

The HiPQIP: Hypertension in Pregnancy Quality Improvement Project

Our HiPQIP aimed to improve care and outcomes for pregnant women with chronic hypertension using a multidisciplinary approach. We involved the women in developing the service and transformed their care.

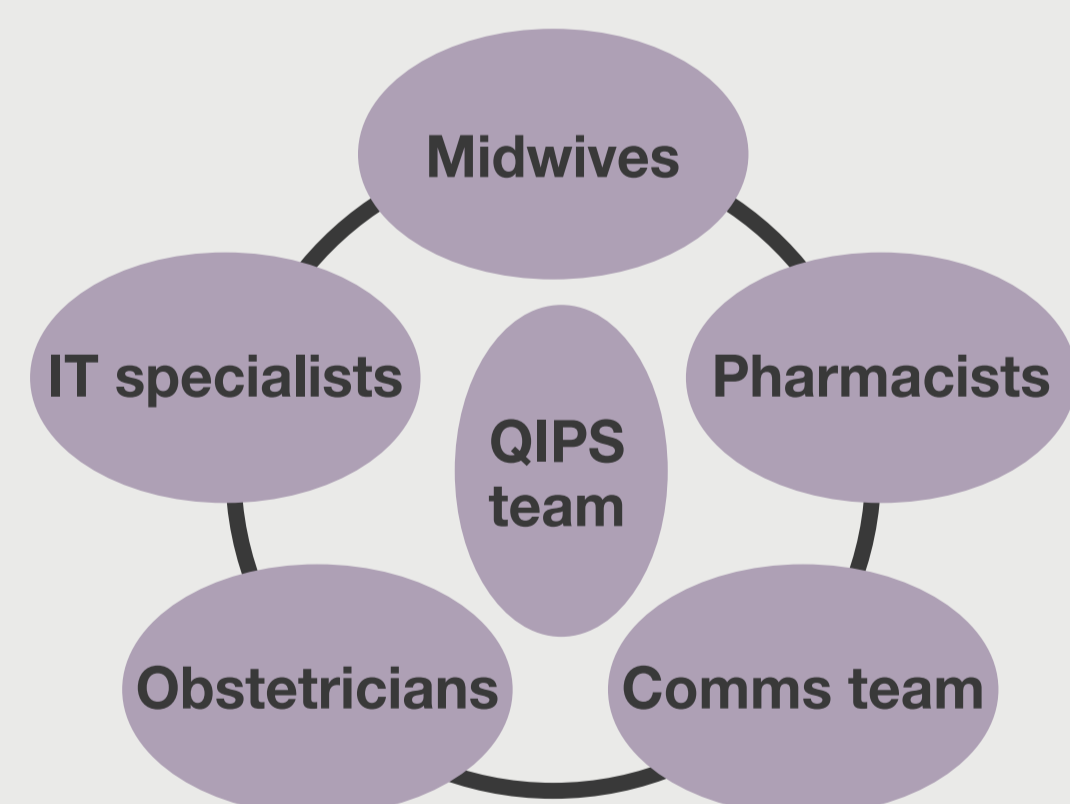
"The HiPQIP brought us together and dramatically changed the way that we care for these women. I am really proud of the service that we now offer."

Lucy Chappell, NIHR Research Professor/Consultant in Obstetrics, King's College London/ Guy's and St Thomas' NHS Foundation Trust



What we did and why

In 2015 we investigated and reported on a serious incident where a woman with chronic hypertension had an eclamptic fit and a stillbirth. We wanted to do more than just deal with what had happened – we wanted to transform the care that women received. Our clinic was set up using a multidisciplinary approach and we aimed to see women with chronic hypertension within one week of referral.



We started the HiPQIP with modest aims – but became more ambitious as the project went on. Supporting each other through the project, allowing everyone to have a voice and make suggestions was vital to our success. We had monthly meetings to drive the project forward with work to be undertaken in between, and encouraged observers to see what we were doing.

Having the Quality Improvement & Patient Safety team on board made quality improvement accessible, and gave us a framework to work with. We used NICE quality standard 35 to underpin our service.

Outcomes and impact

As a direct impact of the QIP we delivered:

- A new dedicated antenatal clinic for women with chronic hypertension
- Referral pathways
- Antenatal care pathway
- Postnatal care pathway
- Antenatal leaflets
- Postnatal leaflets
- Online information for women
- Online information for healthcare professionals
- Medication initiation guidance
- Medication titration guidance
- Discharge letters

We measured our outcomes and impact through:

- PPI meetings to listen to women's views
- Clinic surveys of quality of care
- Audit (and re-audit) against NICE quality statements
- Designing automated data downloads for quarterly review of clinical outcomes

In the first year of the HiP clinic, 97% of women had a live birth and there were no avoidable stillbirths after 24 weeks of pregnancy. The photograph above shows one of the women who had a baby with our clinic. This was a particularly precious and special baby for this mother.

What we learnt

We learnt to continuously evaluate whether we were achieving what we set out to do and to respond if we weren't.

Involving the women has been key: *"I always felt like I was an active participant of my care – part of the solution to my illness."*

We will continue to check we are delivering high-quality care – but we have also been asked to look at the care of women with new hypertension in the second half of pregnancy so we have a new challenge to take on!

