

Labor of Love: Transforming Maternity Care In Emergency Departments for Expectant Mothers!

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Introduction:

Timely identification of critically ill pregnant and postpartum women is essential to prevent maternal mortality and morbidity. In Al Wakra Hospital's Obstetrics and Gynecology Emergency Department (OB ED), there has been a significant increase in patient volume, particularly among those with a gestational age of ≥ 24 weeks, who currently account for 31% of the overall OB ED population. To address this challenge, it is imperative to implement a robust maternity triage system that meets regulatory requirements and addresses local needs. The aim of this project was to provide a more effective and efficient approach to acute care for obstetric cases with a gestational age ≥ 24 weeks in Al Wakra Hospital's Obstetrics and Gynecology Emergency Department (OB ED).

Aim:

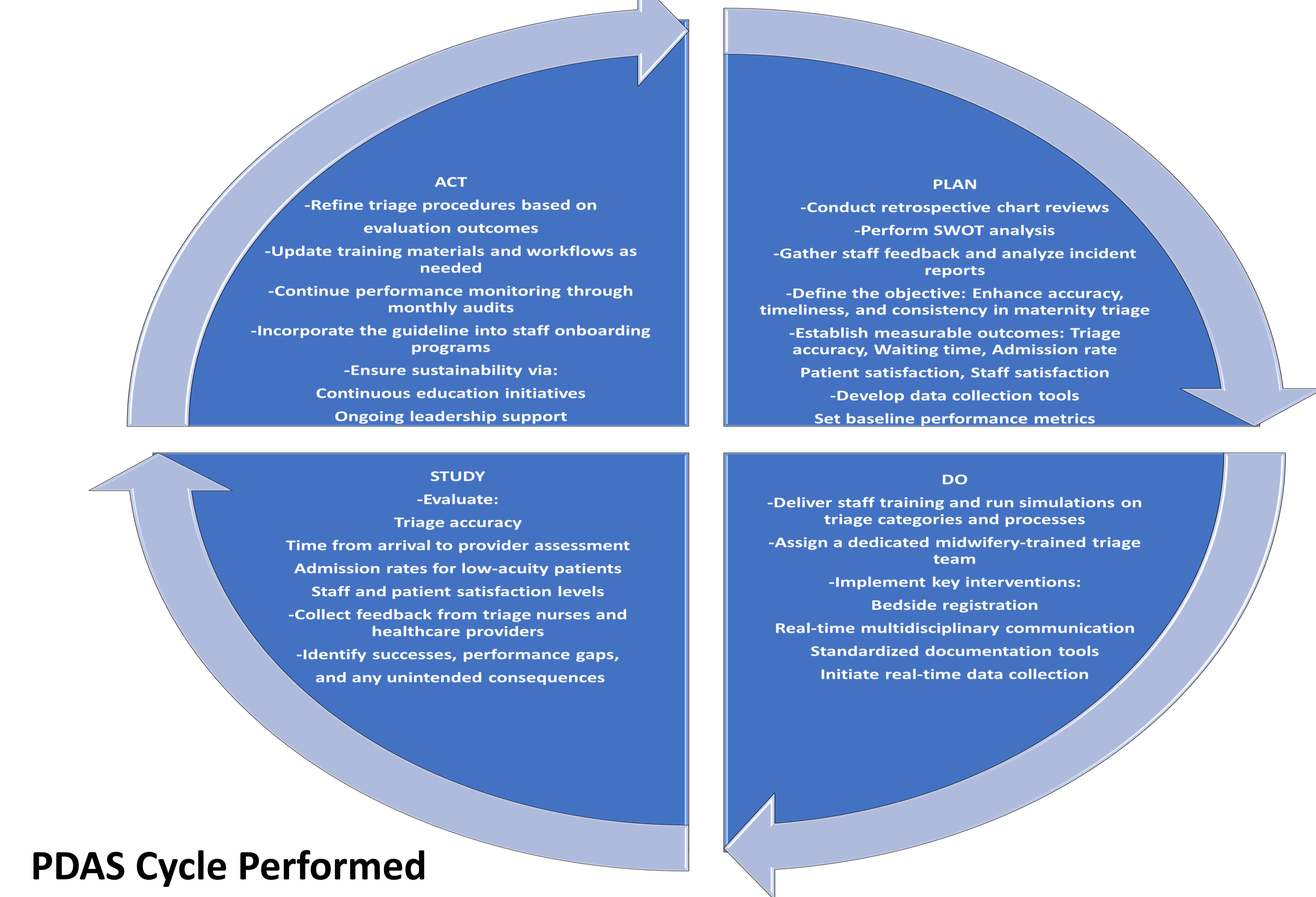
Provide a more effective and efficient approach to acute care for obstetric cases with a gestational age ≥ 24 weeks.

