

# OP14

## MULTI-DISCIPLINARY AWARENESS AND CONFIDENCE IN USING THE RCOG/RCM OASI CARE BUNDLE IN A TERTIARY NHS MATERNITY UNIT

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### Introduction

The RCOG/RCM obstetric anal sphincter injury (OASI) care bundle has shown a 20% relative risk reduction for OASI[1]. NHS England's perinatal pelvic health services specification recommends its implementation in all maternity services[2]. The aim of this survey was to assess pre-existing awareness and confidence in using the bundle prior to local implementation and identify potential training needs.

### Methods

A 15-item Microsoft Forms survey was circulated to all midwives and obstetric doctors in an NHS tertiary maternity unit. The survey opened for eight weeks with email reminders sent two and six weeks after initial invitation. Dichotomous yes-no questions assessed confidence providing each bundle component, with follow-up questions if "no" was selected. Numerical analysis was conducted within Microsoft Forms and Excel, with thematic analysis of free-text responses conducted manually by the authors.

### Results

Sixty-two responses were received: 13 obstetricians and 49 midwives. Awareness of the bundle was reported by 56(90%) respondents and 27(44%) correctly described all four components: the median correctly described was three. Fifty-nine (95%) respondents correctly identified all women should be offered systematic perineal examination, including per rectum, following vaginal birth.

Fifty-one (82%) respondents reported confidence providing antenatal education, 61(98%) providing manual perineal protection at delivery, 44(71%) providing episiotomy and 50(81%) examining for OASI following birth. There was no difference in responses between obstetricians and midwives; confidence reflected seniority in both groups.

Respondents not confident in providing antenatal education felt they would benefit from formal training and reference resources; those not confident in episiotomy or examination felt supervised, live clinical practice or simulation-based training would be most useful.

### Conclusions

Pre-implementation awareness and confidence in providing the OASI care bundle is high, though episiotomy represents an unmet training need, with 29% of respondents not yet confident performing this. Further clinical supervision or simulation may provide the most desirable educational solutions.

**References:**

1. Guroi-Urganci I, Bidwell P, Sevdalis N, et al. Impact of a quality improvement project to reduce the rate of obstetric anal sphincter injury: a multicentre study with a stepped-wedge design. *BJOG: An International Journal of Obstetrics & Gynaecology*. 2021;128(3):584-592. Doi: 10.1111/1471-0528.16396
2. NHS England. Service specification: Perinatal Pelvic Health Services. <https://www.england.nhs.uk/wp-content/uploads/2023/10/PRN00147-Service-specification-perinatal-pelvic-health-services.pdf>. Accessed 30th January 2024.