

EXPLORING POTENTIAL OF CRITERIA-LED DISCHARGE IN POST-CAESAREAN CARE: A SYSTEMATISED REVIEW

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INTRODUCTION

This review investigates the effectiveness of Criteria-Led Discharge (CLD) for patients undergoing elective caesarean sections in the UK, focusing on its effects on patient flow, hospital resource use, patient outcomes, and staff perceptions.

CONCEPTUAL FRAMEWORK

Based on CLD, following are the attributes:

- Streamlined patient flow
- Enhanced postnatal recovery experiences
- Reduced In-patient stay duration

OBJECTIVE

This review investigates the effectiveness of Criteria-Led Discharge (CLD) for patients undergoing elective caesarean sections in the UK, focusing on its effects on hospital resource use, patient outcomes, and staff perceptions.

DESIGN

A systematic literature review was conducted, synthesizing quantitative and qualitative evidence according to PRISMA guidelines

METHODOLOGY

A comprehensive search across Medline, CINAHL, Cochrane Library, and Scopus identified relevant studies from the last 10 years, search criteria was broadened to include related studies. Data extraction and quality appraisal were performed using the MMAT and CASP checklists

CHALLENGES

There is no published literature on CLD in maternity care, which led to broadening of inclusion criteria and ensuring related studies can be used to draw inference and build evidence



KEY FINDINGS

19 studies met the inclusion criteria, the reporting followed PRISMA guidelines. Narrative synthesis was conducted, supported by Thematic synthesis. Following were the domain guide used:

1. The staff perspectives to discharge pathway changes.
2. The patient perspectives to early discharge
3. The sustainability of CLD integration (with multiple factors like staff autonomy, policy alignment, medico-legal concerns and training needs)
4. Clinical outcomes and patient safety.

KEY CONTRIBUTIONS OF THIS STUDY

- Providing insight into CLD integration in discharge pathway
- Empowering midwives to ensure collaborative work
- Guidelines for timeliness and consistency in discharge decisions
- Decreased variations across maternity units
- Enhance patient safety and satisfaction



Figure 1. Frequency of identified themes

CONCLUSION

CLD is a promising strategy for enhancing postnatal care after elective caesarean sections by optimizing resources and increasing patient satisfaction. Although integration, and long term sustainable success of this discharge model requires standardized criteria, thorough staff training, and interdisciplinary collaboration. Future research should focus on randomized controlled trials and long-term assessments to support NHS policy development.

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