Effects of a Lactation Telesimulation on Labor and Delivery and Postpartum Nurse Self-Efficacy

Turner Wiley, MSN, RN, CLC; Deborah Busch, DNP, CPNP-PC, IBCLC; Nadine Rosenblum, MSN, RN, IBCLC

Background

• Healthcare professionals on L&D and postpartum units have often not been given the proper training to provide lactation support, resulting in decreased breastfeeding rates.
• There is good quality evidence to support that training healthcare staff in lactation support significantly increases their knowledge, skills, and confidence, as well as breastfeeding exclusivity and duration.
• Multiple studies have demonstrated the benefits of telesimulation, including improved clinical skills and increased self-efficacy and perceived preparedness.

Purpose

The purpose of this quality improvement project was to implement a lactation telesimulation to further train the nurses on the L&D and postpartum units.

Methods

Design: Pre-/post-intervention study design
Sample/Setting: 10 nurses working on the L&D and postpartum units at a large urban teaching hospital in the Mid-Atlantic region of the United States.
Intervention Procedures: Evidence-based telesimulation with a high-fidelity lactation simulation model (LSM) created by LiquidGoldConcept, Inc. (LGC). Project participants scheduled individual times to meet with a standardized patient wearing the LSM for a 20-minute telesimulation via Google Meet. Utilization of knowledge in practice, learning satisfaction, and self-efficacy were measured by Qualtrics surveys pre-, post-, and 30-days post-intervention, as well as by phone interview 30 days post-intervention. Exclusive breastfeeding rates were collected by the unit’s lead IBCLC.

Learning Satisfaction

Items with the highest median learning satisfaction scores:
- Allowed participant to test their clinical ability
- Was a valuable learning experience

Items with only “agree” and “strongly agree” responses:
- Allowed participant to reflect on their clinical ability
- Revealed participant’s clinical weaknesses
- Was a valuable learning experience

Phone Interview Highlights

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<th>Question</th>
<th>Response</th>
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| Examples of using hand expression and/or breast massage techniques at work since the telesim? | - Assisting C-section patient with hand expression onto a spoon  
- Using hand expression to get the baby more interested in latch  
- Empowering a mother to breastfeed even if the baby won’t latch  
| Did the telesim help you identify areas of improvement? | - Yes, I did not know about breast massage and engorgement relief techniques  
- Yes, I realized how much evidence-based information is available to me and have been reading more about lactation support since the telesim  
| Do you feel more or less confident in your ability to teach hand expression and/or breast massage after the telesim? Why? | - I feel more confident in my ability to teach breast massage because I hadn’t done it before. Practicing with a real person helped.  
- I feel more confident in teaching the techniques because I have a better idea of what the massage techniques steps are.  
- I feel more confident now; Hearing patient feedback was really helpful.  
- I feel much more confident now, especially in teaching about expectations of milk letdown. Before, I felt like I was repeating someone else’s narrative. Now I feel like I genuinely know the information.  

Implications for Practice

- This QI project was the first to utilize the LiquidGoldConcept, Inc. (LGC) lactation simulation model with inpatient nurses as the sample population.
- The process of implementing this intervention was useful for LGC to continue tailoring their telesimulation to inpatient nurses’ needs.
- This project sets an example for nurse educators on other L&D and postpartum units to utilize lactation telesimulation as an evidence-based, cost-saving training method in the future.