

Sonographer Perspectives of Breaking Bad News in Early Pregnancy Assessment - A Literature Review



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Introduction

The National Bereavement Care Pathway (NBCP) is being rolled out to NHS Trusts. The purpose is to improve bereavement care for patients, as well as providing training and support for health care professionals who are at the frontline of breaking bad news. The aim of this literature review is to assess the training and support for sonographers who are breaking bad news within the early pregnancy assessment setting and to provide some insight into the impact that this has on the sonographers.

Literature Search Strategy

A systematic literature search was performed using databases. Key words included 'bereavement', 'breaking bad news', 'early pregnancy loss' and 'sonographer'. A date range and inclusion/exclusion criteria were applied. Professional websites were accessed such as National Institute of Clinical Excellence (NICE), Royal College of Obstetrics and Gynaecology (RCOG), British Medical Ultrasound Society (BMUS) and Society of Radiographers (SoR). A small number of articles relevant to sonographer perspectives were found.

Findings

Three studies were reviewed with data from a total of 192 sonographers evaluated. The studies used a qualitative approach of interviews or questionnaires. All studies asked sonographers how they felt about breaking bad news, the support they felt they had and the training received in relation to breaking bad news. Arezina (2017) highlighted that the training methods used most commonly were the least preferred and vice versa. Sonographers preferred observational training, however lecture based training was used most often. Thomas et al (2017) indicated that inconsistent good practice protocols had a negative impact as sonographers had no clear procedures to follow and highlighted potential stressors such as, lack of prior knowledge of the patients' history or disposition, risk of complaint and feelings of guilt at being the person to give the bad news. Simpson et al (2001) suggested that formal training on counselling skills would increase the sonographers' confidence and, if they could recognise their own psychosocial needs, they would be better equipped to recognise the needs of others. Simpson et al (2001) also highlighted that 'bad' news has a different meaning for everyone.

Summary of study findings

Training

- ❖ Limited access to formal training
- ❖ Observational based thought to be most useful
- ❖ Lecture based thought to be least useful

Support

- ❖ Good practice protocols are inconsistent
- ❖ Lack of supervisor support
- ❖ Examination time pressures

Impact

- ❖ Tired and emotionally drained staff
- ❖ Stress, frustration, burnout
- ❖ Negative emotional state

Recommendations

Training

- ❖ Formalised, relevant training
- ❖ Counselling skills
- ❖ De-briefing skills, coping strategies
- ❖ Emotional intelligence awareness

Support

- ❖ Good practice protocols
- ❖ Supervisor support, team approach
- ❖ Appropriate time to talk to patients and evaluate own emotions

Impact

- ❖ Increased confidence
- ❖ Improved emotional resilience
- ❖ Improved staff retention
- ❖ Improved patient experience

Discussion

Limited qualitative data was available from small cohorts. One study was a pilot study, therefore may not have given a true reflection. Qualitative data is difficult to directly compare as it is based on subjective opinions, meanings may be misunderstood and bias can be introduced based on specific experiences.

Conclusion

In the three studies there are common themes; inconsistency in practice protocols (if available), lack of formalised training, lack of support, frustration and stress. The NBCP provides a framework for supporting sonographers and assistants, which will lead to an overall improvement in patient and staff experience of pregnancy loss.

National Bereavement Care Pathway (2018) measurable outcomes for health professionals breaking bad news which correspond to findings from the literature review:

- ❖ Staff feel more capable to break bad news appropriately
- ❖ Staff improve their skills in communication
- ❖ Staff can access all information they need about parents' situations before speaking to them
- ❖ Staff can debrief after difficult situations
- ❖ Staff feel better supported to deliver effective bereavement care

References:

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