



JENNY LIND
CHILDREN'S HOSPITAL

Welcome to the Neonatal Intensive Care Unit **(NICU)** Family Guide



My name

Named Neonatal Consultant

Named Surgical Consultant

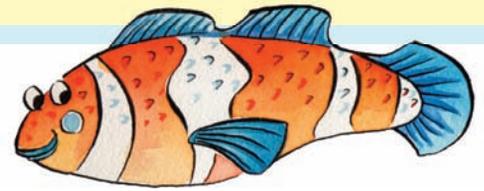
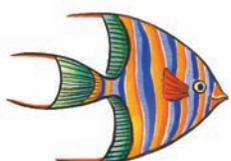


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My name/names

My parents like me to be called:

Hospital number:

My date of birth:

My gestation at birth:

My birth weight

My method of birth:

Named Neonatal Consultant

Surgical Consultant Surgeon

Named Nurse

My Parent's names:

My Brother's / Sister's names:

.....

.....

.....

Hospital where I was born:

Who may visit me:

.....

I am wearing my own clothes Yes No
(Please give my clothes to my parents for washing)

Research studies

Additional information about me:

.....

.....

.....

.....



Introduction

Dear Family

Congratulations on the birth of your baby. We appreciate that this is a particularly difficult time for you. We hope that this information is useful and will help take some of the stress away from having your baby on the unit. Our aim is to ensure that all parents are confident and skilled in looking after their baby and to help you to get home as a family as soon as possible. The Neonatal staff are there to help you at all times. We ask that you work with the nursing team to enable us to support you in caring for your baby.

The aim of this booklet is to provide you with information about the unit. However it will not answer all your questions; if there is anything you do not understand please ask a member of staff.

Within the NICU, you will find that we provide many different types of care, both for babies that are born too soon or too small as well as more specialist nursing for full term babies with problems at birth and those needing surgery.

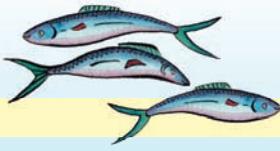
We are happy for you to phone at anytime to ask about your baby, please be aware that we can only give information to parents, unless we have permission given by a parent to inform other named family members. Please try to avoid phoning during handover times as below.



The key telephone numbers are

NICU Reception	01603 286865/286866
Room 1 Intensive Care	01603 286867/286869
Room 2 Intensive Care/High Dependency	01603 286868
Room 3a High Dependency/Special Care	01603 286847
Room 3b Special Care	01603 286872
Room 4 Special Care	01603 289490
Outreach Team	01603 286838 (voicemail)
Bliss Family Care Coordinator	01603 286846
Nurse Manager/Matron	01603 286871
Nursing hand-over	
Morning	07:30 - 08:00hrs
Evening	19:30 - 20:00hrs
Medical handovers and review ward rounds	
	09:00 - 09:30hrs
	17:00 - 17:30hrs
	21:00 - 21:30hrs





NICU team

You can see pictures of all the team on the photo boards. You may find this a useful way of identifying staff members. There are wipe boards outside each of the nurseries showing our names of the nurses working that day/night and who is looking after your baby. Every baby has a named Consultant Neonatologist who is responsible for their care, and a Named Nurse. Their names will be clearly displayed on your baby's cot/incubator. This will be particularly helpful for babies who have a long stay on the unit.

We have a team of paediatric medical staff consisting of Consultant Neonatologists, Consultant Paediatric Surgeons, Advanced Neonatal Nurse Practitioners, Registrars and Senior House Officers.

Our specialist nursing team consists of Nurse Manager/Matron, Senior Nursing Sisters, Neonatal Nurses, Neonatal Nursery Nurses and Assistant Practitioners, Practice Development Nurse, Practice Facilitators and Outreach Nurses.

Dieticians, physiotherapists, speech therapists, pharmacists and social workers all come to NICU as part of the multi-disciplinary team. We also have Student Nurses and Midwives on placements as part of their training. A Bliss Family Care Coordinator is available for parental support. We can liaise with the infant feeding coordinators when necessary.





