



An Exploration of Midwives' Perceptions of Caring for Women with Critical Care Needs in the Labour Ward Setting

Reale, E.,¹
Noonan, M.,²
Bradshaw, C.²
University Maternity
Hospital, Limerick¹
Department of Nursing
and Midwifery,
University of Limerick²

INTRODUCTION

Childbirth is viewed as a major life event for women and their families. For the majority of women this is a normal process. While midwives have traditionally been seen as guardians of normal birth this paradigm is beginning to change as are the needs of women becoming pregnant. Women are now embarking on the pregnancy journey with more complex health issues and co-morbidities. Such issues may predispose women to an increased risk of critical illness, which the midwife must respond to. Limited published literature exists in relation to the midwife's experience of providing such care.

OBJECTIVE

The aim of this study was to explore midwives' perceptions of caring for women with critical care needs in the labour ward setting.

METHODOLOGY

A qualitative descriptive design was utilised and interviews were carried out with a purposive sample of ten midwives (n=10) from a stand-alone maternity unit in the Republic of Ireland. Ethical approval was granted from the Ethics Committee at the study site and access to the site was then negotiated through midwifery management. All of the midwives interviewed had at least one year's experience of midwifery practice on a labour ward. Participants' length of experience as a midwife varied from three to twenty years.

RESULTS

Following thematic analysis using Braun and Clarke's framework (2013) four themes emerged: **Provision of Safe Care, Support, Education and Psychological Impact**. The findings of this study highlighted that midwives generally learn how to care for women with critical care needs through experience gained in practice. Support in practice was considered essential in the provision of safe patient care with midwives noting the support of the multidisciplinary team as particularly important. Barriers to support midwives in practice included the infrastructure of the organisation and the power struggle that existed between doctors and midwives. Irrespective of support and experience all midwives expressed a need for specialist training and education to care for this cohort of women. Midwives noted too how critical illness can have a psychological impact on women and on themselves.

CONCLUSION

There is a significant need for education and training in this area of practice. This could include a theory component accompanied by competence assessment. Psychological supports too need to be put in place for women in receipt of such care and for midwives delivering this care including an emphasis on building resilience in the workplace for midwives.

REFERENCES

Available on request.