



Improving Women Waiting Time in Antenatal Assessment Unit, a Quality Improvement Project

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RCOGWORLD
CONGRESS2023
12-14 JUNE 2023 • LONDON

Introduction

The Antenatal Assessment Unit (AAU)/labour ward triage is the first point of entry for patients referred to the hospital as an acute obstetric emergency by their doctors, community midwife, Antenatal clinic, day assessment unit or themselves. Ideally, an obstetric AAU should be distinctly different to that of other obstetrics units in the hospitals and should be configured with operational policies to provide an optimal environment for high-quality medical and midwifery assessment and care, 24 hours a day, over 7 days a week before admission, discharge, or transfer to the appropriate ward. It is also cost-effective, reducing admission to the Labour ward and antenatal word.

Project Objectives

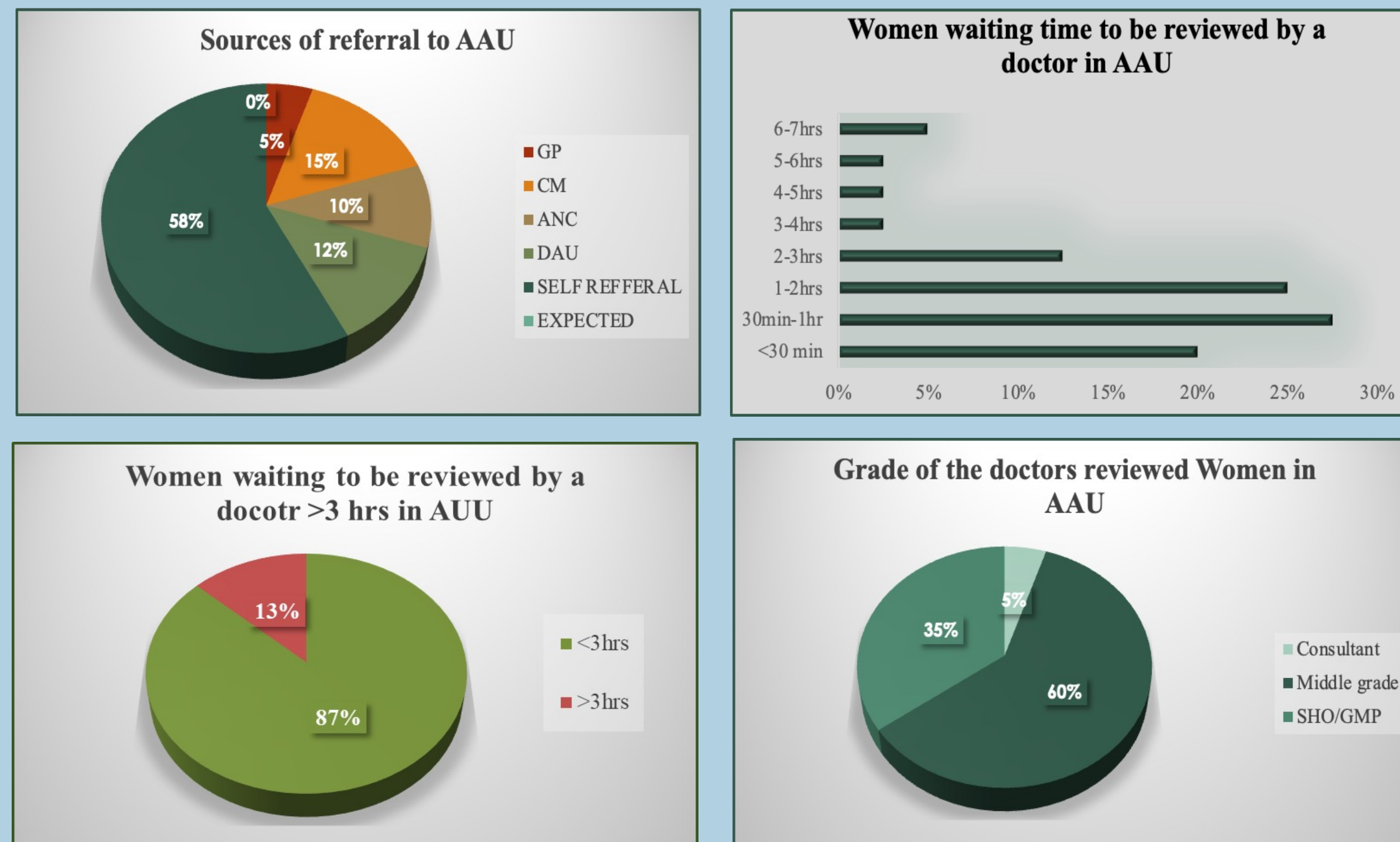
To assess the average waiting time for women to be reviewed by a doctor in AAU in Princess of Wales Hospital. To review the current escalation process in case of long waiting time. To improve the quality of care, patient safety and satisfaction. No previous comparable local data so this project could be potentially used as a benchmark for future audits.

Study design and Methods

The prospective quality improvement study was undertaken in April 2020 and the cycle closed on July 2022. Pro forma were filled by midwives or doctors managing women attending AAU. Study inclusion criteria were all women who attended AAU and were required to be reviewed by a doctor as per local policy. All Incompletely filled Pro forma were excluded from the study. The QIP 2020 results were presented in the clinical governance meeting and the agreed maximum waiting time was 3hrs and waiting for more than that should trigger an incident form. An apology should be offered and documented in every patient's case note and reasons for the delay should be documented. In addition, there was also a recommendation to include a comment on waiting time in the patient satisfaction feedback form.

