

First Baby Initiative
Introductory Meeting for Hospital Participants
July 29, 2011
World Café Report

Meeting participants discussed strategies for reducing C-Sections in first-time mothers, barriers that will be faced, and possible solutions as they rotated through discussion groups under three headings: General, Pre-Labor, and Labor. The following are transcribed flip-chart notes from each of the discussion groups. No attempt has been made to interpret the notes here. They are reproduced for the use of project participants in recalling the substance of the discussions.

General (Group 1)

- Education – induction and c-section risk
- Reimbursement Changes
- Alignment with Liability coverage
- Physician Education
- Peer Review
- Individual Physician Report

Pre-Labor (Group 1)

- Keep out of hospital if NOT in labor
- Stork trail
- Better education (s/s labor)
 - Posters in triage room
 - Website/youtube for labor info
 - Facebook
 - Texting
- Induction – when it is appropriate – medically indicated
- Bishop score
- Family education
- OB Patient Educator
- Residents to attend classes (birthing, breastfeeding)
- AWHONN review (nursing)
- Education –
 - Breech version
 - VBAC
 - Induction
- Better phone triage and instructions to patients
- Physicians
 - Don't induce for convenience or to "deliver your patients"

General (Group 2)

- Education of docs to conform with quality indicators
- Insurance Co and JACHO
- Billboard/Poster March of Dimes
- Interim reports – report cards (quarterly) email and paper
- Champion will be section chief
- Peds consult prior to induction
- Peer review for (lying)
- Educational Texting – text4baby.com
- Health Stream

Pre-Labor (Group 2)

- Publish C/S, neonate, induction at monthly meetings
- Staffing
- Gatekeeper must be physician
- OB Peer Review
- ACOG review of hospital/physicians (voluntary)
- Second Opinions
- Therapeutic rest (if space allows) morphine or dilaudid
- Go to mall and walk, find friend or family that lives closer to hospital to stay with
- Patient education at onset of prenatal care: Include family in this education "We will not intervene to get you delivered until 41 weeks unless medically indicated."
- Educate the providers
- Repetition, consistency
- Advertise the campaign to patients
 - Hospital level
 - Practice Level
- Reassurance regarding litigation (to providers)

Labor (Group 1)

- Spontaneous labor – the best way
- Nursing labor support training
 - Balls
 - Showers
- AWHONN nursing ratio recommendations
- Lack of education funding
- Int. vs. Continuous Fetal monitoring/telemetry
- Walking epidurals/Epidural PCA
- Fetal position training for nursing (OP)
- Pitocin Guidelines
- 3cm/active before admission
- Triage guidelines/lack of space
- Patient education prior to admission – participation in CB classes
- Labor support person

Labor (Group 2)

- Nurse support – Yes
- No – Walking & telemetry – not usually prevents C/S
 - Most in bed
 - Majority epidurals
 - Use of Pit without (?) telemetry not available
- ?? Walking epidurals – anesthetists not trained
- Pit Protocol
 - Physician driven vs. standard
 - Difficult to get doctor to agree
- Active Management
 - Once Section, always Section
 - 3 CM – problems:
 - Sell to patient
 - Can't manage early labor at home
 - Classes – don't attend
 - Part of Prenatal visit
 - Staffing

- FHR Training
 - Interpretation of strips
 - New Terminology
 - Education (RN's get, Docs need)
- VBAC – concerns re: outcomes
- C/S rates – Report by Nurse and MD
- Telemetry
 - Room vs. walking
 - Range of telemetry
 - May be difficult to use
 - Bring in sales reps for telemetry model
- Pushing 2nd stage: Labor down
- Epidural rate – most want
- Education:
 - Childbirth classes
 - Can't get them here
 - Offer money, lunch, cigarettes
 - Make mandatory
- Pitocin
 - Standardize
 - High Usage
 - High Risk
- VBAC
 - Anesthesia not available during labor
 - Not there for emergency
 - CRNA's stay during labor
 - Insurance
- Childbirth Classes
 - Poor attendance
 - Epidural class
- Induction
 - Creative documentation
 - Consult pediatrician before inducing