



Healthcare Organization Commitment

Contact Details

Name

WILLIAM WILSON

Phone

714-456-6844

Email

wcw@uci.edu

Position

Chief Medical Officer

Organization Name

UCI Health

Commitment Details

How many hospitals are represented in this commitment?

Last Report	Current
1	1

Action Plan

- Looked into every NTSV case 2016-17. Found that most inductions were medically indicated (only 1 or 2 elective inductions), NTSV C/S were primarily for Cat II tracing remote from delivery and Arrest of Descent (2nd stage labor arrest). Every failed induction met the new recommended criteria (i.e. 12-18 hours, ruptured on pitocin) and all labor arrests followed the ACOG recommendations (e.g. 1st stage: 6 hours ruptured on pitocin with inadequate contractions or 4 hours with adequate contractions; 2nd stage: 3-4 hours of pushing depending on epidural and parity).
- Actions
 - o FHR tracings: Perinatal Quality Foundation Exam by all MDs/RNs Standardizing NICHD terminology and strip interpretation
 - o Cat II FHR tracing algorithm implemented
 - o 2nd Stage labor: 2nd stage evidenced-based

labor algorithms implemented □ Peanut balls to facilitate labor management and vaginal delivery □ Labor management classes for RNs □ OVD education for MDs • Grand Rounds • Resident lectures o Grand Rounds reviewing all this information last Fall o Individualized score cards o Monthly newsletters with stats - Perinatal in situ simulation - Track, monitor and report metrics monthly at OB Quality and Safety and Grand Rounds, annually at QSOC - Implementation of standard induction scheduling - Offer VBAC as an option with a success rate higher than the UC System and the California Maternal Data Center

Commitment Update

The following activities were completed to support the initial action plan and sustain the achieved milestones. The two mandatory educational sessions were provided to the perinatal staff with 100% participation. Perinatal annual skills day for the second stage of labor algorithm and the perinatal labor support class that includes non-pharmacological interventions to support laboring mothers. The nurses were educated with the use of the peanut ball. Research have shown that the use of a peanut ball may decrease NTSV C-section birth rates. Currently, nurses and physicians are Perinatal Quality Foundation (PQF) certified. The GE Centricity update includes Web Analytics that support fetal heart interpretations utilizing NICHD guidelines. The perinatal annual skills day included the teaching regarding the second stage labor support algorithm that was developed collaboratively with the physicians, with nursing interventions highlighting the repositioning of the patient's position every 30- 60 minutes during the second stage of labor. 100% of the perinatal staff was trained to go through the perinatal labor support class to reinforce the non-pharmacologic nursing interventions that nurses provide during second stage of labor, the peanut ball was introduced to be utilized during the second stage of labor. Evidence have shown that the utilization of the peanut ball may decrease the risk of having a C-section. A nursing policy was developed for the use and maintenance of the peanut ball. Both nursing and physicians are currently Perinatal Quality Foundation (PQF) certified. All new employees are required to have PQF certification. The nursing leadership has purchased an upgrade for the GE Centricity (Software). This will help both nursing and physicians interpretations of the Fetal heart monitoring. The upgrade has tools to support the definitions of the NICHD guidelines in interpreting fetal heart strips.

Your commitment aligns with APSS

11C: Preventing Unnecessary C-Sections - Update

Please describe any best practices your organization has learned through your commitment and share valuable lessons or challenges that were overcome

Multidisciplinary learning was highlighted as it takes a team to have a good patient outcome.

Impact Details

Initial Commitment	Commitment Update	Project Next Year
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Lives Lost 0	Lives Lost 0	Lives Lost
Lives Spared Harm Target 0	Actual Lives Spared Harm in last 12 months 0	Lives Spared Harm Target for following calendar year 0
Lives Saved Target 0	Actual Lives Saved in last 12 months (might differ from initial target) 0	Projected Target of Lives Saved for following calendar to try to finish commitment 0
	New Lives Lost (lives lost – actual lives saved) 0	

Acknowledgement

Yes, I acknowledge that this commitment may be used for external communication and publicly announced at the World Patient Safety, Science & Technology Summit. Furthermore, I agree that this commitment may appear on the website of The Patient Safety Movement Foundation or the Masimo Foundation. I also give permission for my commitment to be used in support of the promotion of the World Patient Safety, Science & Technology Summit as well as The Patient Safety Movement initiative.