Objectives:

Prioritize patient safety and improve acuity levels Ensure prompt assessment and management for urgent obstetric, medical, or surgical opinions Regulate client turnover, minimizing waiting times Optimize critical bed capacity in antenatal and delivery areas Enhance obstetric patient flow.

Design:

A post prospective observational design was used. This design allows comparison of key performance indicators before and after implementing the change initiatives.



Methods:

Using a pre-post prospective observational design, key performance indicators were compared before and after the implementation of maternity triage improvement initiatives. A SWOT analysis and retrospective analysis of patients' records were conducted to identify areas for improvement. Multiple PDSA cycles, guided by the IHI model for improvement, were performed from January 2022 to December 2023. These cycles included interventions such as bedside registration, real-time communication, a dedicated midwifery-trained triage team, and staff-patient engagement. Continuous data collection, statistical analysis, and monitoring of staff and patient satisfaction, length of stay (LOS), and admission rates were conducted to assess the impact of the interventions.

Results:

The implementation of the maternity triage improvement initiatives led to a substantial improvement in efficiency. Waiting times for cases beyond 24 weeks decreased from 31 minutes to 13.4 minutes, and the percentage of obstetric patients with LOS>8 hours decreased from 13.6% to 1.5%. Discharge against medical advice (DAMA) decreased from a median of 5% to a sustained rate of 1%. Real-time communication resulted in faster decision-making and response times. Patient satisfaction with waiting times increased from 68% to a steady 97%.

