

Obstetric Key Document Page Monitoring Tool

MONITORING AND COMPLIANCE

This section should identify how the Trusts plan to monitor compliance with and the effectiveness of this Key Document Page. It should include auditable standards and/or key performance indicators (KPIs) and details on the methods for monitoring compliance

What	How	Who	Where	When
<i>These are the 'key' parts of the process that we are relying on to manage risk.</i>	<i>What are we going to do to make sure the key parts of the process we have identified are being followed?</i>	<i>Who is responsible for the check?</i>	<i>Who will receive the monitoring results?</i>	<i>Set achievable frequencies.</i>
All appropriate tests and observations are carried out as per guidance Antibiotic management as per guidance	Case by case	Governance Team	Labour ward lead	As and when
All women with HBV are offered immunisation for the baby	Spot Check	Antenatal Screening Midwife	Directorate	Annually
1.HIV Screening is offered to all Booked pregnant women 2. HIV screening is offered to all unbooked pregnant women	K2 Maternity Information system	Obstetric Governance team	Antenatal screening Midwife	Annually
Intrapartum and Postpartum Bladder care			Obstetric Governance Committee	
Management of HELLP/Acute fatty liver of pregnancy (AFLP)/ Eclampsia	Ongoing Clinical Audit		Obstetric Governance Committee	
Failed intubation in Obstetrics	Assessment of patient risk reports		Anaesthetic Directorate	Within 2 years of the introduction of the guideline
Referral/ discussion to Gum for all positive cases of syphilis in pregnancy	Very few cases therefore suggest 2 yearly audit of process of referral and communication with obs team	GUM consultants	This could be registered with health and care trust clinical audit departments	2 yearly
Group B streptococcal infection	Women with Group B streptococcal infection to	Directorate Clinical Governance Group / Labour Ward Forum	Audit of medical records	

	receive the appropriate treatment			
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