



## Step 2: Assemble Multidisciplinary Review Team

Include a mix of clinical and quality staff:

- OB provider (MD or CNM)
- Labor & Delivery nurse
- Clinical Data Abstractor (CDA)
- Quality or Risk team member
- *Optional:* Unit manager or educator, resident physician, or anyone with a vested interest.

## Step 3: Prepare Case Summaries

The CDA, project lead, or assigned team member prepares a summary for each case. The Case Review Assignment List can help organize prework. Each summary should include:

- Patient demographics (age, parity, gestational age)
- Labor course and interventions
- Mode of delivery and indication
- Outcomes (maternal & neonatal)
  - Is there documentation gaps or abstractor notes?

## ANALYZE PHASE

### Step 4: Conduct Case Review Meeting

Hold case review meetings at your regularly scheduled intervals. For each case, make sure to:

- Walk through the labor and delivery timeline, including fetal heart tracings at key decision points.
- Discuss documentation completeness and clinical appropriateness.
- Identify any system-level issues or communication challenges.
- Note opportunities for staff education or documentation improvement.
  - Review patterns, recurring themes, and global learnings across all cases analyzed.

## RESPOND PHASE

### Step 5: Document Findings and Follow-Up

Use a shared form or spreadsheet (such as the **OBI Case Review Follow Up & Emerging Pattern or Trend Tracker**) to record and track:

- Case reviewed
- Key findings
- Action items (e.g., staff education, workflow changes)
- Assigned responsible person and expected timeline for follow-up

Share relevant findings and updates with staff and leadership as needed to support team learning and improvement.

## Step 6: Feedback Loop

- Ensure timely feedback reaches all relevant staff members involved in the reviewed case.
- Use feedback to support abstraction accuracy and drive ongoing quality improvement.
- Provide constructive insights or recommendations to team members to reinforce best practices and encourage positive change.
- Consider sharing feedback in team meetings, huddles, or via email for broader engagement and learning.

## EVALUATE PHASE

### Step 7: Measure Impact, Monitor Trends, Refine Processes

Measure Impact:

- Review NTSV cesarean rate trends since implementing case review strategies.
- Compare pre- and post-intervention data (monthly, quarterly, or by review cycle).
- Identify shifts in provider practice patterns or documentation habits.
- Assess changes in decision-making around labor management (e.g., induction timing, fetal heart tracing [FHT] interpretation).

Monitor Trends:

- Track recurring themes from case reviews (such as common clinical scenarios or documentation gaps).
- Monitor how often specific strategies (e.g., second opinions, shared decision-making huddles) are used.
- Identify new or emerging patterns in cesarean decision-making.
- Continue logging case review outcomes for ongoing analysis.

Refine for Continuous Improvement:

- Revisit your case review process—identify what's working well and what's cumbersome.
- Adjust review criteria or discussion formats based on team feedback.
- Set short-term improvement goals based on recent findings (e.g., reduce cesarean deliveries for PROM without intervention).
- Share updated protocols, guidelines, or decision aids with staff.

Celebrate Successes:

- Highlight cases where shared decision-making or teamwork led to a vaginal birth.
- Share positive trends in NTSV rates with your team.
- Recognize individuals or teams for their contributions to improvement.
- Include success stories in staff meetings, newsletters, or on bulletin boards.
- Use the **Success Story Template** to spotlight "Exemplary" cases.