

Improving Care & Outcomes in Obstetrical Hemorrhage Key Driver Diagram

AIM

Improve the care and outcomes for pregnant and postpartum women who suffer from an obstetrical hemorrhage by achieving 90-100% compliance on both of the following: the utilization of a postpartum hemorrhage risk assessment (Appendix 3) and measuring blood loss cumulatively and quantitatively for all births by January 2027.

Primary Drivers

Readiness:

Implementation of standardized hemorrhage protocols & processes

Recognition & Prevention:

Early Identification & Assessment

Response, Reporting, & Systems Learning:

Appropriate treatment, management for women with a postpartum hemorrhage

Secondary Drivers

A standardized, facility-wide, stage-based obstetric hemorrhage emergency management plan with checklists and escalation policy

Emergency release and massive transfusion protocols to ensure immediate access to blood products

Maintain a hemorrhage cart or equivalent with supplies, checklists, and instruction cards for devices or procedures where antepartum, laboring, and postpartum patients are located.

Regular staff training and simulation drills for PPH recognition and response

Assess and communicate hemorrhage risk to all team members as clinical conditions change or high-risk conditions are identified.

Measure and communicate cumulative blood loss to all team members, using quantitative approaches.

Evidence-based medication administration or use of nonpharmacological interventions

Perform multidisciplinary reviews of serious complications per established facility criteria to identify system issues.

Include each patient that experienced an obstetric hemorrhage and their identified support network as respected members of and contributors to the multidisciplinary care team and as participants in patient-centered huddles and debriefs.

Conduct interprofessional and interdepartmental team-based drills with timely debriefs that include the use of simulated patients.