

Optimal Cord Management in Preterm Babies – our journey from zero to hero

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Objective

Optimal Cord Management (OCM) for preterm babies is one standard which makes up preterm optimisation and **describes the optimal timing of cord clamping for each patient**

Our local neonatal unit data OCM rates for preterm babies were significantly lower than the national average

	2020	2021
Our Unit	0%	4%
National Average	28.1%	41.8%

Design

A quality improvement project focussing on increasing the number of preterm babies having OCM

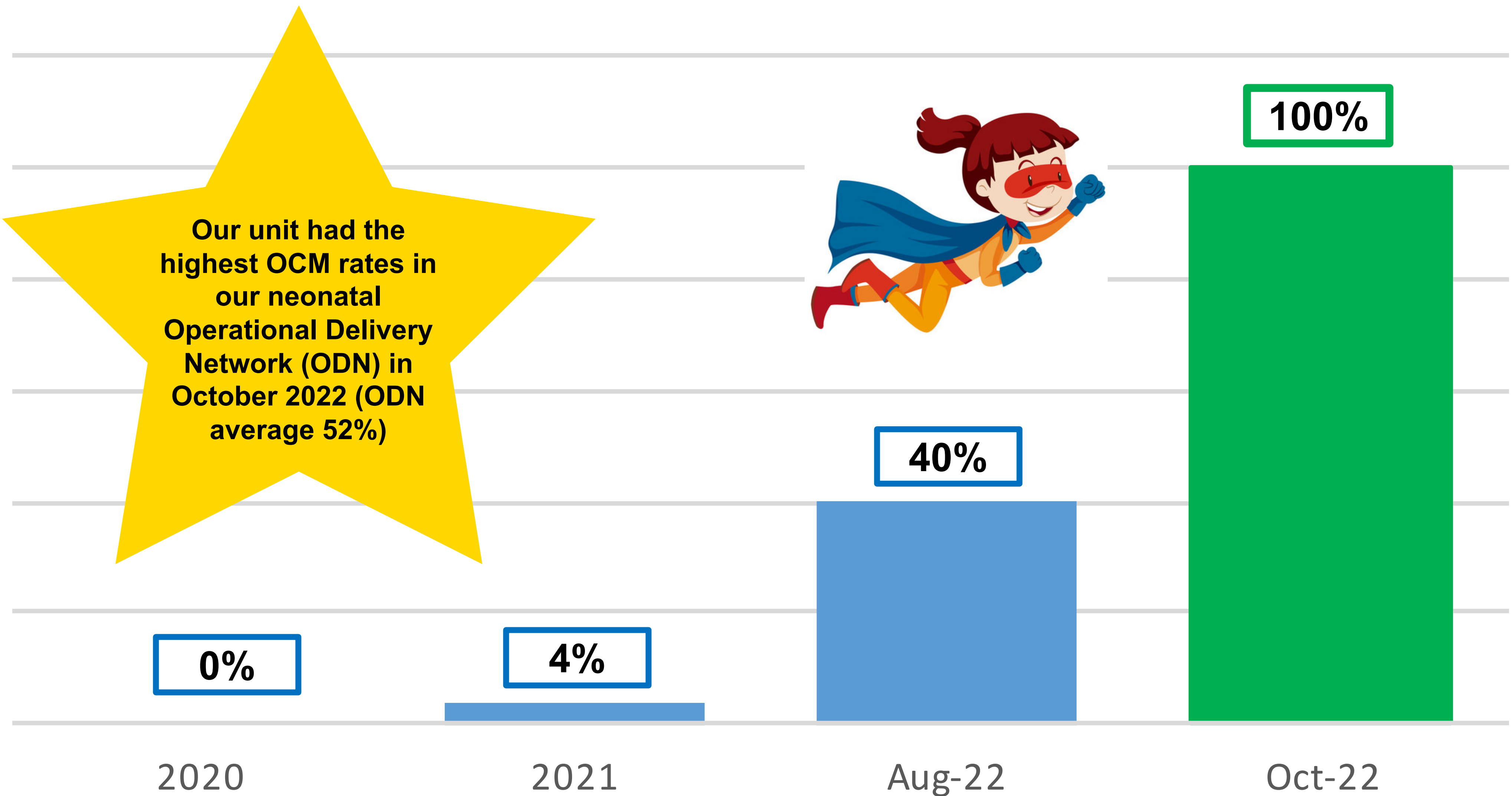
Methods

- 1 An initial baseline knowledge survey
- 2 Baseline data from 2021 on mode of birth from all our <34 week births
- 3 Staff education programme
- 4 Snapshot data collection of our OCM rates for preterm births (< 34 weeks) were carried out in August and October 2022

Results

- 1 60% had not received any training or education in OCM for preterm birth
- 2 75% of all babies born < 34 weeks were born by Caesarean section
The high proportion of Caesarean births was identified as a major barrier to increasing the number of preterm babies having OCM

4 Percentage of babies < 34 weeks having OCM



3 Staff Education Programme

- Simulation sessions on OCM at preterm Caesarean births
- Refresher sessions on 'how to scrub' for neonatologists
- Presentations on OCM at MDT meetings
- Publication of our OCM guideline

Conclusions

Our quality improvement project increased our OCM rates from 0% to 100% by October 2022

Our OCM rates for October to December 2022 were 67%, which is above both the average for our neonatal ODN and the national average

- Our next steps included:
- Editing our WHO checklist to include OCM ✓
 - Making OCM a mandatory data capture field ✓
 - A parent information leaflet on OCM, co-produced with our Maternity Voices Partnership and parents of preterm babies ✓
 - Procuring the Concord Birth Trolley, enabling neonatal resuscitation/stabilisation to take place with an intact umbilical cord ✓
 - A parent satisfaction survey on OCM ☐