

A satellite map of Scotland, showing the rugged terrain of the Scottish Highlands and the surrounding waters. The map is oriented vertically, with the top of the image showing the northern coast and the bottom showing the southern coast.

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# **An Evaluation of the Scottish Multiprofessional Maternity Development Programme**

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## **EXECUTIVE SUMMARY**

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## **EXECUTIVE SUMMARY**

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### **BACKGROUND TO THE EVALUATION**

The report of the Expert Group on Acute Maternity Services (EGAMS) (Scottish Executive, 2002) provided recommendations based on the principles from the maternity framework document (Scottish Executive, 2001). The EGAMS report suggested that maternity staff receive sufficient training, support and education to ensure that they had the necessary skills and competencies to cope with obstetric and neonatal emergencies. It was agreed that all healthcare professionals (midwives, obstetricians, anaesthetists, paediatricians, general practitioners, paramedics, neonatal nurses, nurses and allied healthcare professionals) involved with intrapartum care, irrespective of location, should have and maintain these core skills. Each level of maternity care should have the appropriate skill mix for that level and every professional working in a maternity unit should achieve and maintain identified core competencies. As well as providing the appropriate courses to meet multiprofessional needs, innovative ways of maintaining skills and competencies were advocated, hence the advent of the Scottish Multiprofessional Maternity Development Programme (SMMDP).

The SMMDP commenced in 2003, and for the first 18 months, was supported by the Royal College of Midwives (RCM) and the Scottish Executive Health Department (SEHD) through a service level agreement. The SMMDP then moved into NHS Education for Scotland (NES) in 2005 and has provided a range of courses to address these recommendations (Scottish Executive, 2001; Scottish Government, 2011). Over 3,100 participants have attended at least one SMMDP course with the present SMMDP database comprising 2,000 active email addresses. The training is provided at local centres throughout Scotland and latterly in the south of England.

Previously an evaluation of the SMMDP courses was conducted by Robert Gordon University, Aberdeen (Gibb, Ireland and West, 2007) in addition to ongoing internal course evaluations. Gibb, et al (2007) reported that learning together seemed to have a positive impact on team working, sharing and collaboration resulting in improved patient care. Recommendations for the SMMDP included the need to have clear learning outcomes for the courses, in addition to team working being supported in the work place. They also highlighted that selection and training of facilitators was important.

A further robust evaluation of the impact of the programme is now required to build on this previous evaluation (Gibb, et al, 2007) and in alignment with the Healthcare Quality Strategy for NHSScotland (Scottish Government, 2010). This will inform future programme development so that the SMMDP remains contemporary and continues to provide improved maternity care for women and their babies across Scotland. The evaluation should engage with both past participants and clinical managers to determine the holistic impact of the efficacy of the SMMDP. Issues that

require investigation include the impact the programme has had on maternity services in terms of staff competence and confidence, changes to practice and also a cost / benefits analysis. The University of the West of Scotland (UWS) is delighted to undertake an evaluation of the SMMDP, which has been commissioned by NHS Education for Scotland. This evaluation will explore how the SMMDP has fulfilled the recommendations from the EGAMS Report.

## **PROJECT OBJECTIVES**

1. To measure the impact on maternity services following the introduction of the SMMDP e.g. Does it provide staff with increased knowledge, preparedness, confidence and competences to carry out their role?
2. To provide examples of any changes in practice (effectiveness of training).
3. To explore the staff experience, perceived knowledge base following attendance at clinical skills training.
4. To identify a method to evaluate the effectiveness of the SMMDP model of course development.
5. To provide an analysis of the benefits both in quality, output, cost savings, time savings of the SMMDP.
6. To evaluate the partnership approach to the work of the SMMDP.
7. To evaluate the following courses: The Scottish Emergency Maternity Care Course (for Non-Maternity Professionals) and the new Scottish Maternity REACTS (Recognition, Evaluation, Assessment, Critical Treatment and Stabilisation) Course.