Visiting your baby

We have an open visiting policy for parents and siblings so please visit your baby whenever you wish day or night. Brothers and sisters of your baby are welcome. We suggest that you prepare your children by telling them a little about their new brother or sister, the surroundings and by showing them a picture so they will know what to expect.

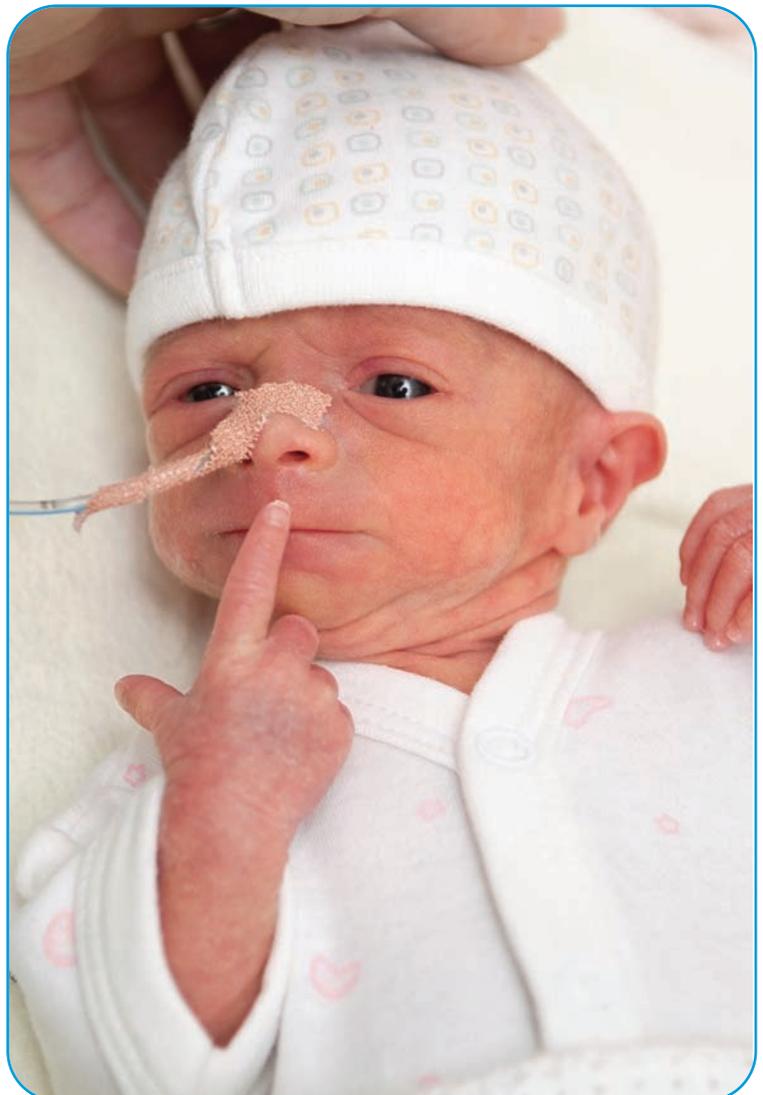
No visitors will be allowed to visit without parents being present, unless prior arrangements have been agreed with the nursing staff.

Restrictions on visiting

- Children under sixteen years other than brothers or sisters will not usually be permitted to visit.
- It is essential there is adequate space around each cot especially in the case of emergencies. To avoid overcrowding around cots we ask you to restrict visitors to two at a time (this includes parents).
- We would ask you not to visit if you have cold/flu symptoms, diarrhoea and vomiting, or if you or a member of the family develops chickenpox, measles or shingles. If you are unsure please discuss with the nurse looking after your baby.
- From September to the end of March, the Department of Infection Prevention and Control has advised that children aged 2 years and under are not permitted to visit NICU due to the high risk of this age group carrying the bronchiolitis virus.

Quiet time

We aim to give babies a period of complete uninterrupted rest between 12:30 – 14:00 and 20:00 – 22:00hrs. Whenever possible we avoid undertaking any routine procedures or interventions during these times. We ask that only parents/carers visit during quiet time.





