the availability of OB-ED providers to assess and treat acutely unstable patients.

For example, a patient with a gestational age of 37 weeks or greater presents to the OB-ED with a complaint of contractions and/or a leakage of fluid. The nurse will assess the baby's well-being and the contraction pattern through electronic fetal monitoring. A cervical exam will be performed to assess the patient's labor progress. A speculum exam to determine if amniotic fluid is present can also occur with a complaint of fluid leakage. All findings are communicated to the covering OB provider with a discussion regarding the medical disposition, which could include walking for 2 hours and a repeat cervical exam, discharge to home, or admission. The effectiveness of this process stems from the standardization of practice and communication which align with ACOG recommendations.<sup>4</sup>

This interprofessional collaboration between OB-ED nurses and providers enhances nursing job satisfaction through top-of-license nursing practice and the ability to directly impact patient care.<sup>5</sup> Although definitions vary across studies, the general theme of maximizing the nursing skill set and education to improve patient care proves to be beneficial to both patients and nurses alike. Nurses have empathy for the patient's pain and vulnerability and often experience second victim syndrome. Without this collaboration nurses may experience moral burden to see their patients in pain and not have the tools to help them. That distress is compounded during pregnancy because the concern is for both the mom and baby. It can be empowering to use all the tools in your nursing toolbox to guide the direction and impact of patient care. Improving nursing job satisfaction by supporting them to work at the top of their license could also have the added benefit of boosting nursing retention while positively impacting the community. The community benefits from this patient-centered care model through prompt assessments and team-directed treatment. The team of nurses in the OB-ED can assess, obtain admission orders, and transfer a laboring patient with advanced dilation to the labor and delivery unit with precision that expedites the flow of patient care. This supports organizational goals for patient satisfaction. Studies support this high level of nursing practice, finding improved clinical outcomes and patient perceptions of care.<sup>5</sup>

The expanding shortage in maternal healthcare is not only concerning to members of the healthcare team but should also be an alarm to the community. There is a vested interest in interprofessional collaboration to develop and modify strategies that benefit the local community while supporting nursing. The unique collaboration in this Delaware OB-ED elevates the role of the bedside nurse to expedite the evaluation and care of laboring patients. Benefits of this strategy extend beyond the patient with profound impacts on the professional empowerment of nurses and valuable contributions to the healthcare team.

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## **Acknowledgement**

Thank you to ChristianaCare for ongoing support of the Nursing Research Fellowship in Robotics and Innovation. Thank you to Dr. Susan Smith for the opportunity to participate in this unique fellowship and her ongoing leadership. A special thank you to my coauthors, Dr. Patricia Pawlow and Morgan Tallo, for lending me their expertise through thoughtful mentorship and guidance.

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