

Improving Compliance with Documentation and Counseling Guidelines during Induced Labor

PROBLEM: In October 2011, 97% of induced labor files were not in compliance with Obs/Gynae Dept guidelines on documentation and patient counseling. From January through April, after initial intervention, 78% of files remained non-compliant.

AIM: Ensure documented patient counseling and completed physician order sheet in 85% of Induction of Labor cases by the end of June 2012

INTERVENTION:

- Nov 2011: Created summarized version of IOL guidelines
- Jan – Apr 2012: Educate MDs, nurses about patient counseling and IOL guideline
- May 2012: Introduce “hard stop” in IOL process, preventing induction of labor without both clear documentation of patient counseling and physician order form

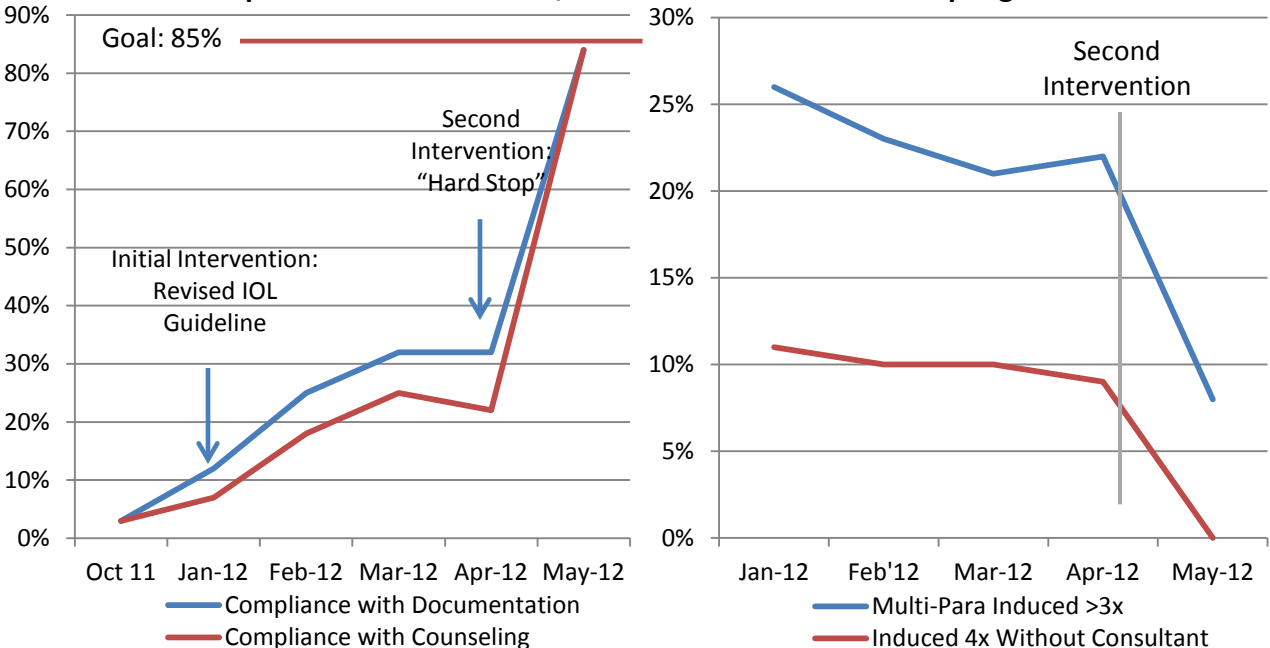
TEAM:

- CCITP Members: Dr. Nadia Al Mulla, Dr. Hisham Abdulrahman, Dr. Eman Kutob
- Dr. Nuda Al Nagi
- Marshall Nannes
- Med. Records Staff: Ria Alma Malagad, Meena Sidarthan, Raymond Merida, Paquito Maloloyon
- Sr. Fatima, Induction Ward

COACH: Dr. Shwetha Akshaya

PROJECT SPONSOR: Dr. Halima Al Tamimi

RESULTS: Compliance with Guidelines, as Reflected in Random Sampling of Patient Charts



CONCLUSIONS:

- Significant improvement in compliance after education of MDs and nurses and introduction of process change
- Major increase in guideline compliance even in areas beyond documentation/counseling
- Patient Counseling did not happen without mandatory requirement
- Long, unclear guidelines needed to be simplified to be useful

NEXT STEPS:

- Engage with non-compliant physicians to learn reasons for resistance
- Target IOL decision-making to reduce number of inductions
- Monitor IOL complications to see if drop occurs