

Introduction and Background

- This audit was done as a result of maternal death .
- The period of time the project covers from 1 April 2023 to 30 September 2023
- The benefit(aim) :
- -To assess the booking process and referral for women to the preterm clinic .
- -To implement alterations aiming to enhance the preterm clinic referral services and enhance patient safety .
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Preterm Booking Review Audit

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METHODOLOGY



Data:

The tool you used to collect data through collection of preterm clinic attendance
The number of cases 253
The frame of time the audit covers from 1 April 2023 to 30 September 2023



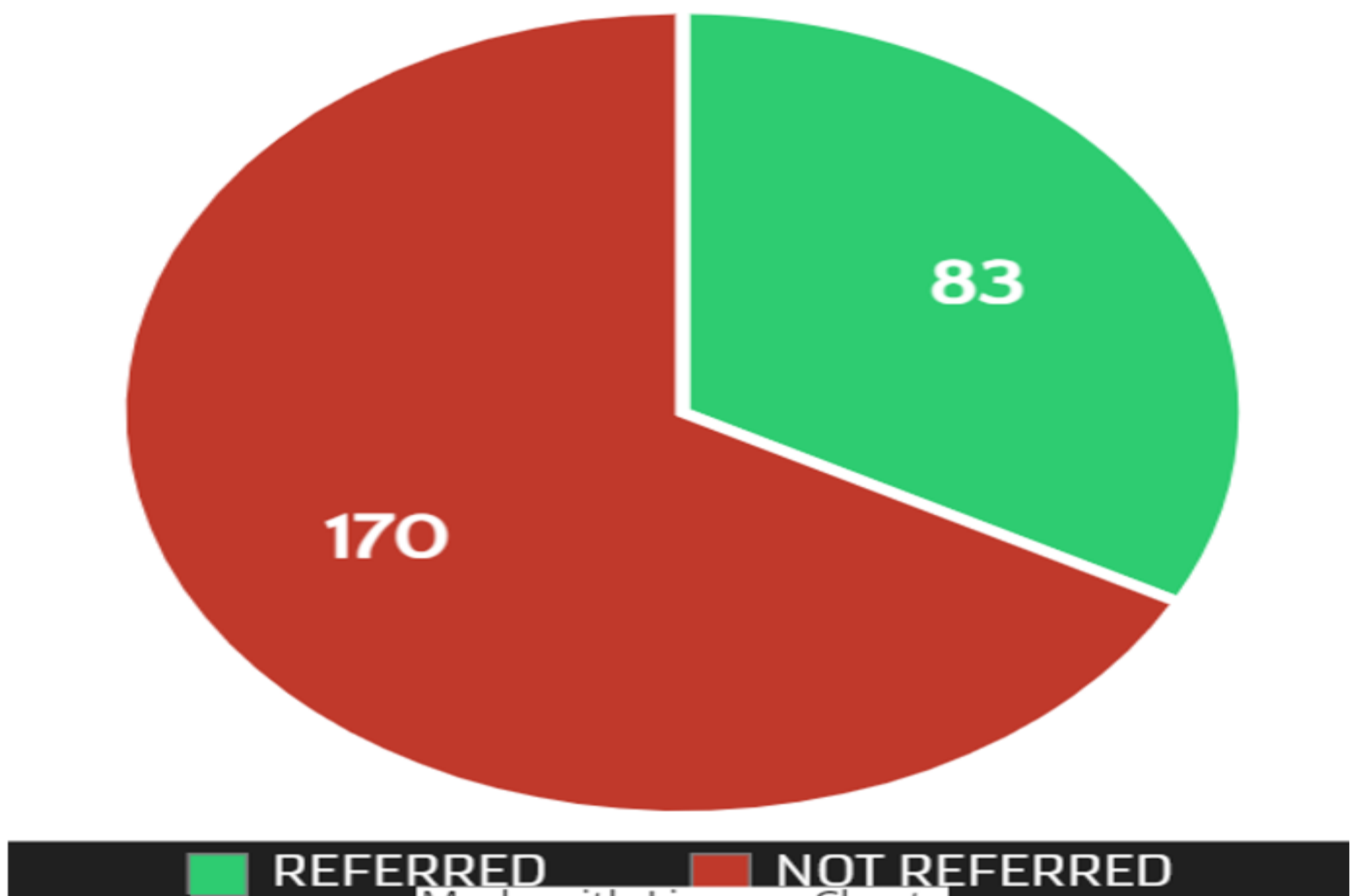
Analysis: software; Excel.

INDICATION OF PRETERM CLINIC REFERRAL

PRETERM BIRTH RISK FACTORS

Previous Caesarean Section at Full Dilatation
History of Significant Cervical Excisional Event
Previous Preterm Births or Mid trimester Loss between 16-34 weeks
Previous Preterm - Prelabour Rupture of Membranes <34 weeks
Intrauterine adhesions/ build of scar tissue in the uterus - Asherman's Syndrome
Previous Cervical Cerclage/ surgery - Cone Biopsy or LLETZ procedures to remove abnormal tissue from cervix
Uterine Variants/ malformations - e.g double uterus, bi/unicornuate uterus etc.
History of Trachelectomy - Surgical removal of the uterine cervix for cervical cancer

RESULTS



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253\ 170-WOMEN WAS NOT REFERRED TO PRETERM CLINIC

67%

253 \ 83-WAS REFERRED = 33%

RECOMMENDATIONS

Changes since the adverse maternal mortality outcome -

(1) Introduction of new and name Preterm Midwife

(2) Introduction of new preterm email address for Community Midwives and all staff to seek advise when unsure if women should be referred for Preterm Clinic.

(3) Spot Checks by Ms Burrell.

(4) Trainee Governance Teaching by Ms Burrell.