Using a Preeclampsia Assessment Tool to Enhance Self-Efficacy in Postpartum Nurses

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Background

- Preeclampsia and its complications are increasingly common.
- Affects one in ten pregnancies in the US.
- Highest rates amongst non-White minorities.
- Complications include seizures, stroke, organ damage, and death.
- Most deaths occur 0-7 days postpartum.
- Many deaths are preventable with early recognition and treatment.
- Delays result from inconsistent assessment guidelines.
- Implicit racial bias.
- California Maternal Quality Care Collaborative (CMQCC) Preeclampsia Toolkit includes the Preeclampsia Early Recognition Tool (PERT).
- Evidence-based guideline that standardizes assessment for preeclampsia.
- May minimize delays, promote consistency, and make care more equitable.
- Use is well-supported during pregnancy & delivery, but not well-studied for postpartum.

Purpose & Aims

Purpose Statement: The purpose of this project was to improve postpartum nurses’ confidence in assessing for, recognizing, and reporting signs of postpartum preeclampsia using a standardized assessment tool.

Specific Aims:
1. Postpartum nurses will report a significant increase in self-efficacy with recognizing preeclampsia early warning signs after completing an educational e-module, as evidenced by a pre-post intervention survey.
2. Postpartum nurses will demonstrate proficiency in using a standardized preeclampsia assessment tool, the PERT, as evidenced by correctly scoring patient case scenarios 80% of the time.
3. The PERT will be added to the electronic health record obstetric toolkit as a reference for health care staff.

Methods

Setting & Sample:
- Single 29-bed postpartum unit within urban community hospital.
- Forty postpartum nurses, comprising all regular staff of single postpartum unit.
- Enrolled in project interventions as part of annual competency training.

Interventions by Aim:
1. Educational e-module based upon CMQCC Preeclampsia Toolkit education slide set.
   - Pre-post intervention self-efficacy survey.
   - Twelve-item survey on a Likert scale.
2. Skills workshop with application of PERT to two patient case scenarios.
   - Scoring accuracy used as proxy measure for proficiency.

Results

Teaching postpartum nurses to assess for preeclampsia with a standardized tool improves their self-efficacy.

<table>
<thead>
<tr>
<th>Case 1</th>
<th>Total Responses, n</th>
<th>27</th>
<th>Accurate Responses, n (%)</th>
</tr>
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<th>Case 2</th>
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<th>Accurate Responses, n (%)</th>
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<tbody>
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<td>Case 2</td>
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<tr>
<td>1st</td>
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<td>20 (54.1)</td>
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Overall: 43 (58.1)

Conclusions

The postpartum period presents distinct risks that can be mitigated through standardized preeclampsia assessment and role-specific training for postpartum nurses. This project demonstrated that it is possible to improve postpartum nurses’ self-efficacy in assessing for preeclampsia using an e-module based.

Project findings support the need for postpartum-specific preeclampsia training and infer credibility to the e-module as a training tool.

PERT workshop results and anecdotal feedback from nurses suggest a more interactive environment, such as a simulation, may better prepare nurses to use the PERT.

Sustainability & Dissemination: Results of this project will be shared with the hospital-wide Practice Council and at the Perinatal Safety Meeting. Stakeholders support expansion of the intervention to the Emergency Department, where postpartum women may present post-discharge.

Scan code for abstract, tools, and references.