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CASE STUDY

Improving communication between nursing shifts to improve care in Hisar District Hospital, Haryana, India

Summary

The Hisar District Hospital delivers 250 to 300 babies a month, approximately ten percent of all deliveries in the district. A quality improvement team was formed in the hospital to improve the administration of oxytocin to reduce post-partum haemorrhage. Because of workload issues, the team were not giving oxytocin to all women immediately after delivery. To resolve these issues, the team decided to try keeping prefilled syringes with oxytocin and to improve the communication about the new changes to all nurses working on different shifts. The team found that a printed notice with the message to use prefilled syringes along with staff reorientation improved knowledge of these new changes and following this, all women have received oxytocin in the first minute after delivery. These changes can be tried in other facilities also struggling with communication issues between shifts.

Introduction

Hisar is a high priority district in Haryana State under the Government of India's RMNCH+A initiative. The USAID ASSIST Project has been providing support to improve care in key areas of maternal and child health in Hisar's facilities since December 2013. One of the support areas was to reduce post-partum haemorrhage (PPH) in women delivering at the District Hospital. The hospital delivers 250 to 300 babies a month (approximately ten percent of all deliveries in the district). There are 24 beds in the obstetrics and gynaecology ward, which includes eight beds for antenatal care, eight beds in the post-partum ward, and eight beds for post-operative caesarean cases. Staff include two gynaecologists and 17 staff nurses working three shifts per day. With the help of the USAID ASSIST Project district coach, the labour room staff formed a quality improvement team (see Table 1). The team decided that they wanted to do a better job of giving oxytocin to all women to reduce bleeding.

Table 1: Members of the Hisar Quality Improvement Team

Name	Designation
Anita	Gynaecologist
Manju	Nursing Sister
Munni	Staff Nurse
Kiran	Staff Nurse
Vina Kalra	Staff Nurse

The team knew that they were supposed to give oxytocin to all women, but because of workload issues, they were not giving it immediately after delivery. To resolve these issues, the team decided to try keeping pre-filled syringes with oxytocin in the tray so that they can administer it within one minute. The nursing sister oriented all the staff nurses present in that duty shift, and the team decided to test this change for one week. At the end of the week the team met again. They found that using pre-filled syringes worked for the nurses who were on that duty shift but that not all nurses were using the new method since the ward did not have a good system to communicate information about new changes to all nurses working on different shifts.

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Introducing changes to communication between staff nurses

The team discussed new ways of communicating messages so that all the staff nurses would be aware of the new practice. Staff nurses who attended the team meeting decided they would first handover the message verbally to evening and night duty staff nurses. To ensure that the message was properly conveyed to the incoming shift, the nursing sister agreed to repeat the message to each shift.

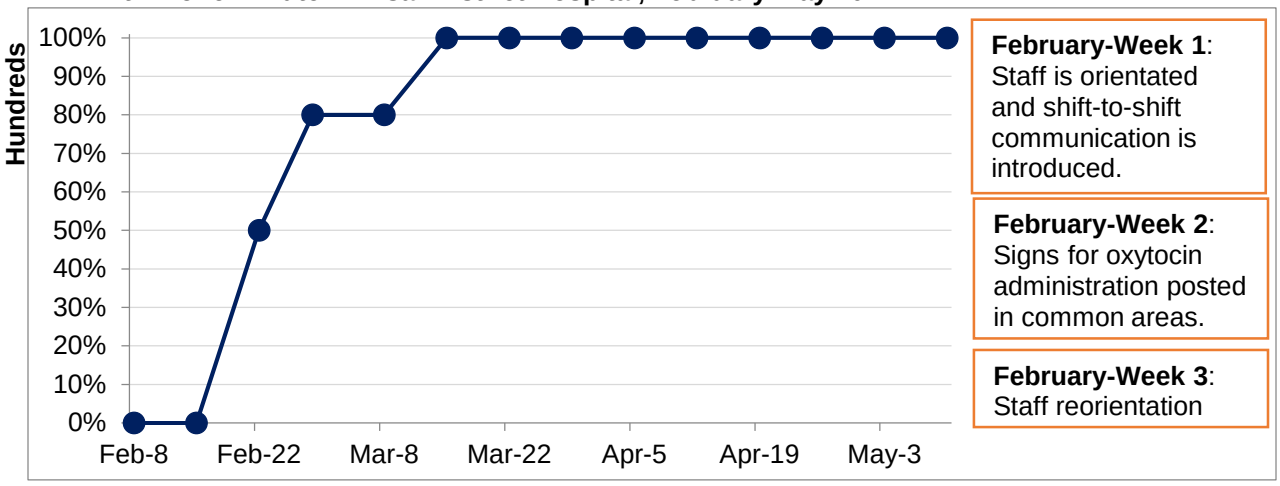
Three days later, the team met again. They found the system of communicating between shifts worked but nurses who were coming back from time off and needed more information about the new processes to reduce PPH. The team decided to print information about giving oxytocin in the first minute after delivery and to paste it on the maternity wing's notice board where the duty roster is kept and on the labour room wall near the delivery table as a reminder.

Print information about oxytocin administration on notice board. *Photo courtesy of Hisar staff.*

Results

After one week, the team again sat down to discuss the progress. They found the last change idea of printing and pasting the notice with message for use of prefilled syringe improved the communication within the team and that 80 percent of women were now getting oxytocin in the first minute. The remaining women were being cared for by nurses who had just completed leave. The team reoriented these nurses and following this, 100 percent of women have received oxytocin in the first minute after delivery (see Figure 1).

Figure 1: Percentage of bed head tickets having record of oxytocin injection given within one minute in Hisar District Hospital, February-May 2014



Conclusion

Communicating across multiple shifts can be challenging in large facilities. In this facility, poor communication was a barrier to providing best-practice care to prevent PPH. They managed to improve communication using four main changes. This enabled them to improve oxytocin administration no matter when a patient delivered and ensure standard care. These changes can be tried in other facilities also struggling with communication issues between shifts.

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