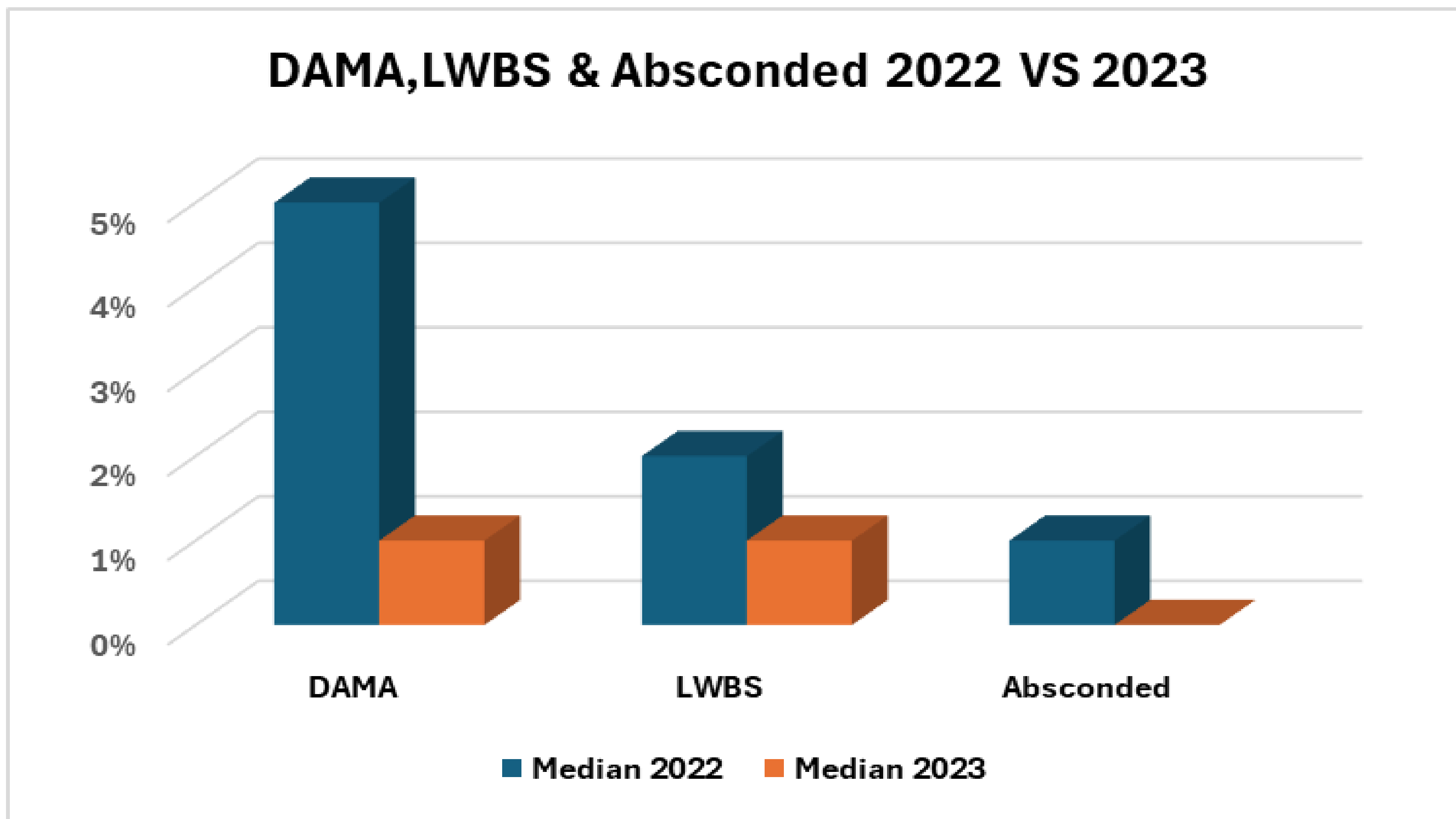


Figure 1: The graph illustrates a significant decline in DAMA (Discharge against Medical Advice) .LWBS (Left without being seen) and Absconded rate, 2022 vs 2023

