

Audit of Induction of Labour and Induction Trend Analysis over last 5 years

Roula Elboraei (OB/GYN-ST1), Lynda Verghese (Labour Ward Lead Consultant), Wrexham Maelor hospital

Introduction

Induction of labour (IOL) rate had consistently risen to 35-40% over the last 5 years

- Aims and Objectives**
- 1.Were the indications for induction appropriate? and analyse the indications trend since last 5 years.
 2. Were decisions discussed with the consultant?
 3. Was patient information leaflet given?
 - 4.Did the inductions lead to increased Caesareans?
 - 5.Did the inductions lead to increased PPH rate?
 - 6.Feedback at the Birth Afterthoughts clinic ?

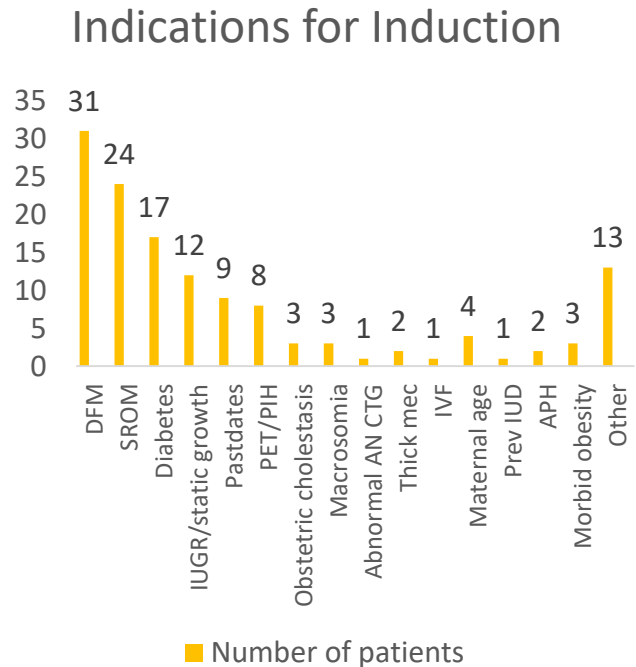
Standard

NICE guideline CG70- Induction of Labour

Materials and methods

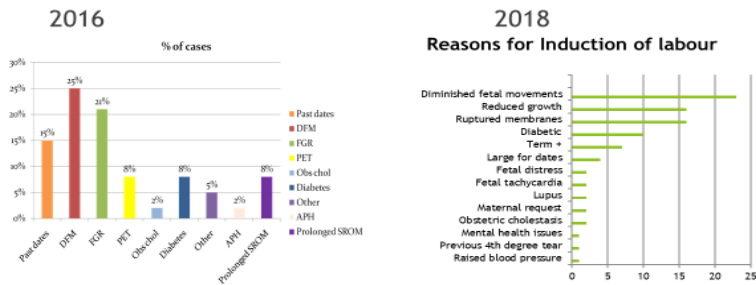
Retrospective analysis of 149 maternity notes undergoing IOL between January to February 2020.

- Results**
- Indications for induction were appropriate in 82.5% of cases.
 - Documentation suggested only 55% decisions were discussed with the consultant.
 - Only 24% of patients received the induction information leaflet.
 - 17% of those induced had postpartum haemorrhage more than 1 litre (7% - more than 1.5l).

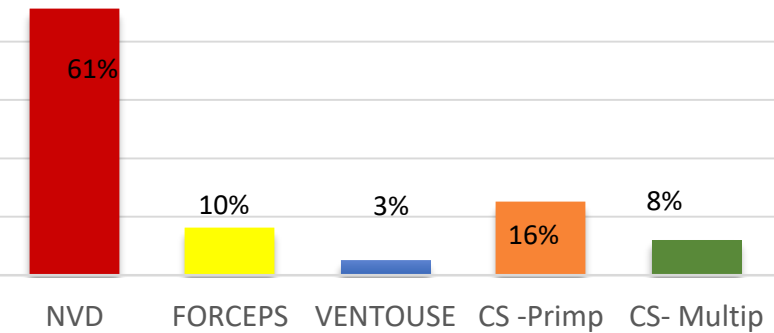


- Since 2016, Decreased Fetal Movements continues to be the leading cause of IOL accounting for 20-25% of inductions, followed closely by premature ruptured membranes(PROM), then postdates.

Trend comparison past years



The inductions did not lead to increased Caesareans delivery (>25%).More than three-fourths of induced women had a vaginal delivery.



- Recommendations**
- HES maternity statistics for 2020 show induced method of onset has increased from 21 per cent to 33 per cent in the period 2009-10 to 2019-20 .We have recommended to the Health Board to update our induction rate target to 33%.
- 2- Are we incorrectly coding women with PROM in early labour as ‘induction’ instead of ‘augmentation’ – this has been presented to our Risk team for clarification.
 - 3..A new induction booklet is henceforth being used with documentation of decision discussed with a NAMED consultant
 - 3- ‘Induction leaflet given’ to be documented in notes.

4 Sensitivity in decision making and we are exploring the use of the IDECIDE tool by Birthrights to enable an informed decision.

Re-audit One year after implementing above changes

Correspondence address:
Roula.Elboraei@wales.nhs.uk