

# Providing a Safe and Positive Experience for Women Undergoing Induction of Labour

Author - Anne Mackinnon, Quality Improvement Midwife, amackinnon@nhs.net

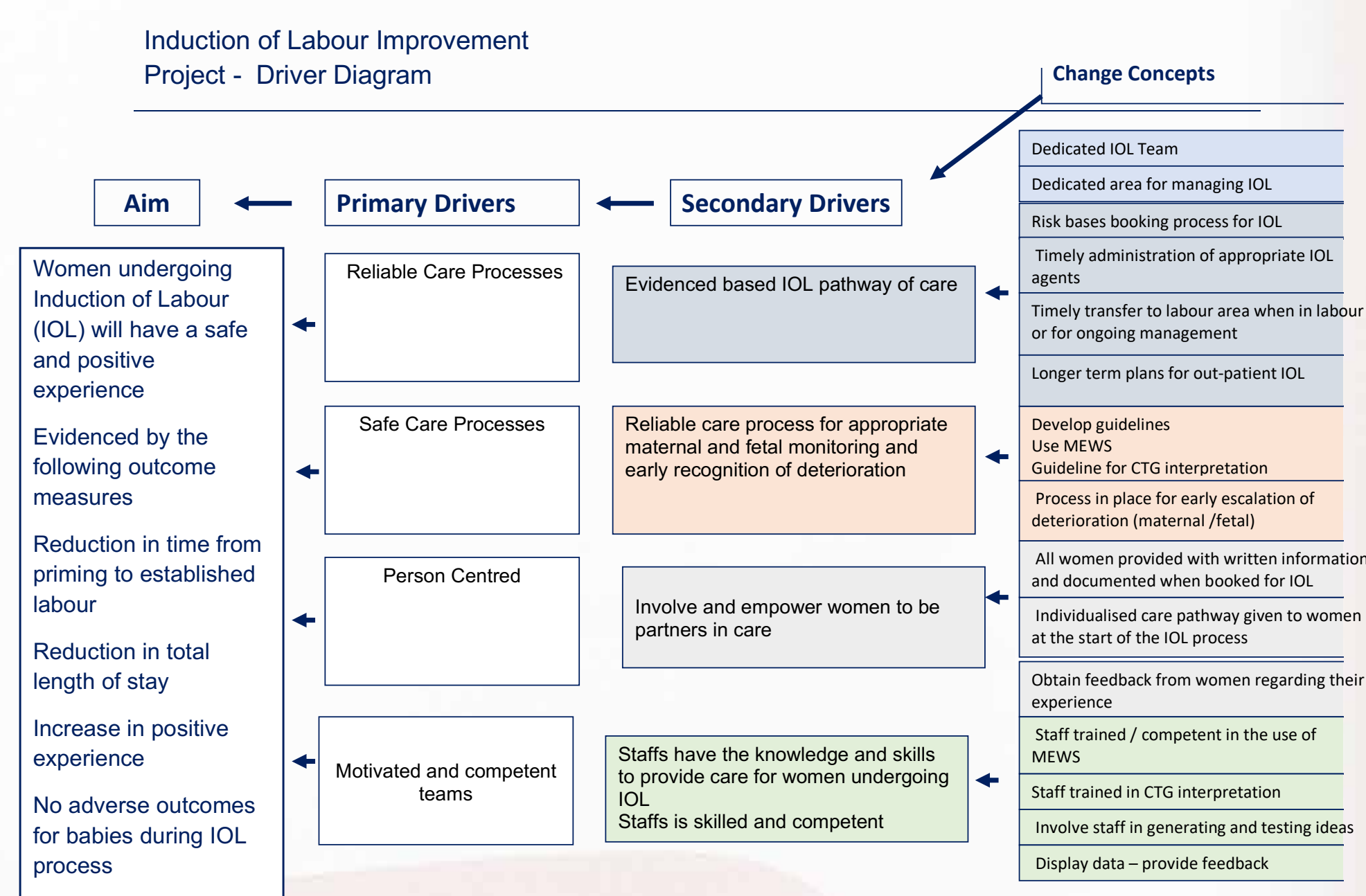
## Description

Increased complexities and co-morbidities in pregnancy are contributed to the rising rates of inductions of labour.

In NHS Fife 31% of all births were induced in 2018, this is a significant part of care provided by maternity services.

A review of pathway for women undergoing induction of labour, alongside quantitative feedback from women, highlighted areas for improvement such as protracted delays, multiple handoffs, varying care experiences. Redesign of the pathway of care for women undergoing induction of labour was identified as an area for improvement within maternity services.

