# The quality of documentation of operative vaginal deliveries and its strategic improvement in an obstetric unit: An audit

Gunasingha H<sup>1</sup>, Mendis S<sup>1</sup>

¹De Soysa Hospital for Women, Colombo, Sri Lanka

### **INTRODUCTION**

- Operative vaginal delivery (OVD) is a key component in modern obstetric practice despite being associated with complications leading to litigation.
- In the context of rising caesarean section related complications like placenta praevia and accreta with high maternal morbidity and mortality, improving the standards of OVDs in all aspects is a timely requirement.

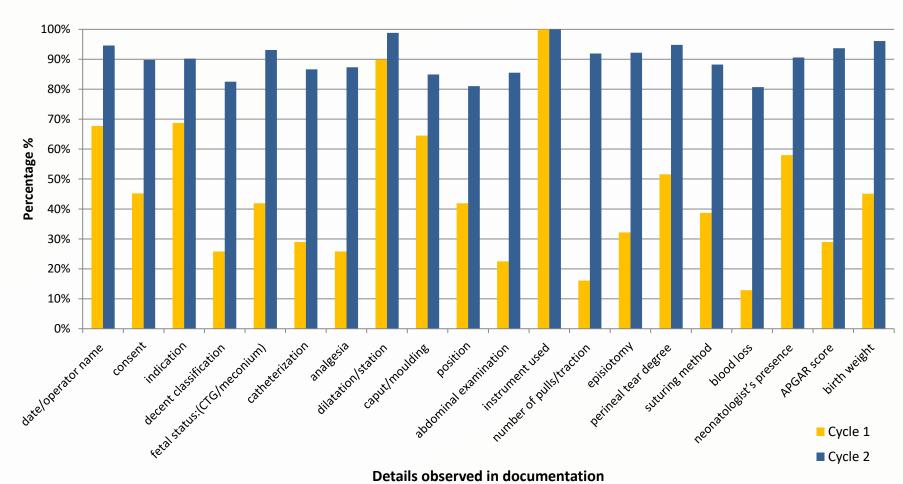
#### **OBJECTIVES**

■ This audit was performed to evaluate the documentation of operative vaginal deliveries (OVD) and identify and implement the strategies to improve the quality of documentation.

### **RESULTS**

- The percentages of OVDs were 8.9% and 8.1% of the total deliveries in the two audit cycles respectively.
- Over 80% completion was noted in every component in 2<sup>nd</sup> cycle following implementation of new strategies.

Chart 1: Percentage of documented details observed in the 2 consecutive audit cycles



### **CONCLUSION**

- An improvement of the quality of documentation of OVDs is apparent when standard proforma is in routine practice.
- Immediate documentation of the event by the operator him/herself results in more comprehensive and accurate recording of OVDs.

# **METHODS**

- A two-cycle retrospective clinical audit was conducted De Soysa Hospital for Women, Colombo, Sri Lanka involving 31 and 29 OVDs respectively.
- Operative vaginal delivery record in RCOG Green-top Guideline No.26 was the selected standard.
- Prevailing documentation practices were evaluated by a delivery note review in the initial cycle.
- Subsequently an OVD record sheet adapted from the audit standard was introduced which should be completed by the operator him/herself. The outcome of this new policy was evaluated in second cycle.
- Variables were described by percentages and frequencies.

## REFERENCES

- Royal College of Obstetricians and Gynaecologists. Greentop Guideline 26: *Operative Vaginal Delivery*. RCOG: London; 2007.
- NHS Litigation Authority. Clinical Negligence Scheme for Trusts. Maternity. Clinical Risk Management Standards, April 2005. London: NHSLA; 2005 [http://www.nhsla.com/RiskManagement/].
- Royal Australian and New Zealand College of Obstetricians and Gynaecologists. College Statement C-Obs 16: *Instrumental vaginal delivery.* Melbourne, Australia: RANZCOG; 2016.

E-Poster No: 44

Further correspondence: drhasithang@gmail.com / +0094720285945