PVB Readiness Survey

Thank you for participating in the ILPQC Promoting Vaginal Birth (PVB) Initiative. This survey will provide your team baseline information about your hospital’s current policies, protocol and labor support practices. Your answers will give you a baseline assessment of challenges and opportunities for your hospital to achieve nulliparous, term, singleton, vertex (NTSV) Cesarean section rates at or below the Healthy People 2020 goal of 24.7%. We hope that your team will use this information to determine how you would like to get started and help set team goals for what you would like to accomplish during the PVB Initiative over the next 2 years. We will share an overview of the results from across all participating hospitals at our upcoming virtual Face-to-Face meeting on May 20th.

Completing the Survey

This survey will take approximately 10-15 minutes to complete. Please complete the survey about your hospital’s practices to the best of your ability with your QI team members. Please designate one member of your team to submit the survey. We recognize that some of the questions in the survey may not apply to your hospital.

Survey Questions

1. Hospital name
2. Your name
3. Your role/title

4. Does your Labor and Delivery have a process to review and share provider-level data for NTSV rates with clinical providers?
   - Yes
   - No
   - Unsure
   - Comment __________

5. Does your Labor and Delivery currently use a ACOG/SMFM Labor Guidelines to aid decision making regarding defining labor challenges such as failed induction or failure to progress/arrest of labor?
   - Yes
   - No
   - Unsure
   - Comment __________

   If yes,
   1. Does your hospital provide standardized education for providers and/or nurses on ACOG/SMFM Labor Guidelines?
      - Yes
      - No
      - Unsure
      - Comment __________
2. Does your hospital utilize an ACOG/SMFM Labor Guidelines checklist for providers and/or nurses?
   - Yes
   - No
   - Unsure
   - Comment ___________

6. Do you currently have standardized processes or protocols in place for the identification and response to labor challenges such as failed induction or failure to progress/arrest of labor?
   - Yes
   - No
   - Unsure
   - Comment ___________

7. Do you currently have standardized processes or protocols for identification and response to fetal heart rate abnormalities in labor?
   - Yes
   - No
   - Unsure
   - Comment ___________

8. Does your hospital provide a workflow process for shared decision making prior to cesarean delivery?
   - Yes
   - No
   - Unsure
   - Comment ___________

9. What current tools/responses are available to staff for labor support? (Check all that apply)
   - Peanut ball
   - Nitrous Oxide
   - Provider training on responses for labor support
   - Provider education on alternative responses for labor challenges
   - RN training on responses for labor support
   - RN education on alternative responses for labor challenges
   - Other ___________

10. What methods are currently used to make decisions around cesarean deliveries after a failed induction? (check all that apply)
    - ACOG/SMFM Labor Guidelines Checklist
    - SHARED decision making approach
    - Standardized documentation in EMR when decision is made
    - Care team huddles prior to decision for cesarean birth
    - Other ___________
11. What methods are currently used to make decisions around cesarean deliveries for labor complications in the second stage of labor (dystocia/arrest/malposition)? (check all that apply)
   - ACOG/SMFM Labor Guidelines Checklist
   - SHARED decision making approach
   - Standardized documentation in EMR when decision is made
   - Care team huddles prior to decision for cesarean birth
   - Other ___________

12. What methods are currently used to make decisions around cesarean deliveries for fetal heart rate concerns?
   - ACOG/SMFM Labor Guidelines Checklist
   - SHARED decision making approach (Includes the provider, nurse and patient to review treatment options, risk/benefits, and ACOG/SMFM guidelines).
   - Standardized documentation in EMR when decision is made
   - Care team huddles prior to decision for cesarean birth
   - Other ___________

13. Does your hospital currently have a process to systematically review / discuss decisions for cesarean deliveries?
   - Yes
   - No
   - Unsure
   - Comment ___________