

# Interprofessional simulation training for paramedic and midwifery undergraduates: A pre-post study

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## Introduction

- Obstetric callouts in the out-of-hospital setting are high-risk but rare [1]. Paramedics have also reported anxiety and a lack of confidence in managing out-of-hospital births [2].
- The benefits of interprofessional education (IPE) in clinical settings are numerous but there is limited research involving undergraduates in paramedicine and midwifery [3, 4].
- This study aimed to determine the benefit of incorporating IPL into paramedic and midwifery undergraduate curricula.

## Methods

- An inaugural three-hour IPL workshop was organised, involving an expert panel discussion and four rotations across scenario stations.
- Students were invited to complete pre- and post-event questionnaires assessing:
  - knowledge, skills and confidence in managing out-of-hospital obstetric emergencies on a 5-point Likert scale;
  - perceptions of IPL via administration of the Readiness for Interprofessional Learning Scale (RIPLS).

Interprofessional learning (IPL) in the form of a simulation workshop **significantly increased obstetric knowledge, skills and confidence** in a sample of paramedic and midwifery undergraduates.

Statistically significant differences in matched mean scores were observed for both the positive and negative professional identity subscales of the RIPLS.

Further research is required to examine the benefits of IPL in undergraduate paramedic and midwifery cohorts.



## Results

- Fifteen midwifery and 17 paramedic final-year students participated in the workshop. Twenty-two (69%) and 13 (41%) students completed the pre- and post-event questionnaires respectively.
- Matched mean scores for obstetric knowledge, skills and confidence were significantly higher post-workshop.
- Statistically significant differences were found for the positive and negative professional identity subscales of the RIPLS.
- Majority (84.6%) of students were satisfied with the IPE workshop.

## Discussion and Limitations

- Despite being the most commonly used scale for IPL competency, the lack of professional identity within undergraduate cohorts has been cited as a limitation of the RIPLS subscales [5].
- The small sample size post-matching limits extrapolation of findings.

## References

1. Flanagan B et al. BMC Pregnancy Childbirth: 2017; 17(1): 1-9.
2. Hill MG et al. Australas. Emerg. Care. 2023; 26(2): 119-25.
3. Williams B et al. J. Allied Health. 2015; 44(4): 201-207.
4. Pollock C and Biles J. Clin. Simul. Nurs. 2016; 12(8): 313-19.
5. McFadyen AK et al. J. Interprof. Care. 2005; 19(6): 595-603.