



# Hospital Story

## Elimination of EET Delivery

---

James O'Brien, MD

Medical Director of Inpatient OB  
Women and Infants Hospital (RI)



American Hospital  
Association®

**HRET**

HEALTH RESEARCH &  
EDUCATIONAL TRUST  
In Partnership with AHA



# Objectives & About Us

- 'Hard Stop' possible

- **WIHRI**

- 125 Adult OB Beds

- 140 Infant Beds

- 80 Bay NICU

- 149 OB Providers (90 Community/59 Hospital)

- 8300 deliveries in 2011

- 73% of RI births





# Tests & What we Learned

---

## Fall 2008

- Single tiered inconsistently enforced 'Soft Stop'
- Day of delivery limited verification

## Outcomes

- CS Cancellations
- Unnecessary amnios
- OR delays
- Decreased patient & provider satisfaction

## Present

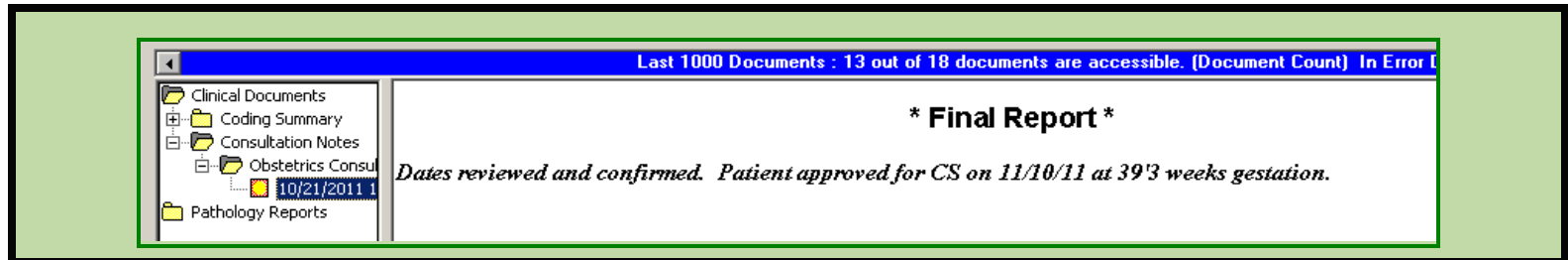
- 4 tiered 'Hard Stop'
  - Dating verification at booking
  - 1 week preview
  - Day prior review
  - Day off review
- 2 revisions of existing policy for dating verification
- Standardized dating verification tool

# Barriers & How we Resolved

- Policy revisions – ACOG compliance & beyond

(3) Ultrasound measurement of crown-rump length at 6'0 to 9'6 weeks of gestation (+ or – 4 days) supporting a gestational age of greater than or equal to 39 weeks.

- EMR transparency to reflect review



- Dealing with dating/indication discrepancies
  - Clarification email to OB/surgical coordinator
    - 15% follow up email rate



# Barriers & How we Resolved

- Gaining provider buy in
  - ‘Normalization of deviance’ vs. mounting evidence
  - Minimize provider work
- Dealing with volume
- Coordination of process – 4 tier involvement
- Short timeline with IOLs

LMP \_\_\_/\_\_\_/\_\_\_

DATE OF 1<sup>st</sup> US (*Elective IOLs*) \_\_\_/\_\_\_/\_\_\_      GA OF 1<sup>st</sup> US \_\_\_wk\_\_\_d

EDC \_\_\_/\_\_\_/\_\_\_      GA \_\_\_wk\_\_\_d  
(*GA on date of IOL*)



# Measures – What & How

- Internal review of all verifications

<b>January 2011-June 2012</b>	
Total CS	2275
Consults	2275
CS < 39'0 wk	332 (14.5%)
Late US w amnio	26

- 285 EIOs (9.7% total IOs) with same compliance

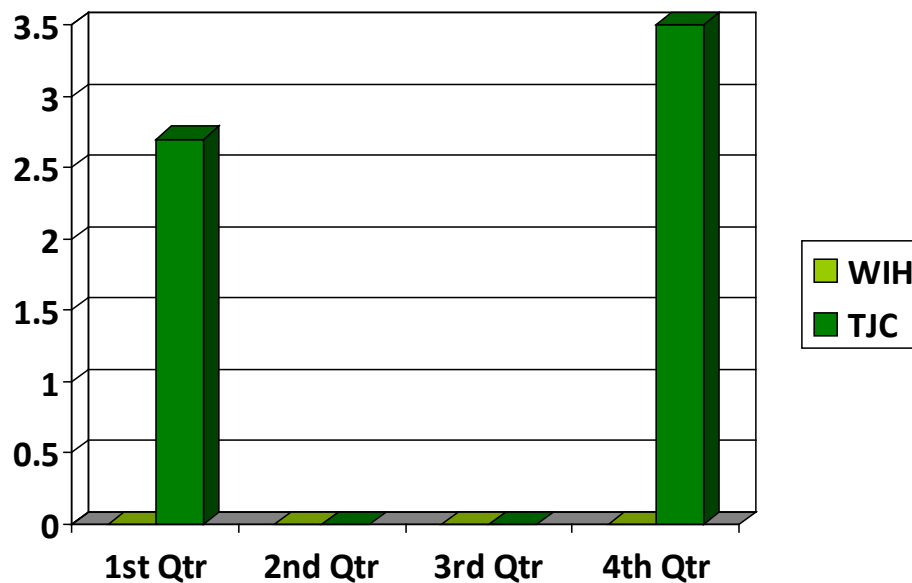


# Measures – What & How

- Discrepancies with TJC process

***Comparison of 2011 Institutional (WIH) & JC data***

% ED  $\geq 37'0$  &  
< 39'0 weeks  
GA



Quarterly Data - 2011



# Advice for others

---

- Start with a 'Hard Stop' policy
- Standardize your dating verification process
- Educate your medical & nursing staffs
- Partner with your local MOD chapter
  - MOD Toolkit
- Develop a consistent oversight process & data collection mechanism
- Share the data with staff



# Wrap Up & Next Steps

---

- ‘Hard Stop’ is proven and possible
- Questions?
- Next ‘Test of Change’ – enhanced audit process for IOL
- [jobrien@wihri.org](mailto:jobrien@wihri.org)