Mobile phones

Mobile phones are allowed on the unit but we ask that they are used in the corridor or family room and not at the cot side and are kept on silent mode.



Parent/family facilities

Our family room provides a quiet space to rest, watch television, make use of the secure laptop and the kitchen area. We also have a playroom for visiting brothers and sisters; we do ask that you supervise young children at all times.

We have limited rooms available on the unit for parents to stay overnight and priority is given to those parents who have a baby requiring intensive care. We encourage parents to stay overnight with their baby prior to going home. There is further accommodation available within the hospital grounds at McKee House. Nursing staff will discuss booking a room with you. Please be aware that availability of these rooms is limited and you may be asked to leave at short notice as priority is given to those parents living out of area. There are some local B & B's close to the hospital offering family accommodation, further details can be found in the file in the family room.





Meals

We understand the difficulties of leaving the unit for meals but we urge parents to take regular breaks, to eat well and drink plenty of fluids. There are various cafes throughout the hospital. Vouchers are available from NICU Reception for subsidised meals for parents and these are valid in the main restaurant only.

Car Parking

Parking is £2 per day for unlimited visits and vouchers are available from NICU Reception. **Car parking is free if your baby has been on NICU for more than two weeks.** Our Receptionist will automatically inform the Travel Office and parents will need to take their parking ticket to the Main Reception in the West Atrium to have it validated.

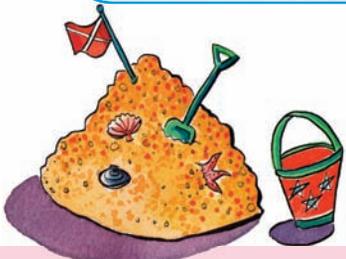
Parenting Skills

The NICU Team are committed to family-centred care. Staff will help you to adapt to being a parent with a baby on NICU and start to focus on developing your own role in supporting your baby's care. The aim of the parent guide at the end of this booklet is to help you become confident in looking after your baby as appropriate for their individual needs. This gives you an idea of what skills you can learn and how quickly these can be achieved during your baby's journey through NICU.





Evidence shows that babies with high medical needs, in a stable condition benefit from kangaroo care (skin to skin contact), comfort holding (gently laying your hands over your baby) and being read to from parents. Further information can be found in the Bliss leaflet rack in the Family Room.



Breast feeding

We are working towards becoming a UNICEF Baby Friendly Initiative Accredited Hospital, having achieved our Stage 2 award in November 2013. This means we actively promote breastfeeding and we value it, like “medicine” for preterm or ill babies. We know that every drop of breastmilk you can give your baby has value, even if you are not able to exclusively breastfeed. Most importantly, we support all mothers, however they choose to feed their babies. We want you and your baby to enjoy a responsive, positive and rewarding experience whether you breastfeed or not.

All nursing staff on the unit are trained to UNICEF standards to support mothers with all aspects of expressing and breastfeeding, including storage of milk. The receptionist will print labels on request for labelling bottles of expressed milk. We have access to donor human milk when required if mothers cannot produce their own.

If you choose to breastfeed, there are some important tips to help you establish your milk supply and get off to a good start with feeding. This includes early and frequent expressing if your baby cannot yet breastfeed, as well as placing and swapping a small piece of material close to your baby and another in your bra so that you both get to know each other’s smell (enclosed in your admission pack are some of these snuggle squares). Expressing by your baby’s cot side or whilst your baby is in skin contact with you is encouraged as it will boost your milk supply and calming hormones. Screens are available for privacy should you wish.

There are two feeding rooms with comfortable chairs for you to use. Sterilising equipment and electronic breast pumps are available to use

on the unit. Before you go home, staff will observe your baby breastfeeding and perform a feeding assessment to ensure you feel happy and confident with breastfeeding.

We have facilities on the unit for storing and freezing your breastmilk during your stay on NICU. Due to storage limitations we ask that you collect any milk stored in the freezer within a week following discharge home.

