



Positive changes to PPH Rates



West Gippsland Healthcare Group

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HRT 1702 Maternity Services Improvement Group

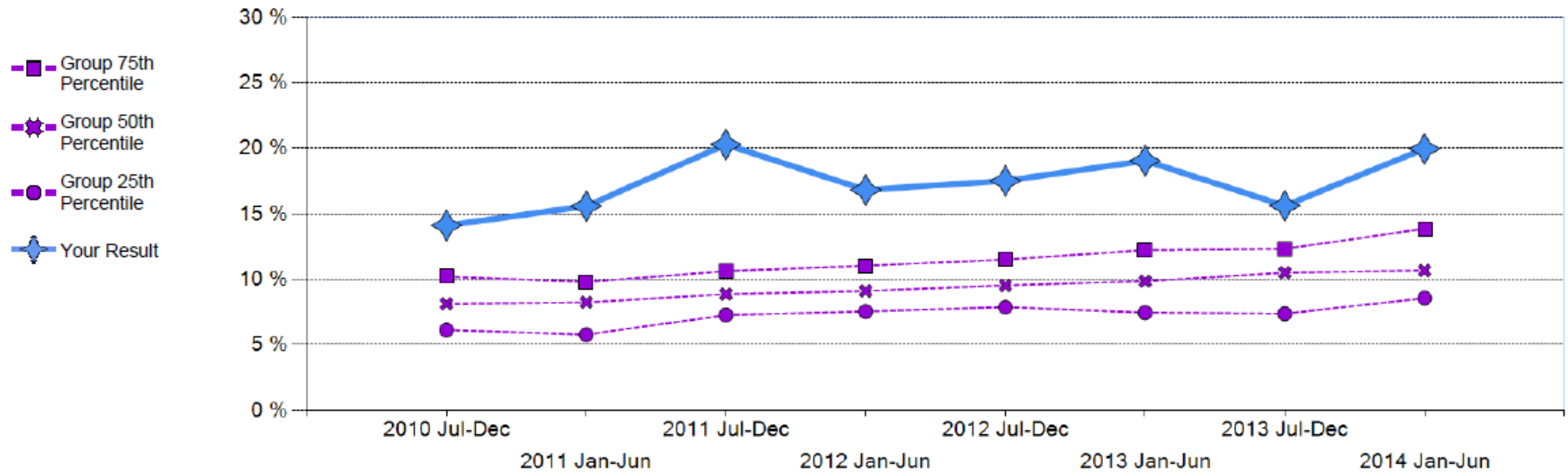
22nd & 23rd March 2017

Melbourne



Key Problem - High incidence of PPH

Rate of post-partum haemorrhage incidence in all deliveries



Aim of this innovation

- Reduce the incidence and/or volume of post-partum haemorrhage.



Key Changes Implemented December 2015

- In December 2015 management of the risk of PPH (post Partum haemorrhage) was changed in an attempt to decrease the number of PPH's. *This policy was formalised in March 2016.*
- Those with high risk indicators were to be given Syntometrine.
 - Placental Abruption
 - Multiple Pregnancy
 - Previous PPH
 - Asian Ethnicity
 - Obesity (BMI.35)
 - Anaemia (<90g/l)
 - Induction of labour
 - Prolonged labour (>12hrs)
 - Macrosomia (>4kgs)
 - Pyrexia in labour
 - Vaginal Birth after Caesarean (VBAC)



Other changes to practice:

