

Clinical and parent perinatal optimisation passports: how are we using them at St George's Hospital?



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St George's Hospital has a tertiary maternity unit with a Level 3 NICU, offering high-quality maternal and neonatal care to a diverse patient population. The hospital sees around 5,000 deliveries annually, with approximately 360 of these being preterm births, and about half of these being born before 34 weeks gestation. Since the NICU also handles neonates with surgical needs, many babies experience extended stays for specialised care.

Background

In November 2023, the multidisciplinary Perinatal Optimisation Group was established – we made a commitment to introduce the Perinatal Passports as part of our focus on family integrated care. The parent passport was officially launched in May 2024, with staff engagement promoted through training days, "Walk Around" events, and the introduction of a new perinatal optimisation display board. Recognising the diversity of our patient population, the parent passport is available on the wards in 25 languages to ensure accessibility and inclusivity. Six months following the launch, we have designed an audit to assess how effectively we have integrated this new initiative into our practice.

Aims

Audit and assess the impact of launching the parent passports in empowering parents, as part of family integrated care.

Audit and assess the impact of launching the clinical passport in aiding accurate documentation.

Method

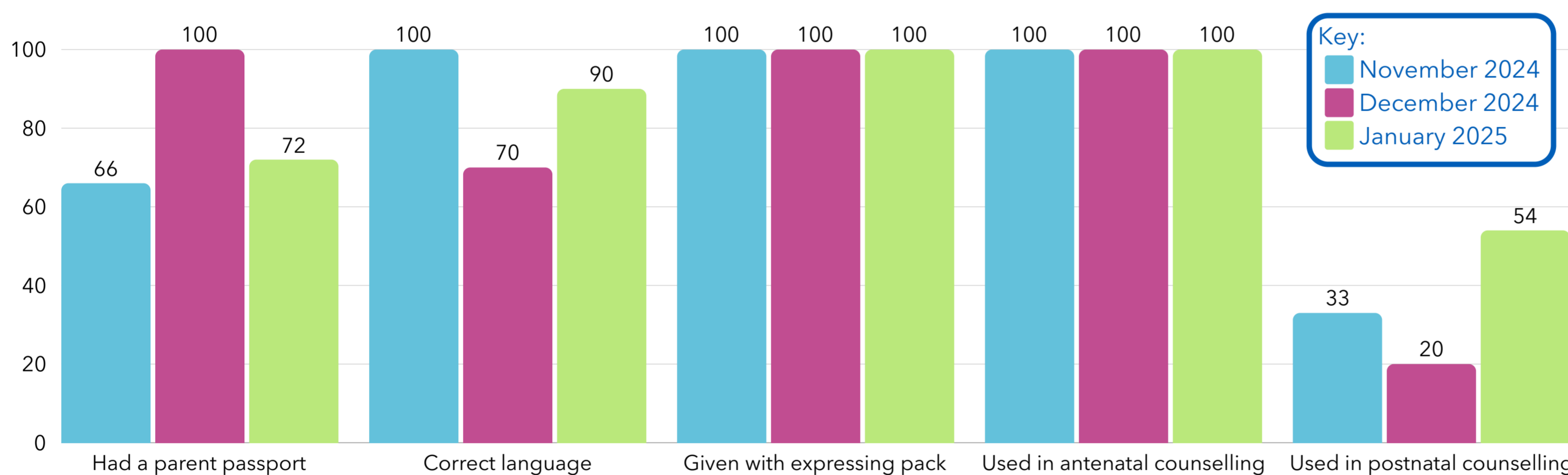
The data was collected over a three-month period, from 1 November 2024 until 31 January 2025. Whenever possible, it was recorded in a comprehensive, real-time data sheet soon after delivery, and was gathered by directly examining the perinatal passports in the mother's and baby's notes to confirm completion. In cases where the baby or mother had been discharged, data was retrieved from iClip documentation and electronic data management system (EDM) records.

The audit will examine whether parents have received a parent passport and whether: it is given alongside the expressing pack; provided in the relevant language; and if it is during antenatal and postnatal counselling sessions.

Additionally, the audit will assess whether the clinical passport is being completed, when it is done, and by whom. It also recorded whether translation services were required and used to aid parents when staff were explaining the elements on the passport.

Over 55% of parents of preterm babies completed a clinical passport between November 2024 and January 2025.

Pilot audit results for parent passport (%)



10-15% of parents of preterm babies that completed a clinical passport between November 2024 and January 2025 required translation services.

Results

The audit demonstrated successful integration of parent and clinical passports in over 60% of preterm deliveries, with consistent use in antenatal counselling and distribution alongside expression packs. Accessibility was prioritized, as over 70% of parents received passports in their preferred language.

The maternity team initiated clinical passports more than 90% of the time, while postnatal documentation remained lower at 60%. Efforts to enhance postnatal communication saw improvement, with passport use in postnatal counseling increasing from 30% to 54% by the end of the period due to ongoing education and reminders.

Conclusions

The results show a significant and sustained shift in practice, empowering parents of preterm babies. This success highlights the effectiveness of a multidisciplinary team in driving change, and we hope it inspires other units to adopt similar practices. This success highlights the effectiveness of a multidisciplinary team in driving change, and we hope it inspires other units to adopt similar practices.

We are pleased to share that our passport auditing template can be used by other units, and the HIN South London has kindly agreed to disseminate it. This tool can help other units streamline their processes and improve the implementation of perinatal optimisation passports in their care.