Utilization of Partograph for Labor Management among Healthcare Providers

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Abstract:

Background: Generally partograph referred to as the partogram, it is a graphical record that has been widely acknowledged and recognized as the foremost labor monitoring instrument across the world. The World Health Organization has recommended partograph usage during the time of active phase of labor as it aids in the timely detection of abnormal labor progress and facilitates immediate interventions, if necessary. Reviews of articles were collected from online databases to review the utilization of a partograph for labor management. The World Health Organization recommends the utilization of partograph for all laboring mothers. Partograph is a cost-effective, single sheet of paper that is used to follow maternal and fetal condition and progress of labour. Obstructed and prolonged labours are major causes of maternal deaths. These causes can be minimized by routine utilization of partograph.

Keyword: Consumption; partograph; healthcare providers; executive

Introduction

In earlier history pantographic recording means identify the progress of labour and significant condition of both mother and fetus. It’s used in 1970 to identify or detect abnormal labour progress. The partograph is a cost-effective tool used to monitor maternal and fetal conditions during labor. It play an important role for promoting or proper intervention at the time of abnormal labour. Health care professional play an important role to timely detection of abnormal labor and also use proactive measures to prevent prolonged labor. Including this risk associated with postnatal, obstructed labor, hemorrhage, sepsis, uterine rupture, and its other complications.

The partograph provides a framework for assessing both maternal and fetal condition during labor. Maternal condition can be monitored using different parameters such as; blood pressure which helps in detecting any hypertensive disorder in pregnancy that may lead to complications such as convulsions followed by coma, Pulse rate helps to detect the hydration status of the mother and whether the mother has an infection during labor, Temperature increase may indicate an infection while urine output is checked to exclude abnormal quantities of protein in urine which may indicate damage to the kidneys and dehydration while Obstruction of the bladder can obstruct the fetal head into the birth canal (Magon, 2013).3

What is labour?: Partograph is a single sheet of paper where maternal care providers utilize to monitor labour progress, fetal and maternal condition while a mother is in the active first stage of labour.
Types of partograph: The world Health Organization (WHO) partograms are the best known in most countries with three types published between 1990 to date.

Nurses related factors influencing partograph utilization

- **Knowledge of nurses:** A number of research studies reveal challenge of correct and consistent utilization of the partograph (Magon, 2013; Mathibe-Neke, 2014). The existence of poor utilization of the partograph is associated with lack of midwives’ competence and knowledge on partograph use. Competency requires that the health care provider attends to a normal labor and birth, able to perform abdominal examination in order to determine descent of the fetus and able to do a vaginal examination to determine the dilation of the cervix (Ogwang et al., 2011).

- Training of nurses: Comprehensive training on partograph among nurses promote its use which reduce prolonged labor, augmentation of labor, emergency cesarean sections and still births. The attendant should be well trained so that they can have competence for better utilization of the partograph (WHO, 2013). The impact of training among nurses on partograph use demonstrates improved utilization of the tool. Despite good knowledge among midwives on partograph use, poor utilization of the partograph in most health facilities can be attributed to lack of training on partograph use (Opiah et al., 2012).

- Attitude of nurses on partograph use: Most parameters on the partograph are never monitored by the health care provider and the findings are not documented on the partograph after attending to the woman in labor. As a result, progress of labor is never closely monitored which may not translate into appropriate action. Sometimes the health care provider feels that effective completion of the partograph is time consuming task while others do not always understand how the partograph can save a woman’s life. The attitude of the health care provider has a potential influence on partograph utilization, without positive attitude the partograph cannot guide health care provider to take appropriate decisions during labor (WHO, 2013).

- Experience of nurses: Experience of midwives is important in regards to utilization of the partograph. Despite the good knowledge on partograph, poor utilization of the partograph in labor can be attributed to lack of experience from the midwives interviewed. Knowledge among junior nurses on partograph use is poor due to lack experience needed for effective utilization of the partograph (Fatusi, 2012). Young midwives in terms of experience may not utilize the partograph because they fear making errors (Abebe et al., 2013).