If you have made an informed decision to formula feed or bottle feed your breastmilk, please bring in your own feeding bottles, teats and bottle brush as soon as possible. It is important that your baby is feeding competently with them before going home. The nursing staff can support you with this as many babies have a preference for different teats. You will also be taught about how to make up formula feeds correctly and sterilise equipment, as well as tips on enjoying responsive bottle feeding.

The Speech and Language Therapist on NICU

The Speech and Language Therapist on the Neonatal Unit is available to help with establishing feeding skills. Whilst not all babies will need this specialised help, some babies will need some extra support to establish oral feeding (that is breast or bottle feeding by mouth). The Speech and Language Therapist may begin work with you and your baby well before the introduction of oral feeds. This might include working on your baby’s tolerance of touch around the mouth and sucking practice on a finger or dummy. The Speech and Language Therapist will work alongside staff on the Neonatal Unit to support you and your baby on the safe and timely introduction of oral feeding.





Infection Prevention and Control

It is extremely important to protect all babies from infection risks. All visitors must wash and gel their hands on entering NICU and before opening the doors to the fridge or freezer in the milk kitchen. Outdoor coats must be left in the waiting area near reception. Please discuss with nursing staff if you are unsure of correct procedures.

Safety and Security

Doors to NICU are locked at all times. To gain access, please use the doorbell and a member of staff will release the door. You may be asked to identify yourself; this is a safety precaution so that we are aware of who is visiting at all times.

The Trust is not responsible for loss of valuables and personal belongings. Lockers are available at reception for parents, please bring your own padlock and key if you wish to make use of a locker.

Confidentiality

Ward rounds are carried out twice daily and are led by the consultant on call or an experienced registrar. You are welcome to stay with your baby while the team are discussing his or her care, but will be asked to leave when other babies are discussed to maintain their privacy. This will also apply during nursing handover between 07:30 - 08:00 and 19:30 - 20:00hrs.

All information concerning your baby's health is strictly confidential and will only be given to you. A member of the medical team will be happy to update you regularly on your baby's care and



progress. If you wish to talk to your baby's Named Consultant or Named Nurse, please ask a member of the nursing team so that a convenient time can be arranged.

Consent

If your baby requires any procedures, investigations or treatment, you will be asked to give verbal or written consent. In normal (non urgent) circumstances, consent must be given by the person with legal 'parental responsibility'. The medical team will explain everything to ensure that you fully understand what you are consenting to.

Photographs of your baby may be taken on admission for you and during their stay for medical reasons. If you are not happy with this, please let a member of staff know, so you can formally opt out.

Research

Our neonatal unit is very enthusiastic about clinical research!

We believe that we must all do research to better help babies and their families. As doctors and nurses caring for babies, we are continually involved in various research studies because we always want to find how we can improve the way we care for babies and increase their chances of healthy survival.



Consequently, our neonatal unit is proud to be currently involved in some of the most important national and international studies. These studies have the potential to significantly improve treatments and outcomes of sick and premature babies. We firmly believe that, by being involved in these various important studies, it keeps us at the 'cutting edge' of providing the latest and best treatments for the babies we care for.

It is therefore quite probable that, at some stage during your baby's stay on our NICU, you will be approached about one or more research studies for which your baby may be eligible. In this instance we will provide detailed information regarding any potential studies to help you decide about your baby's participation. We do hope you will consider allowing your baby to join any research study. Your participation will directly help answer important questions that will then let doctors and nurses know how best to care for premature sick babies in the future.



Fire policy

Your baby's safety is of paramount importance and in the event of an emergency, NICU staff will inform you of what to do. The fire alarms are tested on Wednesday mornings.

Smoking

The hospital building and grounds are designated 'NO SMOKING' areas.

Zero Tolerance

The Hospital Trust will do all it can to prevent abuse, assault and discrimination towards its staff. Aggression, threatening and racist behaviour is unacceptable and will not be tolerated.

Transfer to other Neonatal Units or Paediatric Ward

The Norfolk and Norwich NICU is one of three Neonatal Intensive Care Units in the East of England and babies are transferred in for treatment from across the region. When your baby's needs can be met at your local unit, we will prepare you and your baby for transfer closer to home.

