

# Induction of Labour Booking Process – A Review of the Patient Experience

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**Introduction** - Within our department, we had found increasing staff frustrations with the Induction of Labour (“IOL”) booking process and staff perceptions were that patient were also frustrated by frequent change in induction dates.

**Aims** - We set out to identify strengths and weaknesses of the current IOL booking system in order to design and trial a new system to improve efficiency and patient flow.

**Methods** - 43 patients who presented for their IOL were asked to fill in a survey detailing their experience and satisfaction with the IOL booking process.

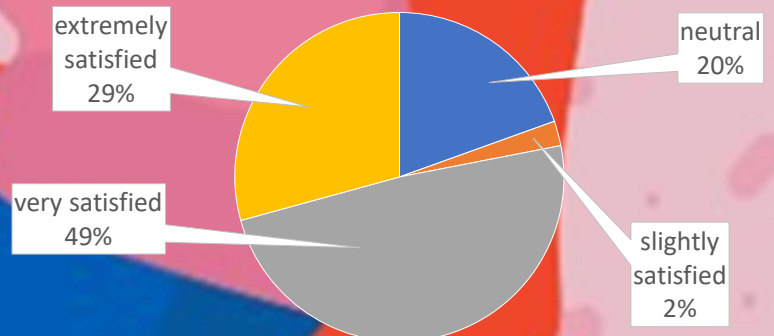
**Results** - Overall there was a high level of satisfaction among patients with the IOL booking process, with none of the patients responding as being “dissatisfied” or below on a satisfaction scale, see figure 1.

While the majority of patients felt the IOL process was adequately explained to them, 46% of the surveyed patients reported they were not informed by the staff member booking the induction that the IOL date was subject to change. Fortunately only 16% of the patient surveyed did have their IOL date changed. Some of these patients reported they were “dissatisfied” or “extremely dissatisfied” with this outcome. Overall, however, there was a high level of satisfaction in patients whose IOL date had not been changed.

39% of patients reported they were not offered written information about the IOL process and 16% of patients felt that the IOL process was inadequately explained. Further to this, 18% reported they did not feel they were offered the opportunity to ask questions about the IOL process.

Figure 1

## How satisfied were you with the IOL booking process?



**Discussion** - The data suggests overall that patients are satisfied with the current IOL booking process however it was limited by the small sample size. Additionally staff member opinions are yet to be formally assessed via a survey.

The negative findings around the patient experience are potentially a product of the time pressures felt by staff during antenatal appointments when booking IOLs. These findings will form part of the focus of the design of a new system to book IOLs in our department, which will aim to improve efficiency and workflow whilst maintaining or improving patient satisfaction and will be the subject of further research within our department.