

Smoke Free Pregnancies

The Project

Outcome Measure:

Reduce the percentage of pregnant women smoking at delivery from 12.7% to 10.8% by 31/03/20

Process Measures:

- To increase women receiving CO screening at booking from 72% to 80% by 31/03/20
- To increase staff trained to undertake CO monitoring from 0% to 95% by 31/03/20
- To increase staff trained to deliver very brief advice from 0% to 90% by 31/03/20

Approach taken

- · Initial process mapping session to identify areas of focus
- Development of driver diagram
- Weekly half hour meetings
- PDSA cycles for implementing CO monitoring and very brief advice
- Data gathering and measuring impact
- Learning and sharing at National Learning Sets and Local Learning System Events

Background

We recognised that smoking at delivery was relatively high in North Cumbria. It has been recognised that reduction in smoking in pregnancy will have a major impact in reducing still births and premature births.

Our major stumbling blocks:

- · Identified the lack of knowledge and training of staff in use of CO monitors
- Recognition of lack of very brief advice training to enable staff to support smoking cessation pathway

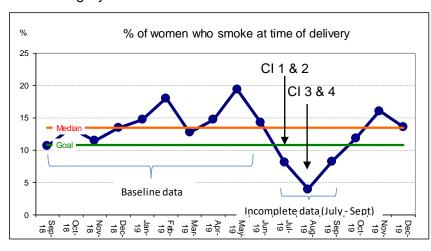
Change ideas (CI)

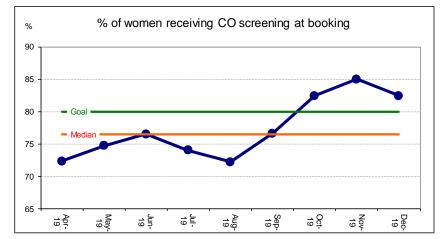
- 1. To identify peer champions to deliver CO monitor training and very brief advice
- 2. Staff undertaken online and face-to-face training
- 3. To ensure all the Community midwives had their own CO monitors
- 4. To increase the CO monitors in the Acute units

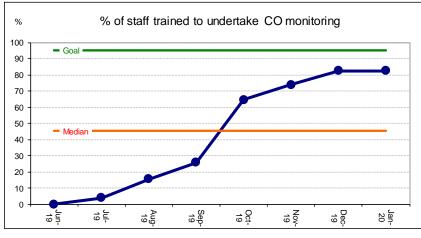
Outcome and impact

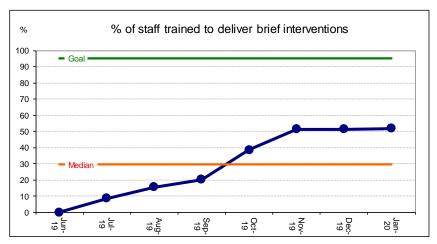
Great progress has been made in CO screening at booking, CO monitoring training and very brief advice.

The impact is not yet reflected in the outcome measure which we expect is due to timescales









Learning And Next Steps

- Small steps of improvement lead to positive results
- Regular meetings of home and away Teams are essential for communication, shared learning and decision making
- Application of quality improvement methodology. This has identified gaps within our Smoking Cessation pathway.

Next steps:

- Improve our CO monitoring at booking
- Improve referral pathway for access to Smoking cessation support
- Obtain data about number of referrals and acceptance
- Review extension of Smoking cessation VBA to Neonatal Unit staff and data collection

Improvement Leads

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