If babies have long-term care needs, it is more appropriate that they are transferred to a children's ward where the environment and specialist team can further support their development. Prior to transfer, you will have an opportunity to visit the ward, meet nursing staff and discuss how your baby will be cared for.

The Bliss Family Care Coordinator is happy to discuss any planned transfers and can arrange a visit to the ward/unit.



Preparing for Home

Staff will complete the Parent Guide at the back of this booklet with you to ensure you feel happy with caring for your baby at home. Temperature control is very important and we ask parents to buy a digital thermometer to practise with prior to discharge. All parents will be offered a resuscitation demonstration and a discharge pack prior to going home.

Neonatal Outreach Team

The Neonatal Outreach Nurses are based on NICU and will be involved in discharge planning to ensure your baby is able to go home as soon as possible. They offer nursing support at home to a range of premature and newborn infants and their families who have been discharged from NICU and Transitional Care. The service runs Monday to Friday office hours. All babies under the care of the Neonatal Outreach Team will have open access to the Children's Assessment Unit in the Jenny Lind Children's Hospital. This ensures that families have support out of hours if their baby becomes unwell or if a feeding tube needs replacing.





Parent Support

For many parents the first few days, weeks or months with a premature or sick baby are extremely tough especially if your baby is very little or unwell. The staff on the unit are experienced in supporting families in your situation and will always find time to explain things to you. If you feel you would like some additional support then please see our Bliss Family Care Coordinator or contact on **01603 286846**.

Bliss is a charitable organisation for babies born too small, too sick too soon baby charity and offers a wide range of information booklets and support for families.

Contact: www.bliss.org.uk for information, interactive message board and Dad's Forum.

Family Support Helpline
free phone **0500 618140** for confidential information and support.

Email: parentsupport@bliss.org.uk.
Add breastfeeding helpline
NICU Face book Support Group
www.facebook.com/#!/group.php?grid=12577414310

Julia Shirtliffe, Bliss Coordinator at the Norfolk and Norwich University Hospitals
julia.shirtliffe@nnuh.nhs.uk 01603 286846

Complaints and suggestions

If you have any suggestions, complaints or concerns regarding NICU, nursing or other issues, please make these known to a member of staff immediately as we can often resolve issues for you.

Alternatively you can ask to speak with the unit Matron, contact PALS the Trust's Patient Advice and Liaison Service or use the 'Help us to Help you' leaflet, information of both services are available in the Family Room.

We are always looking for ways in which we can improve our service and would appreciate parents completing a Ward Patient Survey form on the day of your baby's discharge. This will only take a few minutes and can be left at reception when you depart.

The Chaplaincy Team

The Chaplaincy Team is here for people of all faiths, as well as those who have none, and can also make contact with religious leaders appropriate to your faith tradition. They will visit anyone if asked and are happy to discuss spiritual issues or any other concerns. There is a multi-faith chapel complex and garden within the hospital, information leaflets are available at Reception and in the Family Room. Contact on 01603 287470. Baptisms and Naming Ceremonies can be performed on NICU.

East Anglia's Children's Hospice

NICU works closely with EACH (East Anglia's Children's Hospices) who offer Family Support to parents on NICU for babies with life-threatening and life-limiting conditions.



Parent Guide

Learning to care for your baby on NICU

Education Skill for Parents	Parental Teaching Staff Signature / PRINT NAME	Date (dd/mm/yyyy)	Parent/Carer initial	
Important Information – Immediate				
Introduction and tour of NICU				
Advice on visiting NICU				
Infection Control measures				
Safety/security/confidentiality				
Bliss Information Pack for parents				
Developmental Care – First week on NICU				
Comfort holding / recognising stress cues				
Kangaroo care/skin-to-skin holding				
Quiet time: noise and light (what your baby hears and sees; see Bliss Booklet 'Look at me – I'm talking to you')				
Sucrose / pain relief				
Feeding cues				
Using a dummy (pacifier) or/and comfort sucking at the breast. Leaflet available for appropriate gestation				
Infant Cares – From Day 1 as appropriate				
Mouth care				
Nappy changes				
Top and tail				
Temperature control				
Bathing				
Feeding – From Day 1 as appropriate				
Breastfeeding pack.				
Hand expressing effectively				
Safe use of breast pump, check sizing of pump shield				
Cleaning and sterilising breast pump equipment				
Defrosting / warming of breast milk				
Storage of breast milk at home				