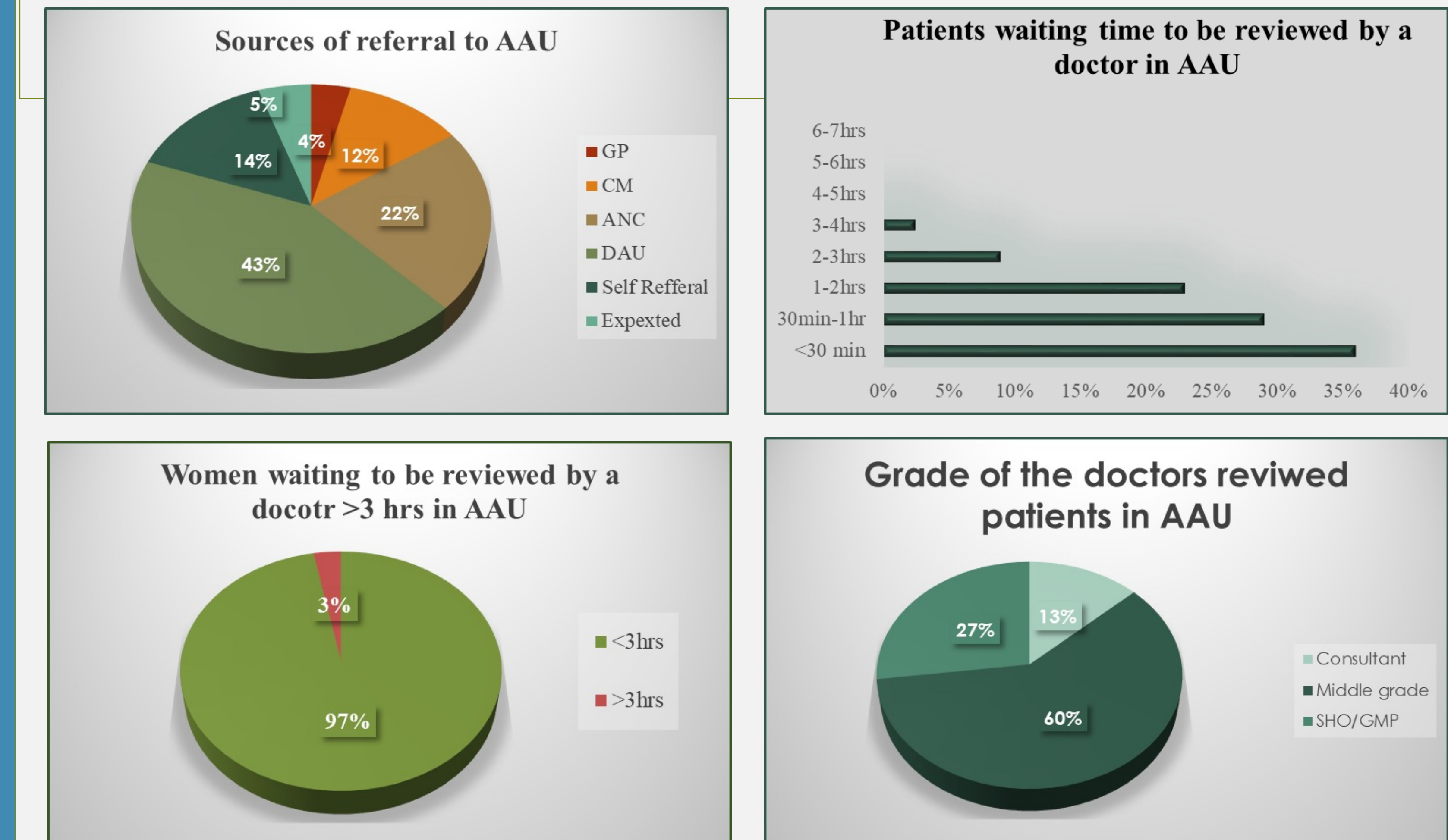
Results I 2020

The project commenced on June 2020, and delayed action plan due to COVID Pandemic. Almost two thirds of women reviewed AAU as self-referral for a different reason. Almost half of the women attended AAU seen by a doctor within 1 hour of referral by MW. However, 13% waited more than 3 hours, of which half of them actually waited up to 6 hours. Most women are referred to middle-grade doctors, with no referral made to a consultant even after 3 hour wait.



Results II 2022

Women waiting less than 3 hours, to be assessed and reviewed by a doctor, in AAU improved from 87% in 2020 to 97% in 2022. The escalation process improved by 50%, hence, no woman waited more than 6 hours in 2022. All the obstetrics and midwifery teams were made aware of the escalation process and waiting time in AAU improved dramatically. Women waited for review by a doctor > 3hrs 2022 were 13% vs 2020 3%. Less SHO and more Consultant involvement, 5% 2020 vs 13% 2022.



Conclusion

This project highlights the importance of situation awareness to improve the quality of our service in AAU in Princes of Wales Hospital. Once the AAU team was made aware of the escalation process and the target time was agreed upon for this activation, dramatic improvements were seen in patients' waiting time and patients care.

Rate	Agreed Standards	Expected (compared to 2020)	Actual
Waiting < 3hrs in AAU	100%	87%	97%
Waiting > 6hrs in AAU	0%	6%	0%
Escalation activated for waiting to > 3hrs	100%	0%	50%

Acknowledgments

Thank you to all Triage(AAU) Princes of Wales Hospital midwives who supported this work: Donna Hall, Claire Price, Tammy Greenhall, Gemma Evans, Gillian Lewis & Mari Davies.