

## SE10EOa

Using the required empirical outcomes (EO) presentation format, provide an example of an improved patient outcome associated with a nursing needs assessment and a related implementation plan at the ambulatory care setting, unit, or division level.

- A copy of the needs assessment and implementation plan must be provided.

### Example a: Purposeful Labor Positioning and Cesarean Section Rates at WakeMed North and Raleigh Campuses

#### Problem

Donna Lane, BSN, RNC-OB, Nurse Manager, Labor and Delivery, Raleigh and North Campuses (L&D); Katy Southerland, MSN-NI, RNC-OB, Supervisor/Educator, L&D; and Misty Joe Jackson, MSN-NE, RNC-OB, RNC-MNN, Clinical Nurse, L&D, Raleigh and North, noted that the rates of cesarean section (C/S) among nulliparous patients (primary C/S) were higher than the national top 10% standard level as determined by The Joint Commission Perinatal Care Measure.

#### Pre-Intervention

Lane, Southerland, and Jackson discussed the issue and were concerned about their rate being higher than the national top 10% standard C/S rate determined by The Joint Commission Perinatal Care Measure. They therefore decided to identify strategies to improve patient outcomes.

The combined primary C/S rate at Raleigh and North was 18.7% for January-March 2022. The primary C/S rate is calculated based on the criteria set by The Joint Commission Perinatal Care Measure. The numerator is the number of nulliparous women with a term, singleton, vertex fetus who deliver a liveborn infant by C/S. The denominator is the number of nulliparous women with a term, singleton, vertex fetus who deliver a liveborn infant.

Jackson created a nursing needs assessment that was conducted on January 25, 2022. ([Evidence SE10EOa-1, Needs Assessment](#)) The needs assessment was sent electronically to all L&D clinical nurses at the Raleigh and North campuses. Jackson compiled the results of the needs assessment on January 31, 2022.

Jackson and Joanne C. Barkhau, MSN-NE, RNC-MNN met on February 1, 2022 to analyze the findings. On the needs assessment, L&D clinical nurses reported a knowledge gap related to selecting and executing labor positions based on fetal station. They also stated their desire for education on labor positioning, which influences the need for C/S intervention.

Jackson and Barkhau notified Lane of the needs assessment results on February 1, 2022 and consulted her regarding initial educational plans to address the knowledge gap. Lane supported the initiative and granted permission to proceed.

Jackson developed the implementation plan, with Barkhau's guidance on the curriculum, to use multiple modalities to target gaps in knowledge related to labor positioning. ([Evidence SE10EOa-2 Implementation Plan](#)) Jackson constructed a program curriculum to address the identified labor positioning knowledge gap. Purposeful Labor Positioning (PLP) consisted of three modules in WakeMedU (WMU) (the online learning management system) that used evidence-based practice methods from the American College of Obstetricians and Gynecologists and the National Partnership for Women and Families (2019, 2017).

Southerland; L&D Clinical Nurses Pamela Carlisle, BSN, RNC-OB; Diana McLeod, BSN, RNC-OB; and Tammy Gordon, BSN, RNC-OB; and the WakeMed North L&D Unit Council (UC), were engaged to create simulation activities on labor positioning.

### Goal Statement

Reduce the primary C/S rate at the WakeMed North and Raleigh campuses.

### Participants

Labor Positioning for Primary C/S Reduction Group			
Name/Credentials	Discipline	Title/Role	Department
Misty Joe Jackson, MSN-NE, RNC-OB, RNC-MNN	Nursing	Clinical Nurse IV, Developer and Educator for Purposeful Labor Positioning (PLP) Education	Labor and Delivery – Raleigh
Joanne C. Barkhau, MSN-NE, RNC-MNN	Nursing	Education Resource Specialist	Nursing Education Department
Donna Lane, BSN, RNC-OB	Nursing	Nurse Manager	Women's Pavilion and Birthplace – Raleigh and North
Diana McLeod, BSN, RNC-OB	Nursing	Clinical Nurse IV	Labor and Delivery – North
Tammy Gordon, BSN, RNC-OB	Nursing	Clinical Nurse IV	Labor and Delivery – North
Katy Southerland, MSN-NI, RNC-OB	Nursing	Supervisor/Educator	Labor and Delivery – North
Pamela Carlisle, BSN, RNC-OB	Nursing	Clinical Nurse IV	Labor and Delivery – North
Susan Gaskill, MSN, RNC-OB	Nursing	Supervisor/Educator	Labor and Delivery – Raleigh

### Description of the Intervention

## *April-September 2022*

### *April 2022*

- Susan Gaskill, MSN, RNC-OB, Supervisor/Educator, L&D, Raleigh campus, assigned the online Purposeful Labor Positioning (PLP) education to all newly hired and transferred clinical nurses in L&D, beginning on April 1, 2022.
- All clinical nurses at both campuses were encouraged to voluntarily register for PLP training from April 1, 2022 through September 30, 2022. The nursing staff members completed the PLP training and incorporated the knowledge into their practice setting.

### *May 2022*

- The North Campus Unit Council referenced PLP education while conducting hands-on education for using and charting labor positioning for the L&D clinical nurses in real time.
- The North Campus Unit Council met to create a campaign to encourage clinical nurses to use purposeful labor positioning in their practice.
- The Unit Council posted multiple labor positioning images on the unit for clinical nurses to reference and provided laminated flip charts of labor positioning and fetal head positions. The positioning reference materials helped clinical nurses to determine which position would facilitate ideal fetal descent.

