**Promoting Primary Vaginal Deliveries (PROVIDE) Initiative**

**FETAL HEART RATE CONCERN CASES**

**Key Driver Diagram**

**Aim**

- A unit that values, supports, and promotes vaginal deliveries

**Primary Drivers**

- Appropriate and standardized use of evaluative and corrective measures for fetal heart rate concerns
- Appropriate and standardized identification of category II and III FHR tracings
- Track, report, and review to monitor progress

**Secondary Drivers/Interventions**

I. Revise and adopt hospital guidelines to reflect evidence-based practices related to: 1) use of intermittent auscultation, and 2) standardized identification and response to FHR concerns

II. Educate physician, nursing, and staff on 1) new evidence-based practices and newly revised department policies/protocols related to the newly revised and adopted hospital guidelines and 2) standard diagnostic, evaluative and corrective actions for FHR concerns

III. Document use of patient education materials related to intermittent auscultation and EFM, maternal positioning, oxytocin, and shared decision making

IV. Increase percent of NTSV cesarean cases due to FHR concerns that meet criteria for corrective measures

V. Increase percent of patients with corrected uterine tachysystole

VI. Quality review meetings to conduct case reviews, review initiative data and progress, and/or review provider-specific rates

VII. Integrate order sets, protocols, and documentation for the safe reduction of primary cesareans into your hospital’s EHR system

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**Note:** Evidence-based practice encompasses ACOG/SMFM/AIM/CMQCC/FPQC Recommendations. See PROVIDE measurement grid for more details and definitions.

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