

Background:

According to RCoA Guidelines for the Provision of Anaesthesia Services, Chapter 9, 5.5: All women who have received an anaesthetic intervention for labour and/or delivery should be reviewed postnatally.

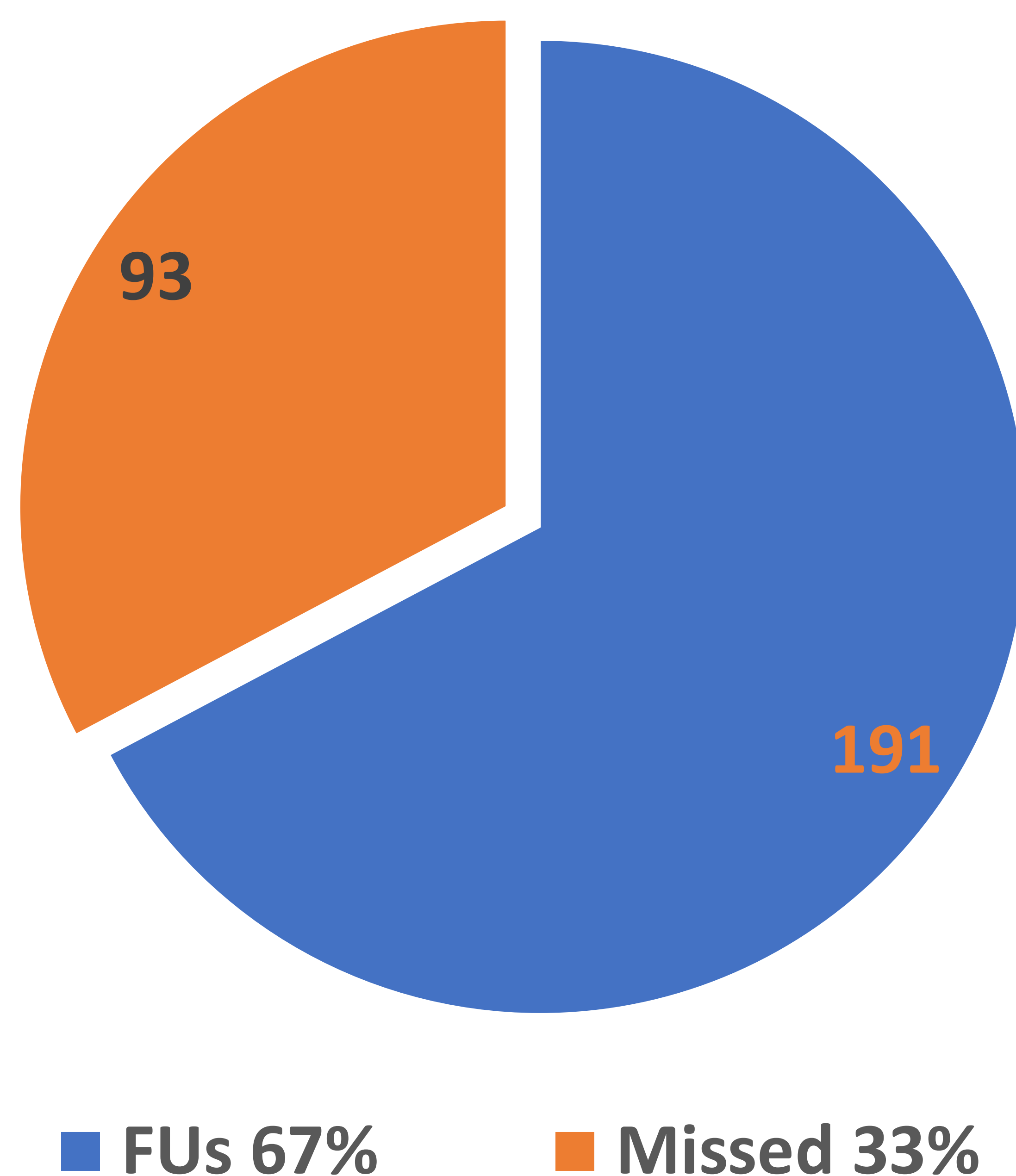
Aim:

1. To Follow-up all the women before discharge or telephonically after discharge who had any anaesthetic interventions such as spinal, epidural, general anaesthesia, remifentanil PCA or even unsuccessful attempt at neuraxial block.
2. To create an electronic system to follow-up and archive the patients list for future audits.

Methods:

- 284 patients over the span of three months audited for follow-ups and results discussed in Clinical Governance. (Jan 2024 – March 2024)

Audit Results



QI Project

Maternity Staff Level

1. To consent patients (who did not get face to face follow-up by Anaesthetist before discharge) for telephonic follow-up.
2. Document the consent on electronic record as a part of discharge criteria.

