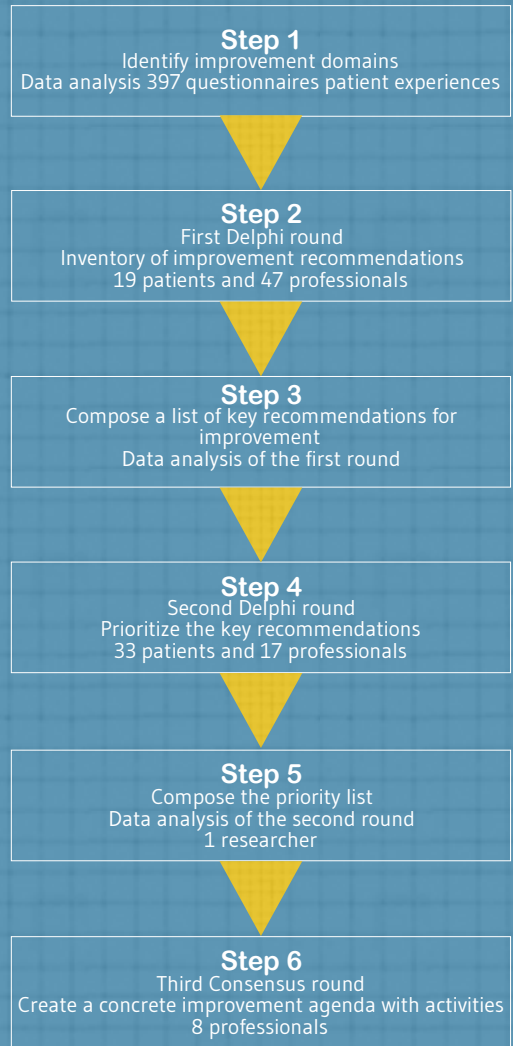


# Shared agenda making for quality improvement; towards more synergy in maternity care

## Results Delphi study

The step-wise Delphi method to develop key recommendations for the improvement agenda



	First round	Second round Score (%) *		Third round
	<b>Improvement ideas</b>	<b>33 patients</b>	<b>17 professionals</b>	<b>Improvement agenda</b>
<b>Patients priority</b>	A single bedroom for every woman if hospitalisation is needed.	<b>73 (22,1)</b>	5 (2,9)	1. Discuss with the hospital managers the wish and added value of single bedrooms for women in hospitals and try to realise this.
	Continuing of care during labour. If a transfer to secondary care is needed the community midwife is present for support.	<b>50 (15,2)</b>	6 (3,5)	2. Create more opportunities to continue presence of the community midwife during hospital labour.
	Enable digital patient information transfer between professionals.	<b>48 (14,6)</b>	23 (13,5)	3. Start of a digital patient record view system between organisations with view function for patients, so all required information is multidisciplinary available.
	Every pregnant woman has one case manager.	<b>42 (12,7)</b>	10 (5,9)	4. Introduction of a case manager for every pregnant woman.
<b>Professionals priority</b>	Online insight in patient records for patients and involved professionals from other organisations.	23 (7,0)	<b>36 (21,2)</b>	Included in 3.
	Uniform information from all professionals for pregnant women by using one website and similar information leaflets and meetings.	5 (1,5)	<b>33 (19,4)</b>	5. Create a multidisciplinary team of professionals to realise similar information provision for patients.
	Mandatory multidisciplinary training and (casuistry) meetings for more coordinated patient centered care.	15 (4,5)	<b>16 (9,4)</b>	6. Organisation of more communication trainings for professionals to realise patient centered care. Therefore using i.e. role models, more (patient) feedback, discussing in meetings. Including training the professionals to use the protocols more personalised rather than rigid.
<b>Shared scores</b>	Shared decision making is part of standard care.	33 (10,0)	14 (8,3)	Included in 6.
	A birth plan for every woman with wishes, decisions and a personal care path.	19 (5,8)	9 (5,3)	7. Implementation of a uniform birth plan for all pregnant women in the whole maternity network, with wishes, decisions and a personal care path. This birth plan must be known by all involved professionals.
	More attention or training by professionals for listening to pregnant women.	10 (3,0)	10 (5,9)	Included in 6.
	One telephone number for questions or needed help.	12 (3,6)	8 (4,7)	<i>Not used for the improvement agenda, considered not feasible.</i>

\*Percentage of maximal amount of points

