

# Improving Intrapartum Care by Improving Policy Adherence



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## Introduction

Mortality and Morbidity review meetings and in-depth case reviews identified a number of cases where the care provided was not consistent with our institution's policies and procedures for the management of labour and birth. This study aimed to identify compliance issues and improve staff adherence to policies and procedures in regards to appropriate intrapartum monitoring, documentation of maternal and fetal condition as well as responses to deterioration.

## Methods

This was a prospective audit conducted in a large maternity service birthing over 5000 women annually. There were four audit cycles (88 cases, 101 cases, 74 cases and 92 cases respectively) assessing policy compliance and documentation expectations looking at 10 domains including adherence to documentation policy and appropriate fetal monitoring. Between each cycle there was analysis of results and feedback to staff in the form of targeted education sessions regarding findings and expectations. The fourth and final audit cycle was completed two months after the last education session to assess ongoing compliance.

## Results

Data demonstrated an overall improvement in compliance and adherence to local policies and procedures over the course of the four audit cycles in all domains. Peak compliance however was noted in audit cycle two which occurred immediately after the initial data analysis and targeted education sessions.

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## Results

Figure 1: Compliance to documentation policies

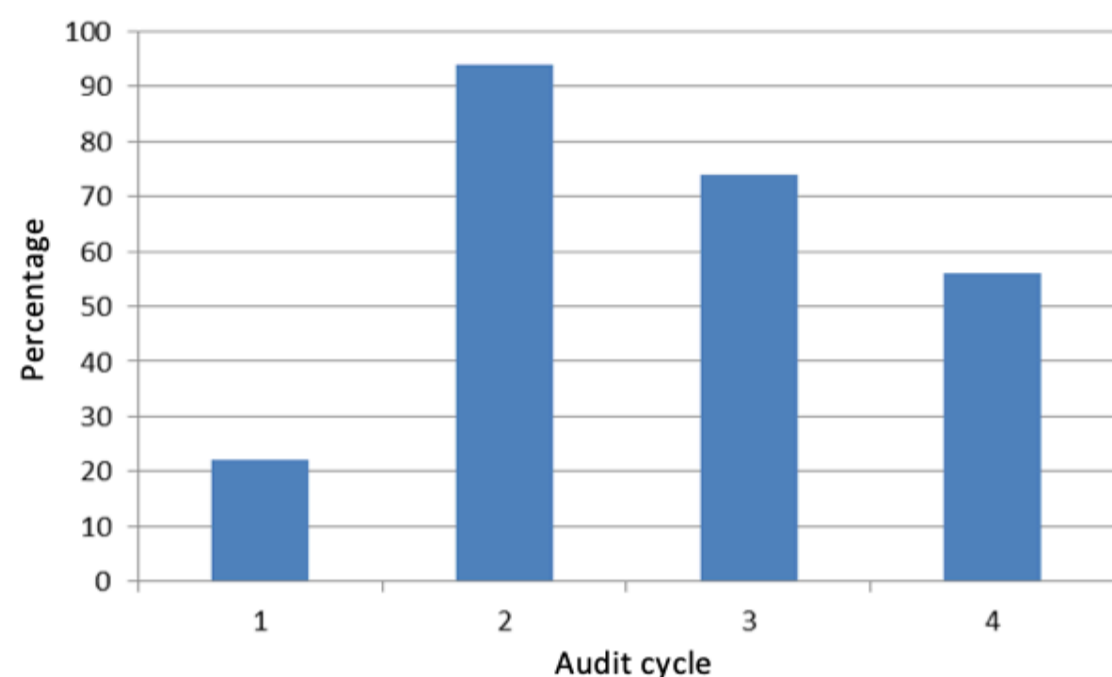
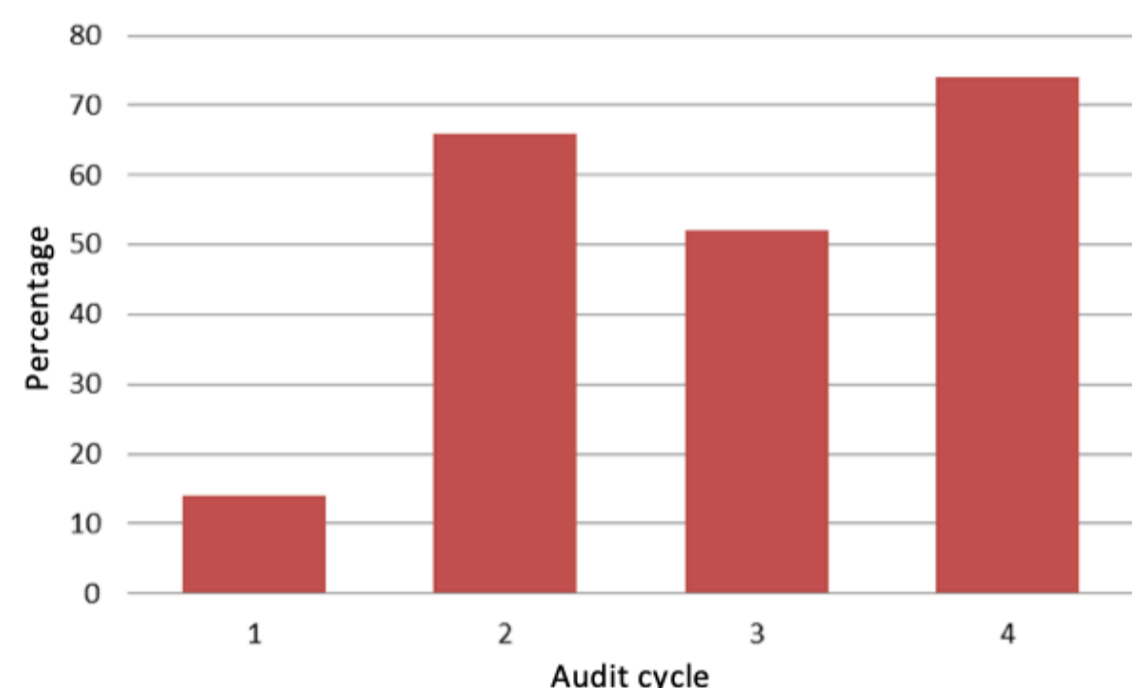


Figure 2: Was there appropriate fetal monitoring?



As can be seen in Figure 1 the compliance to local documentation policies increased from 22% in the first audit cycle to 93% after the first education sessions. This then decreased the further away from the education sessions however the overall compliance remained increased at 57% during the final audit cycle. Similarly the adherence to fetal monitoring policy showed an increase from 13% in the initial audit to 67% after the first education session and the policy adherence in cycle 4 was 72%. The number of major issues identified across all domains decreased from 32% (cycle 1) to 8% (cycle 4).

## Conclusion

Documentation and adherence to policies and procedures saw an overall improvement from the first to the fourth audit cycle however there was a drop off in-between demonstrating that ongoing education is required to ensure that staff remain vigilant in policy and procedure adherence. Use of audit with feedback can improve the quality of documentation and policy adherence however the improvement is difficult to sustain.