

## CHAPTER 6

### BRIEF CASE REVIEW

---

#### PURPOSE AND DESCRIPTION

During case review, staff discuss complicated cases to identify system strengths and to pinpoint ways to improve outcomes by addressing system delays and inefficiencies.

Case reviews are an important part of the QI process, as well as powerful learning tools. Case reviews can help staff identify *system* problems that need to be addressed and offer a forum for constructive problem solving. Case reviews are not meant to place blame on individuals but to show how to better achieve the desired end result, which is to save the lives of EmOC clients and their babies.

Case reviews should be a regular component of staff meetings and can be incorporated into medical monitoring visits when appropriate. The key to integrating case reviews into routine staff meetings is to keep discussions *brief and focused*, limited to 10 to 15 minutes per case, each centered around one or two key issues.

*The case review guidelines described below are meant specifically for the “brief case review” that takes place during regular staff meetings. These guidelines are not meant either for comprehensive case studies or for the review of maternal death.*

#### HOW TO SELECT CASES

1. Identify complicated cases as they occur. Diagnoses to be considered for case review include:
  - Postabortion complications
  - Breech presentation
  - Ectopic pregnancy
  - Hemorrhage (antepartum, intrapartum, or postpartum)
  - Hypertensive disease (preeclampsia or eclampsia)
  - Neonate needing resuscitation or special care
  - Obstructed or prolonged labor
  - Retained placenta
  - Ruptured uterus
  - Sepsis, or infection of the uterus, perineum, IV sites, incisions
2. Discuss no more than two cases per meeting. Choose cases that provide the greatest learning potential:
  - Emphasize cases where good management helped to save the client’s life and those that illustrate system inefficiencies.
  - Avoid cases with gross mismanagement, especially when it is largely attributable to one staff member. Such cases should be reviewed in private.

## **CASE REVIEW PRESENTATION**

1. For each case, assign a provider to review the case history and prepare the case presentation for the next staff meeting. (See Case Review Form below.)
2. Set aside approximately 10 to 15 minutes per case during the meeting. It is the meeting facilitator's responsibility to keep the discussion focused on the most important issues.
3. In addition to regular meeting attendees (including the maternity staff of nurses, midwives, and doctors) participants could include representatives from other departments, such as pediatrics, anesthesia, or the emergency room, and anyone else connected with the cases to be discussed. Where appropriate, external medical monitors can also participate.
4. The discussion facilitator should be someone other than the provider who presents the case. Usually, the team leader facilitates the discussion. He or she should ensure staff that the case review will not result in punitive measures but will rather help all staff, including supervisors, to learn how their system is handling complications.
5. Case presentations should be brief (less than five minutes long) and should include:
  - History (presenting complaints, diagnosis, and hospital course, including labs and studies)
  - Main procedures and treatment
  - Outcome
6. After each case presentation, the facilitator should lead the discussion to:
  - Identify good management procedures that saved the client's life
  - Identify system problems that need to be addressed (limit to one or two major ones)
  - Analyze those problems, determine root causes, and come up with solutions, as described in the action plan meeting
  - Incorporate those solutions into the facility action plan

## **CASE REVIEW FORM**

### **Case Review: Summary Sheet**

*Please ensure that no information is included on this form that could identify an individual client.*

#### **History:**

- Client's age, obstetric history
  
- Client's presenting complaints
  
- Initial diagnosis
  
- Hospital course, including labs and studies, number of days in the hospital

#### **Main Procedures and Treatment Provided:**

Level of staff providing care

#### **Outcome final diagnosis:**

### Case Review: Discussion Summary Sheet

- Good management procedures that saved the client’s life—describe.
  
- System problems that need to be addressed (limit to one or two major ones)—briefly state.
  
- Analyze those problems, determine root causes, and come up with solutions using a standard action plan format.

<b>Problem</b>	<b>Root cause</b>	<b>Solution</b>	<b>By whom</b>	<b>By when</b>	<b>Status</b>