Efficacy of the Partograph

- As stated earlier, the Cochrane review of the partograph seems to conclude that evidence reveals that partograph use in labors affects the improvement in clinical outcomes partially. Contrary to this, other studies conclude that partograph use results in shorter labors and better maternal and fetal outcomes.

- Health-care providers in labor wards experienced the modified partograph to be much more user-friendly, as compared to the composite partograph in which they found the latent phase difficult to complete. The modified partograph was found to significantly improve various intrapartum outcomes like a reduced cesarean section rate, augmentation of labor and admissions to neonatal unit as compared to the composite partograph in especially low-resource settings.

- Overall completion of the partograph to the expected standards is poor which affects its use in clinical practice. Analysis of completed partographs shows that the cervical dilatation and fetal heart rate are usually duly filled as compared to maternal well-being findings.

Partograph in Labor: Challenges and Solutions

The greatest challenge in partograph use is to enhance its effective implantation in the management of all labors universally. Unfortunately, the partograph is still not considered as mandatory or central in routine care of all laboring women. This may be because of lack of commitment and inconsistent acceptability for the usage of the partograph in labor rooms. At present though a majority of health-care workers do possess positive attitudes toward the partograph, a few challenges need to be tackled to ensure a favorable environment. These challenges are support by the health system, availability of resources, competence in use and monitoring and evaluation of the partograph in practice.
Positive validation, facility level guidance, evaluation and audit of partographs from experienced seniors and supervisors will enhance the value of the partograph in clinical practice. Adequate availability of resources, (i.e., the partograph and accessory equipment) will result in completion, which is essential to ensure consistent use, but sadly this is still lacking. Individualized training improves knowledge about the partograph12, but the use of multidisciplinary training strategies results in understanding of roles and promotes coordinated team work.13

All staff members providing care for women in labor should be trained and regularly updated in partograph use. Training should consist of completion and decision-making, like when to start the partograph, when to take action and appropriate referral. A limitation with the partograph use in current practice is the failure to evaluate the tool at facility level in terms of outcomes. This is paramount in evaluating the level of impact partograph use has on care provision and referrals as well as on specific labor outcomes. Hence, if positive outcomes from partograph use are observed and informed to all involved in the birthing process, then certainly it will be embedded into routine labor ward practice.

The Paperless Partograph: A Simplified Tool to Prevent Prolonged Labor.

E Partograph: Jhpiego and the Johns Hopkins Center for Bioengineering Innovation and Design (JHU-CBID) have developed the ePartograph, a handheld device and software platform based on the current partograph recommended by the World Health Organization.14

Mobile partograph: Founded in 2002 out of MIT’s Media Lab, Dimagi is a software social enterprise that develops technologies to improve service delivery in underserved communities.

Conclusions

The findings from this study indicate that healthcare workers in most of the reviewed studies displayed inadequate knowledge, limited adherence to practice, and only moderately positive attitudes toward the utilization of partographs. Enhancing the knowledge, competency, and attitude of health workers towards the utilization of the partograph can significantly contribute to the improvement of accuracy in its completion. The outcome of this study demonstrated a pressing requirement for comprehensive reforms in the healthcare sector, particularly in terms of in-service training and continuous monitoring of service delivery across all tiers of healthcare facilities. These measures are crucial for enhancing compliance and accuracy in the utilization of partograph plotting, which, in turn, positively impacts maternal and perinatal health outcomes.

Recommendations

A) Strengthening healthcare facilities through the consistent provision of partographs stands as the initial measure to facilitate healthcare providers’ efficacious implementation of partograph protocols. B) Continuous training and on-going professional development using effective instructional methodologies should be provided to every healthcare provider for better utilization of the partograph. C) Establishment of effective supportive supervision programs for healthcare providers, coupled with the enhancement of clinical proficiency in utilizing partographs, emerges as imperative elements for ensuring the long-term success of implementation efforts. D) Implementation of monitoring and auditing protocols for the partograph in clinical practice, encompassing aspects such as its completion, decision-making process, referral practices, and subsequent outcomes.

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