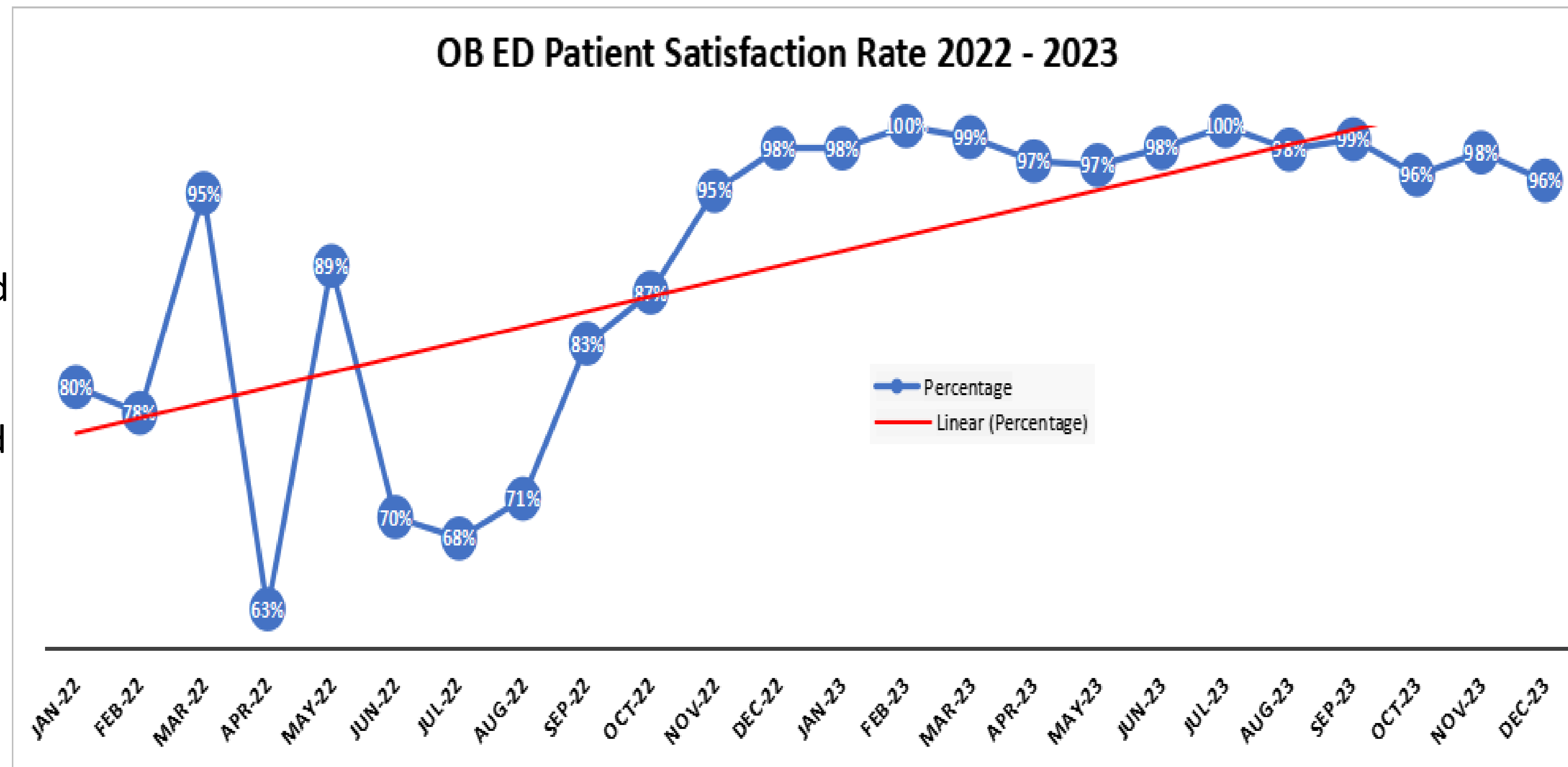


Figure 2: Monthly Elevation: Amplifying Patient Satisfaction in Obstetrics & Gynecology ED AWH (2022-2023)

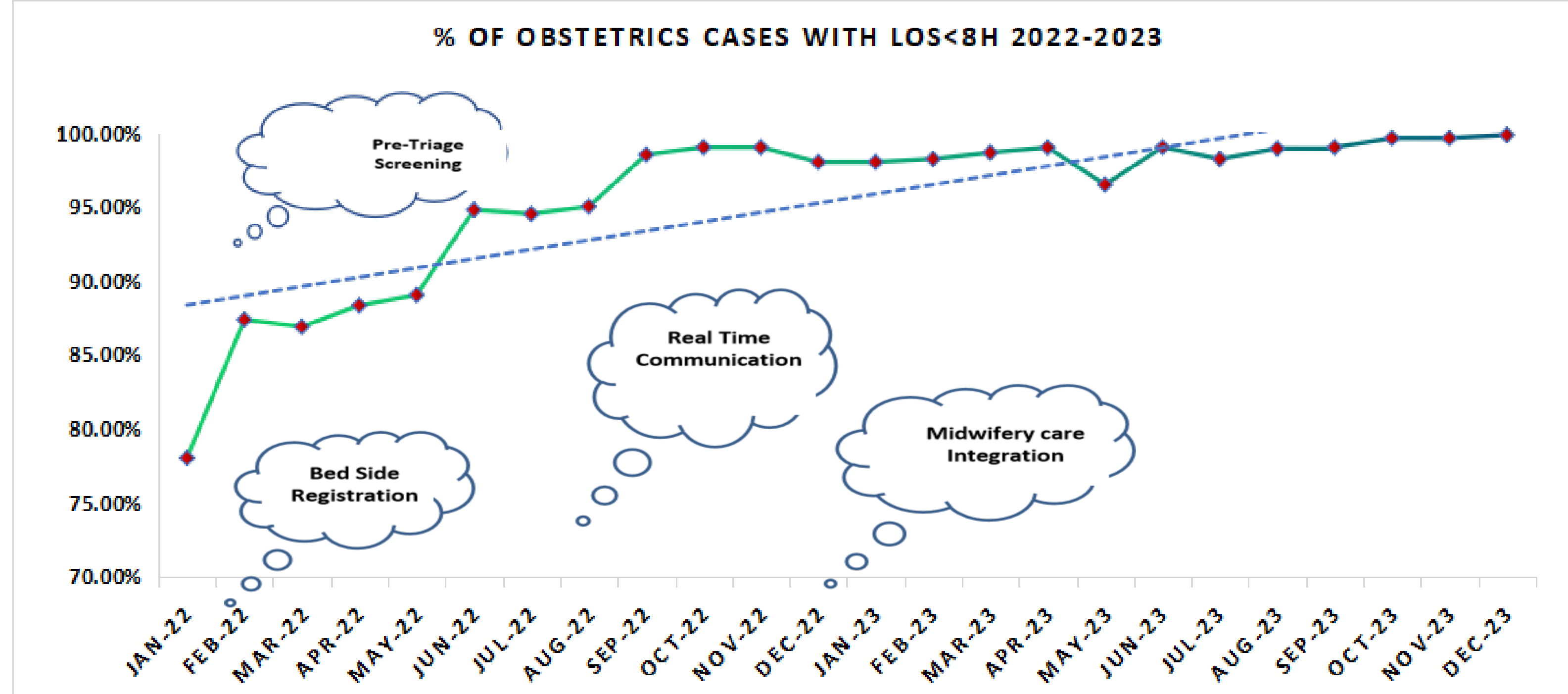


Figure 3: Quarterly Triumph: Luxuriant Surge in Obstetric Stays < 8 Hours (2022-2023)

Conclusion: The implementation of the enhanced maternity triage initiatives significantly improved patient flow and the quality of care in Al Wakra Hospital's OB ED. This resulted in timelier initial assessments, decreased waiting times, and increased patient and staff satisfaction.

References

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