### *June 2022*

- The North Campus Unit Council shared monthly primary C/S rate data with clinical nurses to reinforce the impact of labor positioning on C/S rates.
- The North Campus Unit Council distributed Propel water packets to clinical nurses with the slogan, "Let us Propel you to a vaginal delivery" to encourage the use of purposeful labor positioning.

### *July 2022*

- The North Campus Unit Council met to evaluate the campaign.

### *August-September 2022*

- The North Campus Unit Council referenced PLP education while conducting hands-on education for using and charting labor positioning for the L&D clinical nurses in real-time.
- The North Campus Unit Council shared monthly primary C/S rate data with clinical nurses to reinforce the impact of labor positioning on C/S rates.
- The North Campus Unit Council distributed Propel water packets to clinical nurses with the "Let us Propel you to a vaginal delivery" slogan to encourage the use of purposeful labor positioning.

The interventions were fully implemented by the end of September 2022.

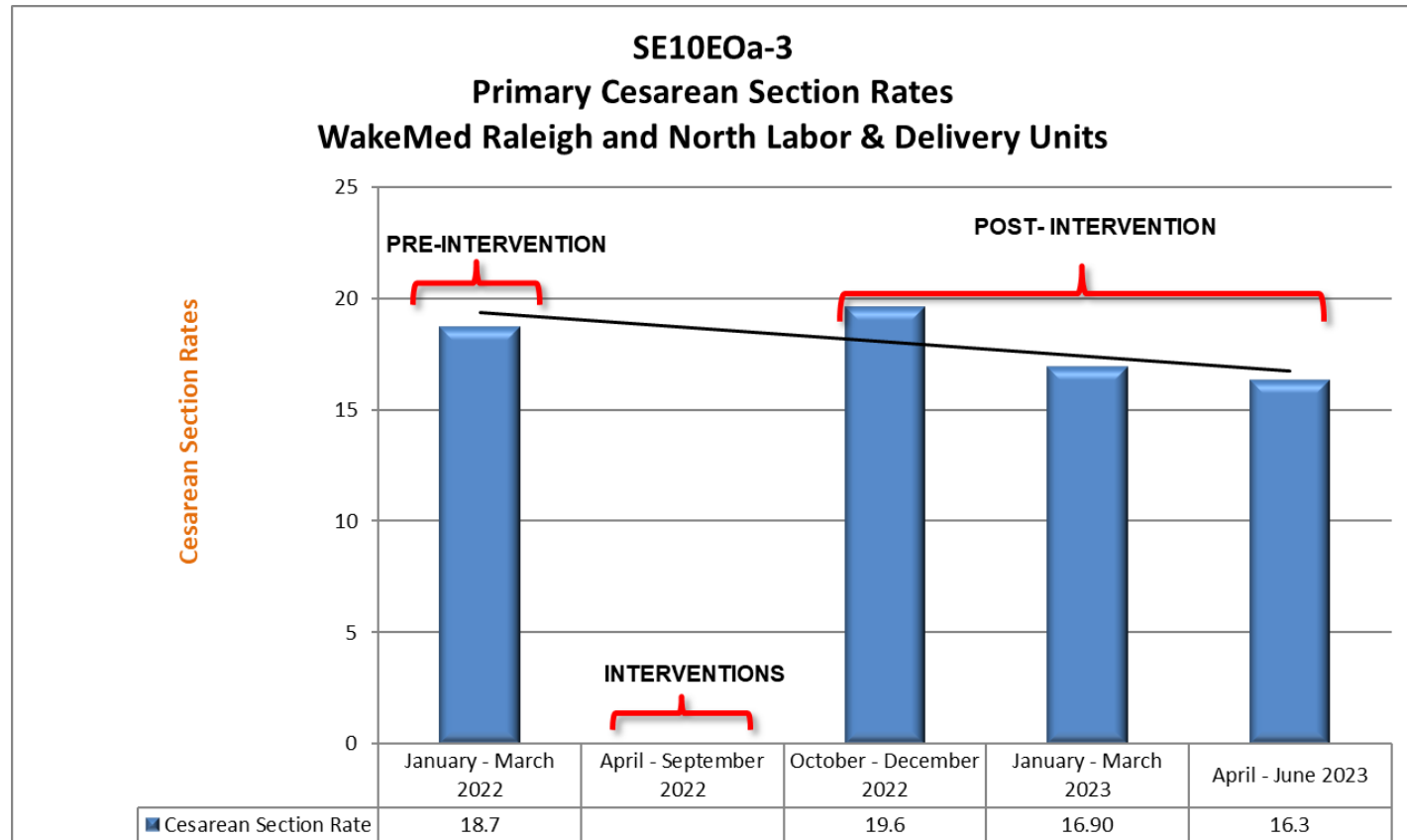
A nursing needs assessment and related implementation plan related to increased knowledge of purposeful laboring positions on the L&D units at the North and Raleigh campuses were implemented to decrease primary C/S rates.

## References:

American College of Obstetricians and Gynecologists. (2019). Committee Opinion No. 766: Approaches to limit intervention during labor and birth. *Obstetrics and Gynecology*, 133(2), e164-173. <https://doi.org/10.1097/AOG.0000000000003074>

National Partnership for Women and Families. (2017). Continuous support for women during childbirth: 2017 Cochrane review updated key takeaways. *The Journal of Perinatal Education*, 27(4), 193-197. <https://doi.org/10.1891/1058-1243.27.4.193>

## Outcome



(Evidence SE10a-3, Primary Cesarean Section Rates, WakeMed Raleigh and North Labor & Delivery Units)