The PRONTO² Experience in Mexico
A Low Tech, High Fidelity Obstetric and Neonatal Emergency Training Program

Marcia Monterroso, ScM, ICCE-CD, BSN Candidate 2012

Project Partners

• INSP (National Public Health Institute of Mexico)¹
• University of Utah, School of Nursing²
• Institutes of Women/Chiapas, State of Mexico³

¹Dilys M. Walker, MD, Project PI
²Susanna Cohen, MSN, CNM, Project Co-PI
³Funding source

Populations/Communities Served

Multidisciplinary health teams including nurses, OB/GYNs, pediatricians, general practitioners and technicians from community and referral hospitals in Chiapas, the State of Mexico, and most recently Guerrero.

PRONTO² plans to expand beyond Mexico into other Latin American countries. Initial discussions are underway to introduce the program in Guatemala.

Project Timeframe

• Train the Trainers (40 hours): Fall 2009
• Pilot Trainings (5 hospital teams):
  Module 1 (15 hours) Fall 2009/Winter 2010
  Module 2 (7 hours) Winter 2010/Spring 2010
• Pilot Analysis/Documentation: Summer 2010
• Implementation Training (12 pairs of hospital teams)
  Guerrero : Module 1: 8/10  Module 2: 11/10
  Chiapas : Module 1: 10/10  Module 2: 11/10

Project Goals

To improve maternal and neonatal outcomes by developing an innovative training curricula for use in resource limited settings. The PRONTO² training program leads multidisciplinary medical care teams through a series of skills stations, team-building activities, and low-tech, high-fidelity simulations using standardized patients and PartoPants™. As a result, participants proactively gain the knowledge and skills necessary for the immediate diagnosis, treatment and stabilization of obstetric emergencies such as incomplete abortion, placenta previa, eclampsia, shoulder dystocia, post-partum hemorrhage and meconium aspiration.

Expected Outcomes

• Improved emergency response using evidence-based practices, e.g. AMTSL to prevent post-partum hemorrhage
• Coordinated care and improved communication among providers, e.g. Team STEPPS approach
• Efficient mobilization of resources (alarm systems, medication refrigeration, ambulance functionality, MVA equipment)
• Demonstrated leadership skills, e.g. increased role for nurses

Progress to Date

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<tr>
<th>Hospital</th>
<th>Goals</th>
<th>Achieved (%)</th>
<th>In process</th>
<th>No progress</th>
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<td>5</td>
<td>4 (80)</td>
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<td>Coatepec</td>
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<td>6 (60)</td>
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<tr>
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<td>20 (65)</td>
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Next Steps

• Continue implementation trainings in Chiapas/Guerrero
• Complete pilot teamwork analysis
• Submit article for publication in peer-reviewed journal
• Seek additional funding (US-Mexico Federation; WHO)
• Expand program internationally