



PEDIATRICIAN IDENTIFIED ON ADMISSION

Haley Mertens, M2; Timothy Klatt, MD; Kelly Winum, BS; Darcy Struble, BSN
Department of Obstetrics and Gynecology, Medical College of Wisconsin



BACKGROUND

- The volume of deliveries at the Froedtert Birth Center has been slowly increasing. In 2014-5, our volume increased by another 15%.
- Patient flow must be improved to minimize rescheduling of procedures due to a lack of beds.
- In exit and patient satisfaction surveys, our patients have asked to be discharged earlier in the day.
- If the patient has identified her pediatrician prior to admission for delivery, this will help us to minimize rescheduling, discharge our patients earlier in the day, and improve patient satisfaction

AIMS

- By September 2015, we will achieve and maintain our goal of 90% of mothers having identified a pediatrician prior to admission for delivery.
- We chose a goal of less than 100% because of situations that are out of our control:
 - Emergency transfers from other facilities
 - Mothers who deliver prematurely and have not had an opportunity to identify a pediatrician
- We will implement specific interventions using Plan-Do-Study-Act (PDSA) cycles. See below.

STUDY METHODS

This is a quality improvement project. We actively adjusted our processes to incorporate feedback and overcome problems. Interventions were made at intervals and plotted on a run chart along with monthly percentages.

First Intervention

The issue was brought up and discussed at the Generalist Division Meeting. We identified a need for two things:

1. A resource to enable women to easily identify a pediatrician
2. An expectation that providers will discuss the need to choose a pediatrician at the 35 week visit

Second Intervention

We looked at our data after the first intervention and we found that the majority of women who had not selected a pediatrician had received care in the resident clinic. As our second intervention, expectations of having a pediatrician identified on admission were shared with residents. The Ob-Gyn faculty who staff resident clinic also agreed to remind the residents of this expectation in real time.

Third Intervention

After our second intervention, we still were not at our target goal, so we agreed to send emails to providers who have three or more mothers per month who arrive without a pediatrician identified. With this intervention, we achieved our target.

Inclusions/Exclusions

- Only babies admitted to the Mother Baby Unit or the Special Care Nursery are included.
- Mothers who deliver twins are counted twice because each child is a separate discharge.
- All transfers are included in the data, but providers only receive emails about transfers that have been on Labor and Delivery for at least two days.

2014	# Moms	Pediatrician ID	Percentage
January	147	107	73%
February	148	118	80%
March	137	108	79%
April	148	129	87%
May	165	130	73%
June	139	100	72%
July	174	126	72%
August	156	119	76%
September	168	118	70%
October	183	136	74%
November	166	127	77%
December	183	135	74%
Mean			75%

Baseline percentages of mothers with a pediatrician identified on admission.

