

# Introduction of a Parent Preterm Passport at North Middlesex Hospital

Janka Nixon, Assurance and Compliance Lead Midwife  
Lauren Neal, Preterm Birth Specialist  
Alison Wonnacott, Consultant Obstetrician and Gynecologist



## Background and Aim

North Middlesex hospital is located in North Central London, and has approximately 3,500 births a year. Our preterm birth rate is 7% of all live births at the trust. We have a level 2 Neonatal Unit. We have mixed patient demographics with the highest rates from British and white other groups. A high percentage of patients:

- live in deprived areas
- are smokers
- are non-English speakers.

**Aim:** to implement both the BAPM parent passport and clinical passport to support perinatal optimisation in North Middlesex Hospital by December 2024

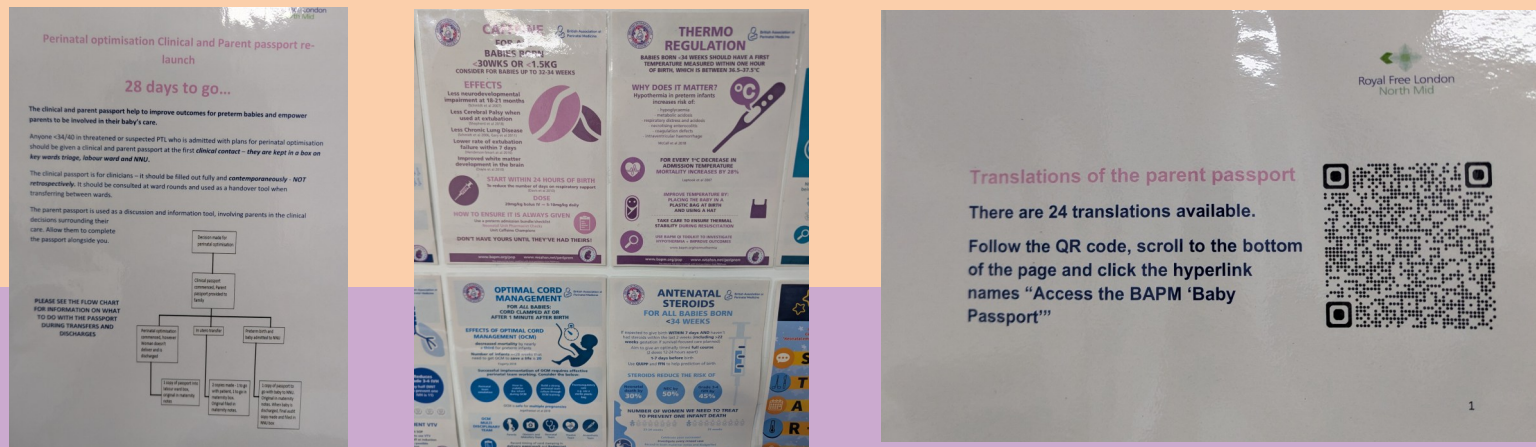
## Method

To support our ongoing quality improvement projects surrounding perinatal optimisation we will implement the BAPM passports to help:

- As part of national guidance to improve outcomes for neonates born preterm
- Support parents to be informed, involved and empowered with the care of their preterm baby
- Support our preterm pathway and ensure all 9 of the optimisation elements are implemented when possible
- Standardise documentation across sites for perinatal optimisation
- Eases handovers and prevents information being missed on transfers between wards and across hospital sites.

We launched the parent Passport at North Middlesex in November 2024. We did this by:

- Sending out information via WhatsApp group chats
- Sending emails preparing for the launch
- Tea trolleys/walk arounds to provide information
- Compliance lead and consultant obstetrician including information on SBL study days
- Putting up posters in key ward areas.



## Results

We have not yet completed a formal audit of the passport. From informal review of passports, we have noted a opportunity for improvement in the use, completion, and accuracy of the passport.

We are relaunching the passport and plan to audit the passport fully after the re-launch. Our plans for our relaunch include:

- Using our new dedicated Preterm Birth Midwife to support implementation
- Launching cot cards and labour ward whiteboard prompts
- Communicating via WhatsApp group chats
- Doing walk arounds in clinical areas
- Training preceptee midwives
- Putting up new Staff room posters.

We have now clarified and clearly identified:

- Where to locate the passport on each ward
- When to share the information
- Where to file the passport in the notes.

## Learning

We are hoping the parent passport will help support improvement across the whole perinatal optimisation pathway. Specifically, we hope that the passport will serve as a reminder to clinical staff to prioritise optimal cord clamping in preterm infants. As the graph demonstrates, we have been working on improving optimal cord management for our preterm infants. We had a 71% compliance rate for optimal cord clamping in Q3 2024.

Babies born <34 wks with Cord clamped at 1 min or after			
Required Standard: Babies born <34 weeks with cord clamped at 1 min or after			
Process Indicator or Outcome measure: Percentage of babies born <34 weeks with cord clamped at 1 min or after			
Numerator: Babies born <34 wks with cord clamped at 1min or after			
Denominator: Babies Born<34 wks			
This data has been collected electronically through MIS and by manual review of notes.			
Prem: premature			
Data Period	Number of babies born <34 wks	Babies <34 wks with cord clamped at 1min or after	Percentage
October 2024	7	5	71%
November 2024	2	1	50%
December 2024	5	4	80%
Quarter 3 Summary	14	10	71%

