Building a Foundation:

* + Start with what’s in front of you, then cast a vision!
    - What is your biggest frustration?
    - What barriers do you see for staff to provide compassionate care?
    - What barriers do you see for patients to receive compassionate care?
    - What are the resources that already exist?
  + Find interdisciplinary colleagues who have an interest in this area and may have ideas, suggestions, or tools to implement process changes
  + Connect with external groups that can be a support  
    *(PAIL Network, local perinatal bereavement groups, etc.)*
  + Start with low-hanging fruit  
    *(supply changes, free PAIL Network brochures, etc.)*
  + Consider applying for quality improvement funding from your organization, health authority, or other external sources

Staff Education:

* + Consider contacting PAIL Network and coordinating a free Compassionate Care Workshop for your unit
  + Include early pregnancy loss compassionate care training in your new hire orientation, triage training, and bedside in-services
    - Educate staff on fetal development and what to expect at specific gestations, so they are not surprised and can also educate patients and families. Encourage them to handle fetal remains with dignity and respect.

**Coordinator Checklist**

Early Pregnancy Loss Quality Improvements

**1**

NOTES:

Early Pregnancy Loss Quality Improvements

**2**

Patient Resources:

* + Create one patient information package for patients with bleeding in early pregnancy *(potential miscarriage)*
  + Create one patient information package for patients with early pregnancy loss *(confirmed or completed miscarriage)*  
    NOTE: This package will be more comprehensive, with more resources
  + See example documents for suggested package inclusions, and add in resources from your own organization and community. Your organization’s social worker may be able to assist with finding local resources.

Staff Resources:

* + Remember to use clear and practical language for staff to follow easily
  + Edit the “Nursing Care Checklist” template to reflect your hospital’s  
    specific practices and guidelines
  + Products of Conception (POC) management can be an area where mistakes are made and legal implications can occur. Make it easy for staff to manage POC and clearly communicate options to patients and their families.
  + Edit the “Managing POC: Nursing Care Checklist” template to reflect your hospital’s specific practices and guidelines.
  + Following your hospital guidelines for POC disposition,  
    create a flowsheet that includes:
    - Any hospital-specific paperwork or legalities
    - Requirements for labelling and packaging of POC
    - Requirements for pathology and testing of POC
    - Requirements for patient and/or family pickup of POC  
      *(from morgue or health records)* and copies of paperwork
    - Photos of supplies needed for labelling, packaging, and transport of POC

*Continued on page 3*

Early Pregnancy Loss Quality Improvements

**3**

Supply Management:

* + Create a place to house early pregnancy loss supplies in your department  
    *(Cart, cupboard, drawer)*
  + Patient supplies:
    - Pads, mesh underwear, Nun’s caps *(urine collection hats)*, blue pads
    - Consider having these supply locations at both triage and a patient care area where early pregnancy loss patients are commonly seen
  + Staff supplies:
    - Create a single location for copies of patient information packages  
      and staff documents *(i.e. a binder)*
    - Have a single location for POC management supplies, including copies  
      of the POC management flowsheet
    - Consider laminating copies of the nursing care checklist and post at triage  
      and all applicable patient care areas
    - Consider printing and laminating butterfly signs to apply to a bereaved family’s door, and ensure all staff are aware of this as a reminder to be sensitive
  + Include bereavement kits, comfort supplies *(baby hats, blankets)*, or other  
    memory keepsakes for when a fetus is delivered

Ensuring Sustainability:

* + Clearly communicate new changes to all unit staff
  + Provide varied methods of staff education on new resources and tools  
    *(such as emails, in-services, video reviews, workshops, etc.)*
  + Include those who stock supplies when planning supply locations
  + Include those who manage the paperwork/clerical tasks in your department to ensure that documents are kept stocked and up to date
  + Assign several early pregnancy loss champions to have extended knowledge and be able to support staff at the bedside

***\*\*To print to a PDF, select “Save as PDF” from your printer list choice and save to your documents\*\****