44106 - DEVELOPMENT OF A BEHAVIOURAL MARKING SYSTEM FOR OBSTETRICAL TEAMS

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INTRODUCTION: The National Confidential Enquiry into Maternal Deaths identified 'lack of communication and teamwork' as a leading cause of substandard obstetrical care. Safety Organizations in Canada have recommended professional curricula development for multidisciplinary teams. To implement team training and assess curricular efficacy, valid, reliable markers of team performance are needed.

Our objective was to develop a behavioral marking tool to assess obstetrical teams.

METHODS: In a previous study, obstetrical teams were videotaped managing simulated emergency obstetrical scenarios, which were used as a template for behavioral marking system development. Participants identified behavioural items (BI) they felt contributed to team management.

After REB approval, 13 healthcare professionals and lay public viewed the taped performances and generated lists of behaviors which positively or negatively affected team performance.

Qualitative analysis using research team consensus and NVivo generated themes and subthemes. Research team members developed descriptors for poor and excellent performance on each of the BIs, thus forming the Assessment of Obstetric Team Performance (AOTP). A Global Assessment of Obstetric Team Performance (GAOTP) was developed using only the themes and descriptors.

Twelve reviewers evaluated teams' videotaped performances using the AOTP and their opinions sought regarding its usability.

RESULTS: In total, 1294 behavioural items were described by 34 simulation session participants and 13 video reviewers. After reviewing a sampling of narratives, the research team identified 8 themes. An NVivo analysis of narratives sorted the 1294 items into the 8 themes. After re-review, it was decided to include only 6 themes. In addition, 18 subthemes were identified and descriptors of poor and excellent team performance determined. A GAOTP used only the 6 themes and a summary of the subtheme descriptors.

Table 1 – Usability Questionnaire
(N=12)

	Agree (%)	Disagree (%)
1. Too many behavioural items (BI)	25.00	75.00
2. Too few BI	8.44	91.56
3. BI too specific	9.09	90.91
4. BI accurate reflection of team assessment	81.82	18.18
5. Themes/subthemes easily understood	91.67	8.33
6. Descriptors helpful in assigning ratings	83.84	16.16

Usability data is found in Table 1.

The median amount of time that participants spent completing the AOTP was 7.5 minutes (range= 1.5–50 minutes), and 75% thought the time requirement was moderate and manageable. Participants expressed an average comfort level of 7.54/10 (S.D.±2.35) using the AOTP.

DISCUSSION: While the validity and reliability of the AOTP still need to be determined, initial feedback regarding AOTP usability suggests that it allows for an accurate reflection of raters' assessments, is comprehensive, quick and easy to use. Future studies will utilize the AOTP to investigate the effect of obstetrical team training in non-behavioral skills, specifically comparing the effects of high-fidelity simulation team training to other education methodologies.