## Aims and Objectives

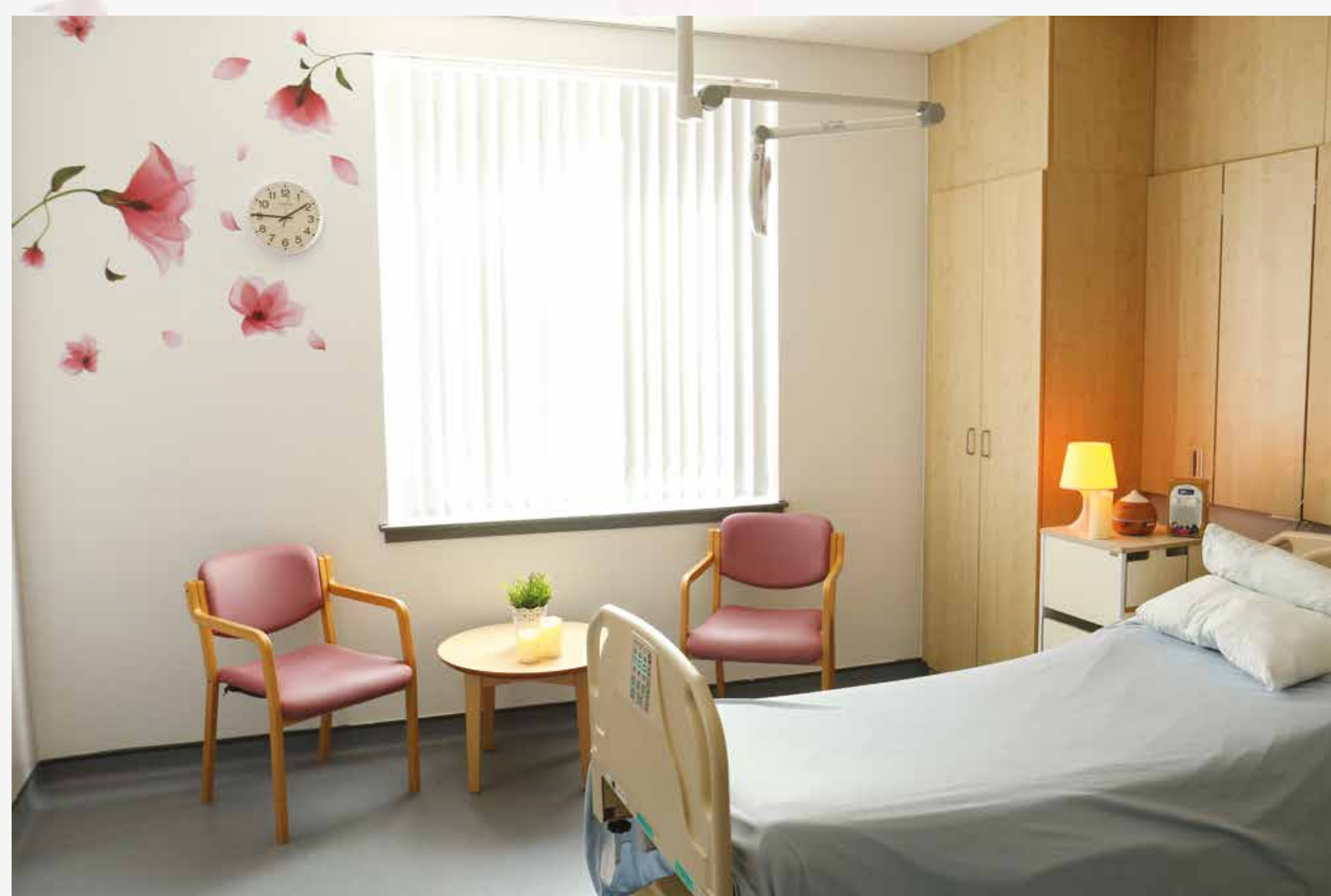


The project aimed to implement a reliable safe pathway of care and provide a positive experience for women undergoing induction of labour. Thus supporting the future vision of maternity services in Scotland, where women and families are at the centre of care.

## Methodology

A quality Improvement and co-production approach was adopted. Feedback from women and staff was used to focus on improvements in the following areas:

- Reducing handoff, avoidable delays and improving continuity of care by establishing a dedicated multi-professional induction of labour team and setting up a dedicated induction of labour suite.
- Providing facilities for birth partners to stay throughout – this was what mattered most to women.
- Women are admitted directly to the induction of labour suite and remain there until transfer to the intrapartum areas.
- Redesigning the current appointment system to allow for greater flexibility.
- Reviewing best evidence based practice.
- Striving for mutual partnership working by adopting individualised care plans.
- Using feedback from women and the team to drive continuous improvement.
- Agreeing process and outcome measures to track improvement.
- Engaging all stakeholders, women and families, establishing communication channels through multidisciplinary meetings, newsletters and social media.



## Lessons Learned

- How service users involvement can shape improvement.
- Need to understand our systems – doing the same thing will get the same results.
- Bottom up approach – teams know what needs to be improved.

## References

Achieving Quality in Scotland Healthcare (2011): A "2020" Vision Scottish Government.

The Best Start: A Five - Year Forward Plan for Maternity and Neonatal Care in Scotland.

## Results and Outcomes

This improvement work is being delivered within the existing footprint of the unit using the existing staffing establishment. The new pathway commenced in October 2018, the improvement work is still ongoing. Early results for January – March 2019 show:

- 95% of women experienced no delays
- 60% required only a single intervention before establishing in labour
- 80% received continuity of carer from no more than 2 midwives
- reduced handovers between departments
- spontaneous vaginal delivery rates of 64 - 73%
- no adverse outcomes for babies.

The most powerful signal of improvement has come from the consistent positive feedback from women, families and from the commitment and energy of the team.

- 98% of women reported that they were very satisfied with the care they received.
- 90% of women reported being fully informed throughout the process.
- 15% of women reported some concerns during the process but felt reassured by the team.

Women reported that they felt involved, informed, safe, and cared for. Staff reported a real team spirit and commitment to providing a safe and positive experience for women and families.



Believe in Yourself ♡