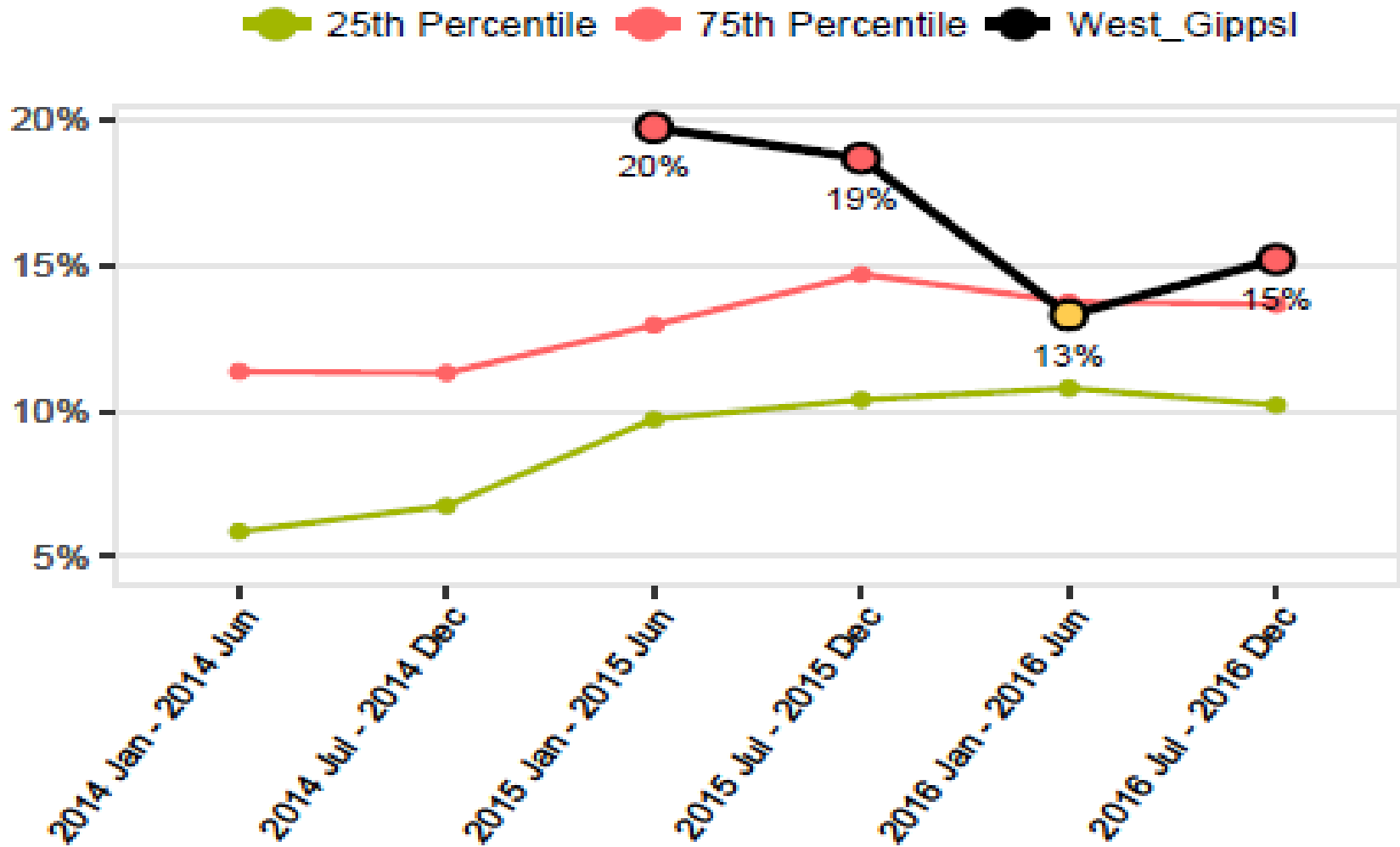
- *Acknowledging that two thirds of PPH cases occur where there are NO risk factors*
- Where significant risk factors are present:
 - Intravenous access in early labour
 - Full blood examination and Group+Hold in labour
- Blood loss documentation post Caesarean Section had been automatically recorded as 500mLs+, not based on actual output in theatre. This was significantly contributing to our increase in PPH rates
- Use of ergometrine in Emergency Caesarean Sections

Environmental changes following many PROMPT workshops

- Box of Maternal resuscitation equipment and AirViva in each birthsuite
- PPH kits in each birthsuite incl. IV insertion sets, hand pump giving sets and N/saline IV Fluid for immediate management
- Massive Transfusion Policy reviewed and extensive education to all staff (including auxiliary staff) for PPH of >1500mls *with* ongoing bleeding OR 2000ml.
- Obstetric Met Call policy reviewed again and significant emphasis of encouraging use
- Multi disciplinary education and input
- Emergency obstetric trolleys that can be taken to the point of care, capable of managing multiple obstetric complications

Outcomes so far

Rate of post-partum haemorrhage incidence



Lessons Learnt

PPH is a complex problem that involves multi-factorial management:

- Early recognition of high risk women
- Managing the initial bleed as effectively and efficiently as possible
- Having at the point of care the items necessary to manage a PPH
- Early escalation to ANUM and Co-ordinators, early notification to theatre of potential complications in birth suite
- Quick response to activate the Massive Transfusion Policy

* The data on HRT contains some minor inaccuracies

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