Education Skill for Parents	Parental Teaching Staff Signature / PRINT NAME	Date (dd/mm/yyyy)	Parent/carer initial	
Tube feeding information/guidance				
Cup feeding				
Bottle Feeding (types of bottles & teats)				
Making up formula feeds				
Cleaning and sterilising bottles / teats				
Giving Medicines – One week prior to discharge home				
Why your baby needs medicine				
How and when to give medicines / vitamins				
How to obtain prescription formula and other medicines from GP (if needed)				
Preparing for home – One week prior to discharge home				
Staying in the parent’s unit				
Resuscitation				
BLISS ‘Going Home’ Booklet for NICU babies				
‘Safer Sleep for Babies’ Booklet				
Medical Examination of baby prior to discharge				
Follow up appointments				
Car safety				
Immunisations – inform parents when these are due and give immunisation leaflet				
Introduction to Neonatal Outreach Team (if appropriate)				
Follow up at home discussed				
Other information specific to baby and family’s needs (please state): eg. feeding assessment tool				
Transfer to another hospital				
Medical team to discuss with parents				
Discussion with Bliss Family Care Coordinator				
Information to new unit from parents about their baby				
Opportunity to visit other unit				
Information leaflet about new unit				

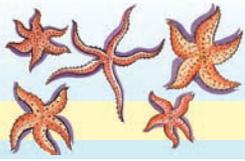


Diary sheets for parents/carers to fill in or staff on request

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A guide to recording information on your baby's care in the neonatal unit

Badger Net Database

Your baby needs the expert care of the medical and nursing team on the neonatal unit. To help deliver the best care possible we collect information about all the babies we look after.

The Badger Net Database is being implemented within all the neonatal units across London and SE England. It is a web based system which collects clinical information regarding your baby.

Why do you need this information?

We use the information we collect to help us:

- Collect accurate details about the care of sick or premature babies in the neonatal unit
 - Monitor neonatal care and make sure it is always up to date
 - Plan and develop services for you and your baby within your area
 - Produce reports that highlight areas of good practice that we can share across the region
- Clinical information necessary to those staff directly involved in your baby's day to day care will be identifiable data. Clinical data required for all other purposes will be anonymised.

What information do you collect?

We record:

- The NHS number for you and your baby
- Personal detail such as your contact details
- Your baby's condition and treatment on a daily basis
- GP details
- Our baby's medication and follow up information
- Where your baby was born
- How many babies you had
- Your baby's birth weight
- How many weeks pregnant you were when your baby was born

Who collects the information?

The staff on the neonatal unit – usually this is a neonatal nurse, doctor or ward clerk. All information will be stored on a secure system and password protected.

When will you collect the information?

Information is updated regularly throughout your baby's stay in the neonatal unit

How will you collect the information?

We collect the information from the medical notes and nursing records. We enter it directly into the database system.

Who will see the information?

Only the people who care for your baby see all the details. There are very strict regulations controlling access to personal information like your baby's NHS number and date of birth. By law, everyone who works for the NHS must keep all personal information confidential and the Trust has strict confidentiality and security procedures in line with the Data Protection Act (1998).

What is the consent procedure?

If you are happy for your baby's details to be used for clinical care purposes, secondary analysis such as audits and for clinical information to be transferred between units should the need arise then you do not need to do anything. If however you do not want your baby's clinical information to be available for such purposes please ask a member of staff for an opt-out consent form. A signed copy of the opt-out consent form will be given to you for your information.

Can I see the records on the database?

