

CLINICAL MANAGEMENT BOARD

MINUTES

WEDNESDAY 27TH JUNE 2018, 10.30AM – 12.30PM, BOARDROOM

CHAIR: Dr Christine Blanshard

1.	<p>Present:</p> <p>[REDACTED]</p> <p>In attendance</p> <p>[REDACTED]</p>	<p>Apologies:</p> <p>[REDACTED]</p> <p>Minute Taker: [REDACTED]</p> <p>The meeting was quorate.</p>
[REDACTED]	[REDACTED]	[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

9 **Induction of labour guideline – [REDACTED] / [REDACTED]**

[REDACTED] presented this.

Labour is induced when delivery of the baby will be of benefit to the health of either the mother or child or both. Induction of labour consists of the artificial initiation of uterine contractions prior to their spontaneous onset, leading to progressive effacement and dilatation of the cervix, and delivery of the baby. The aim of the guideline is to provide guidance to midwifery and obstetric staff managing women undergoing induction of labour

This is an update to the guideline. This includes changes to induction and covers Propess and balloon catheters. It covers choice and the risks associated with different methods. There is also an updated information leaflet.

	<p>█ said there is often a long length of stay (LOS) with induction. The service will be providing an outpatient induction with balloon catheters to reduce LOS and with Propess too once they are used to it.</p> <p>They are also changing from all patients coming in at 8am; patients will now call at 7.30am to get times to come in on a rolling programme, but with an open door policy if they go into labour during that time.</p> <p>This has been approved at Maternity Governance.</p> <p>The Board approved this guideline.</p>	
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