## **PROJECT DESIGN**

### **Methodology**

The research design was an evaluation, which attempts to seek worth or value of some innovation, intervention, service or approach (Robson, 2006). The evaluation framework utilised was the Kirkpatrick model (Kirkpatrick, 1996). This model was appropriate as it has been utilised to measure the effectiveness of training programmes since the 1950s (Kirkpatrick, 1996) and is a goal-based model (Eseryel, 2002). It provides a taxonomy for training evaluation criteria (Alliger and Janak, 1989) and the chief purpose of the model is to clarify the meaning of evaluation and to be a source of guidance for conducting an evaluation (Kirkpatrick, 1996). The model comprises four stages or levels of training outcomes: reaction, learning, behaviour and results (Bates, 2004).

The study was undertaken in three phases from October 2010 to March 2011.

- Phase one analysed pre-existing SMMDP internal course evaluations.
- Phase two evaluated individual course participants and the impact on their practice and benefits from this training (Sample size was n=540).
- Phase three evaluated the impact on practice and cost benefits from a wider perspective (Sample size was n=15).

Triangulation provided rigor (Polit and Beck, 2006) in the form of:

- Research methods (qualitative and quantitative).
- Data collection tools (course evaluations, online questionnaire and telephone interviews).
- Data sources (candidates and instructors on the courses, heads of midwifery / lead midwives, midwifery managers, consultant midwives, practice development midwives, midwives, Scottish Ambulance Service training officers, medical directors, medical practitioners, nurses, neonatal nurses and allied health professionals).

## **MAIN FINDINGS**

- Confirmability of data was through triangulation: research methods, data collection and data source.
- The SMMDP is relevant, up-to-date, evidence-based and a quality assured method of training multiprofessionals within the maternity services.
- The multiprofessional aspect to the programme was positively evaluated and endorsed the partnership approach to the work of the SMMDP.
- Participants reported that the SMMDP was an enjoyable, beneficial and effective mode of training, which increased their knowledge, confidence and competence and prepared them to carry out their role and advanced roles e.g. examination of the newborn.
- Participants reported numerous examples of evidence-based changes, which have been implemented into their practice areas following SMMDP training.
- The current internal evaluation from the SMMDP has been an appropriate tool to evaluate the effectiveness of the model of SMMDP courses. However, some sections need to have an identical stem question to be able to readily conduct more rigorous comparative data analysis.
- The Scottish Emergency Maternity Care Course (for Non-Maternity Professionals) and the new Scottish Maternity REACTS (Recognition, Evaluation, Assessment, Critical Treatment and Stabilisation) Course were both positively evaluated by the small number of participants who have attended to-date.

- The SMMDP was perceived to be cost effective, value for money and an efficient use of time. However, there was no evidence provided by the practice areas to allow the researchers to quantify these findings.
- The participants acknowledged that the SMMDP should remain a national evidence-based training programme, which is utilised by all professionals and non-professionals involved in providing maternity care across Scotland. Whilst sustainability of the SMMDP was important at this time a challenge identified from some respondents was financial constraints within NHS Boards and attending local in-house training maybe an option.
- Managers stated that if staff were underperforming in practice then the SMMDP was deemed to be an appropriate training programme to re-skill and update these practitioners even when in-house training was available.
- The continuing positive evaluations across all the courses emphasises the consistency of the instructors within the SMMDP who come from a variety of professional backgrounds and regions. This finding confirms a rigorous and robust quality assurance mechanism within the SMMDP.

## **RECOMMENDATIONS**

Based on the findings the following recommendations have been made for NHS Education Scotland and / or employers of professionals and non-professionals delivering different levels of maternity care in Scotland.