RESULTS

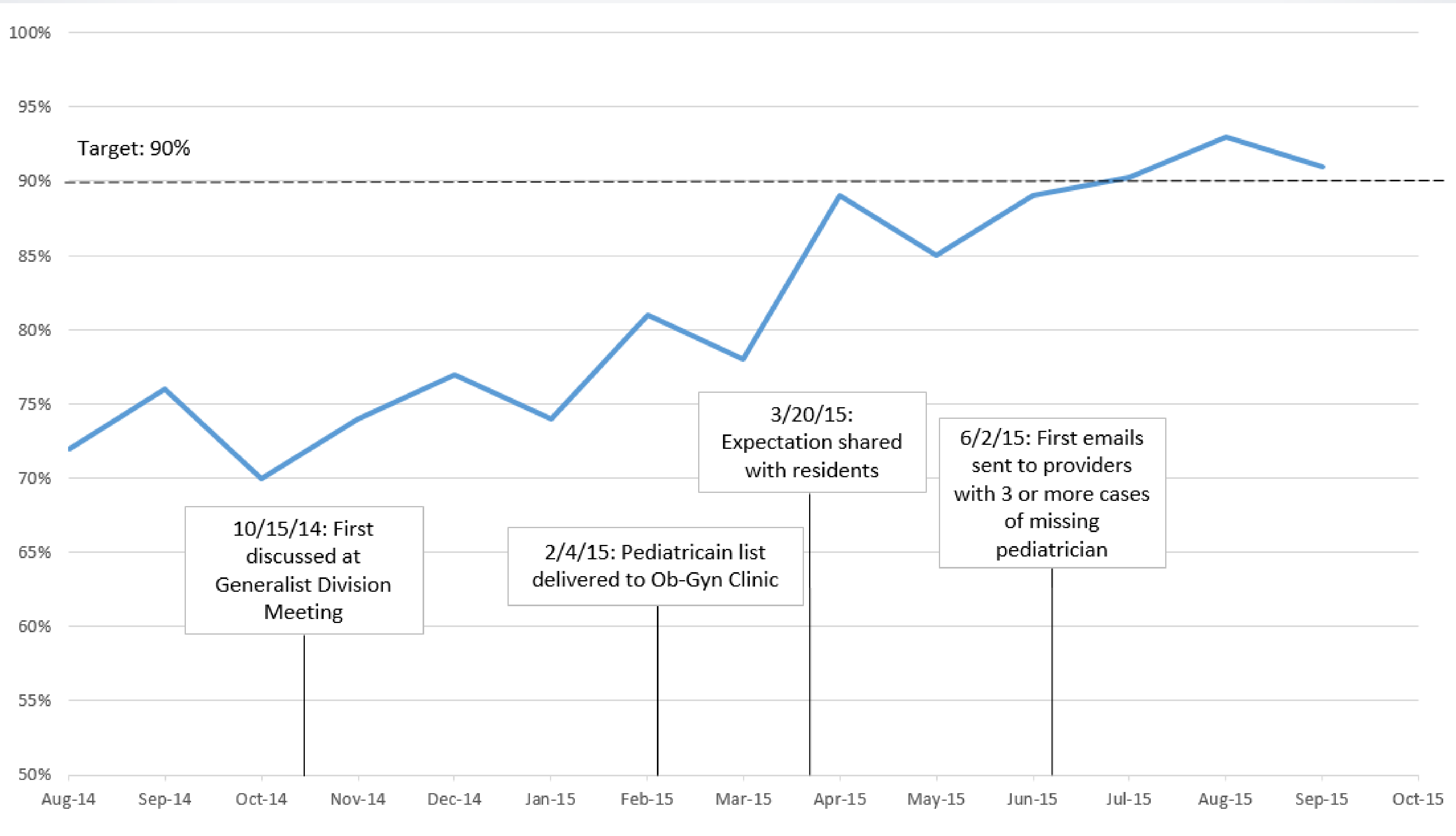
- At baseline, 75% of our patients had chosen a pediatrician by the time of admission. Since June, the institution of our third intervention, the monthly percentage of mothers with a pediatrician identified on admission has been 90% or greater.
- Secondary results include:
 - The majority of our postpartum patients are now discharged before noon.
 - Our HCAHPS scores have improved.

NEXT STEPS

- The key to quality improvement is to monitor for sustainability. Although the 90% goal was reached in June, we believe we can achieve 95% in the near future. We will continue to actively monitor our performance and implement additional PDSA cycles as necessary.
- Since we achieved our target of 90%, we have adjusted our processes to try to reach 95%, including:
 - Sending emails to providers who have two or more mothers per month who arrive without a pediatrician identified
 - Pursuing interventions to assist transferred and preterm patients with choosing a pediatrician

REFERENCE

1. Langley GL, Moen R, Nolan KM, Nolan TW, Norman CL, Provost LP. *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance* (2nd edition). San Francisco: Jossey-Bass Publishers; 2009.



Percentage of mothers with a pediatrician identified on admission per month, with interventions included.

