Promoting Primary Vaginal Deliveries (PROVIDE) Initiative

INDUCTION CASES
Key Driver Diagram

Aim

Primary Drivers

- A unit that values, supports, and promotes vaginal deliveries
- Standardization of processes related to induction scheduling, admission, and initiation
- Standard, evidence-based responses to labor challenges in latent, active, and second stage of labor
- Track, report, and review to monitor progress

Secondary Drivers / Interventions


II. Educate physicians, nursing, and staff on new evidence-based practices and policies/protocols related the newly revised and adopted hospital care guidelines

III. Document use of patient education materials on evidence-based techniques that prevent cesareans

IV. Increase standard and evidence-based use of Bishop score to schedule or admit patients for induction in order to increase the percent of patients who are induced with Bishop scores ≥ 8

V. Increase percent of NTSV cesareans with induction where a cervical ripening agent was used when the Bishop score was ≤ 8

VI. Reduce percent of NTSV cesareans with induction where recommended criteria are not met at: a.) < 6 cm; b.) 6 – 9 cm; c.) 10 cm

VII. Use labor dystocia/pre-cesarean checklist with team members intrapartum and/or as debrief tool

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

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

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