### **NHS Education for Scotland**

- Continue to provide the SMMDP as a national evidence-based programme for all professionals and non-professionals providing maternity care in Scotland as the recognised standard for obstetrics and neonatal training.
- Continue to promote the multiprofessional and partnership approach by incorporating staff from other NHS Boards to enhance the shared learning across disciplines and NHS Boards in Scotland.
- Continue to maintain this high standard of national, quality assured, cost effective training, which remains aligned to the Healthcare Quality Strategy for NHSScotland and focuses on safe patient care.
- Continue the present format of core lectures and small group teaching. Continue to keep the focus of scenarios used in courses to accommodate the variety of healthcare provisions from remote, rural and community areas as well as hospital environments.

- Continue the present format and administration of internal course evaluations but include identical stem questions for each heading to enable more rigorous comparative data analysis.
- Review the format for assessments and the appropriate method of feedback to both the candidates and their line managers.
- Review policy on travel expenses for courses.
- Review current advertising and marketing strategy.

**NHS Education for Scotland and / or employers of professionals and non-professionals delivering different levels of maternity care in Scotland.**

- Continue to encourage all staff providing care within the maternity services to attend for continual professional development as the SMMDP enhances their knowledge, confidence and competence and prepares them for their roles and advanced roles.
- Explore options for resources to support healthcare staff to be released from the areas when they are away as candidates, instructors / instructor candidates.

**Employers of professionals and non-professionals delivering different levels of maternity care in Scotland.**

- Current employers should link the effectiveness of staff training to risk management outcomes through a mapping exercise or further audit or research project.
- Current employers should develop a database or log of training to identify the cost benefits of the SMMDP compared to other training courses and create a benchmark for continuous professional development.
- Current employers should take cognisance of the benefits and outcomes for the maternity services from the national approach of SMMDP training in supporting the uptake of staff attendance. This will enhance safe and effective practice and promote up-to-date evidence-based obstetrics and neonatal care in Scotland.



## REFERENCES

Alliger, G.M. and Janak, E.A. (1989) Kirkpatrick's levels of training criteria: Thirty years later. Personnel Psychology. Vol.42, pp.331-342.

Bates, R. (2004) A critical analysis of evaluation practice: The Kirkpatrick model and the principle of beneficence. Evaluation and Program Planning. Vol.27, pp.341-347.

Eseryel, D. (2002) Approaches to Evaluation of Training: Theory & Practice. Educational Technology & Society. Vol.5(2), [Online]. Available: [http://www.ifets.info/journals/5\\_2/eseryel.html](http://www.ifets.info/journals/5_2/eseryel.html) [Accessed 1/3/2011].

Gibb, S., Ireland, J., West, B.J.M. (2007) An Evaluation of the Scottish Multiprofessional Maternity Development Programme (SMMDP): Full Report. Aberdeen: The Robert Gordon University.

Kirkpatrick, D. (1996) Great ideas revisited. Training and Development. January. pp.54-59.

Polit, D.F. and Beck, C.T. (2006) Essentials of Nursing Research: Methods, Appraisal and utilization. (6<sup>th</sup> ed). Philadelphia: Lippincott Williams and Wilkins.

Scottish Executive. (2001) A Framework for Maternity Services in Scotland. Edinburgh: The Stationary Office.

Scottish Executive. (2002) The Expert Group on Acute Maternity Services Report. Edinburgh: Scottish Executive Stationary Office.

Scottish Government. (2011) A Refreshed Framework for Maternity Care in Scotland. Edinburgh: The Scottish Government.

Scottish Government. (2010) The Healthcare Quality Strategy for NHSScotland. Edinburgh: The Scottish Government.

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## **RESEARCH TEAM SUPPORT**

- Professor Pauline Banks - Questionnaire Reviewer, Quality assurer, University of the West of Scotland.
- Ms Helen Kane – Questionnaire reviewer, Quality assurer, Data analysis of SMMDP internal course evaluations, University of the West of Scotland.
- Mario D Hair - Statistical advice, University of the West of Scotland.
- Dr Angie Docherty – Peer reviewer of interview data analysis, Quality assurer, University of the West of Scotland.

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