Anaesthetist Level

1. Face to face or telephonic follow-ups of the patients.
2. Document follow-up notes electronically in patients record
3. Add patients to follow-up lists
4. Add to Archived list once followed-up

IT Level

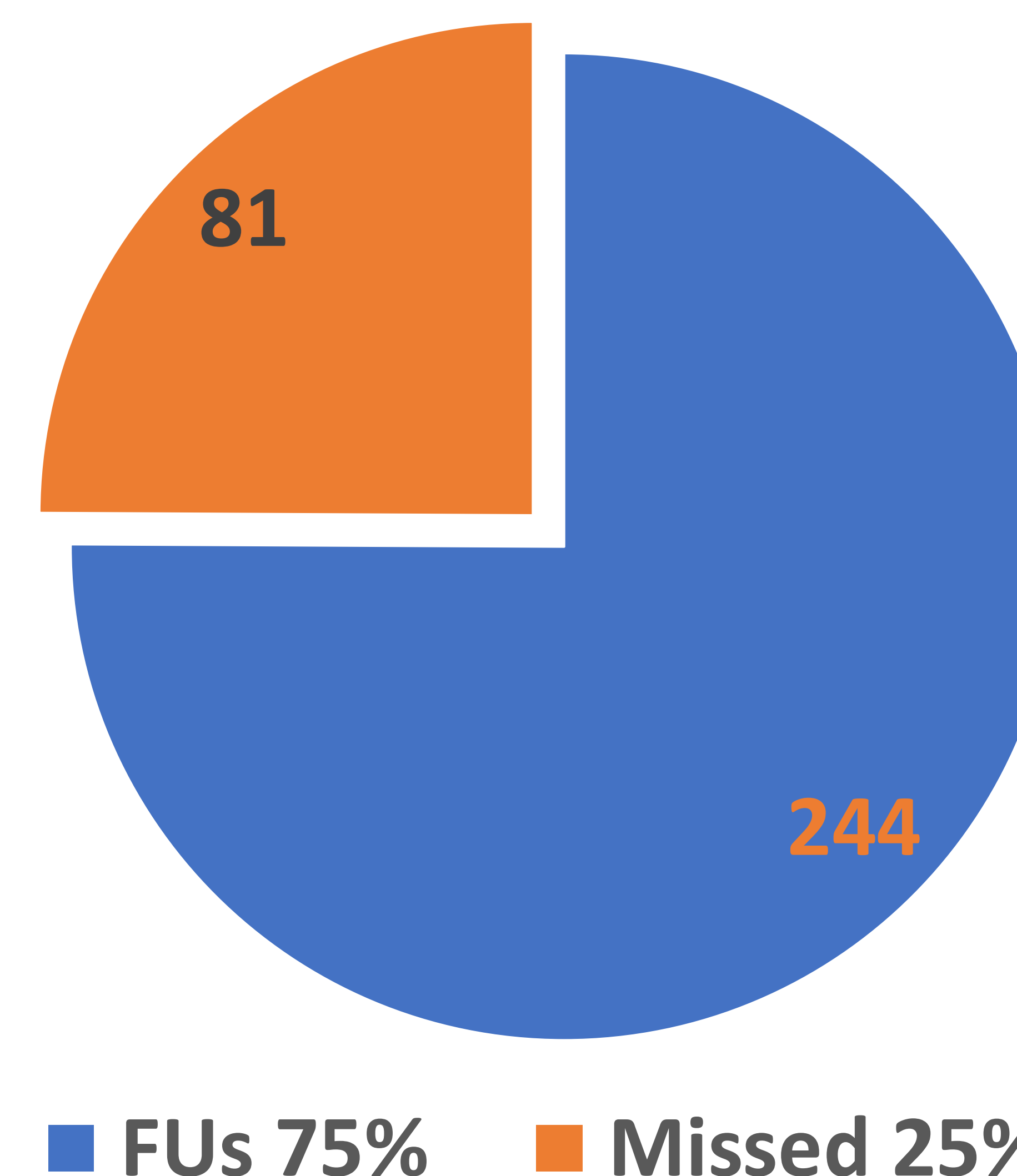
1. To add telephonic consent option to maternity discharge criteria.
2. To create Anaesthetic follow-ups and Archived lists.

Department Level

1. Training of new doctors starting Obstetric at the time of induction to use electronic system.
2. To update all the maternity staff regarding this new change at already running weekly take five initiative.

Mid-cycle Audit

- Another audit performed during QI project as PDSA cycle to see effectiveness and 325 patients audited over the span of three months. (July, 2024 – Sept 2024)



Future Plans

- To re-audit to make sure the Aim is being achieved.

References

<https://www.rcoa.ac.uk/gpas/chapter-9>