After identification of SSF’s in a dedicated perinatal audit meeting, improvements in obstetric care are made based on a Plan-Do-Check-Act-cycle.

The perinatal mortality and morbidity audit improves obstetric care at our hospital by:
1. Increasing awareness among caregivers on specific problems pertaining to obstetric care.
2. Leading to concrete improvements in our system of care based on the findings in the audit.
3. A greater sense of interdisciplinary collaboration and understanding amongst caregivers.

BACKGROUND

• The perinatal audit was initiated in 2010, predominantly because birth outcomes in the Netherlands lagged behind in comparison to most other Western-European countries.

• This mandatory national program was a strategy to systematically identify substandard care factors (SSF).

• An SSF is any factor in which care was not delivered in accordance with professional requirements for good clinical practice, national guidelines or local protocols.

• After identification of SSF’s in a dedicated perinatal audit meeting, improvements in obstetric care are made based on a Plan-Do-Check-Act-cycle.

RESULTS

Figure 1. Overview of the number of cases discussed, substandard care factors (SSF’s) found, and the number of SSF’s for which an improvement had been implemented by the time of the next audit meeting. A total of 9 audit meetings took place. Another 22 concrete suggestions to further optimise care were made during the meetings, 50% of which were implemented. A description is shown of important categories of SSF’s and care improvements. Data were derived from logbooks.

PERINATAL AUDIT MEETING

- Multi-disciplinary approach
- Continued implementation of your care improvements
- Discuss identified cases together from pregnancy to childbed (based on the anonymized report)
- Share free and share free environment
- Determine substandard care factors
- Suggest improvements for care or appoint a responsible person

REFERENCE

Albino Albert Schweitzer ziekenhuis: The International Forum on Quality and Safety in Healthcare – Amsterdam 2 – 4 May 2018

DISCUSSION

• Any patient case (not necessarily severe illness or mortality) selected for an audit can help to identify factors in which patient care can be improved.

• The audit leads to a greater sense of interdisciplinary collaboration and understanding, due to the ability to reflect as a group on these often severe cases.

• The current perinatal audit topics (2017-2019) are perinatal asphyxia, preterm mortality, uterine rupture and babies with hyperbilirubinemia (jaundice).

• Choices are yet to be made regarding the possible role that patients could play in the perinatal audit.