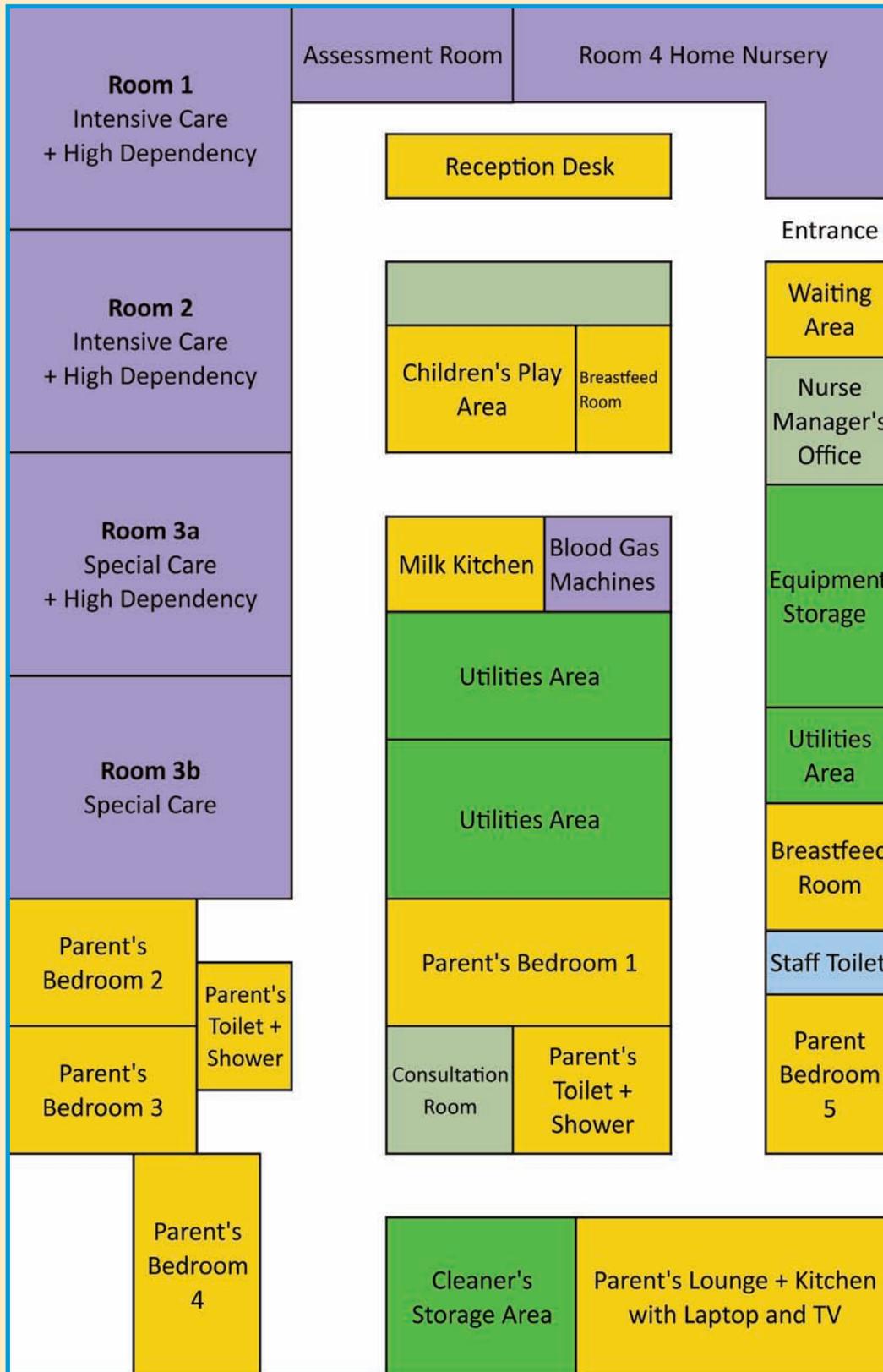
Yes, you can see a copy of the information we have about you and your baby. To do this please talk to the nurse in charge.

How can I find out more?

Please talk to member of staff if you:

- Need more information
- Have any questions or concerns
- Want us to remove any information from the database

Floor Plan



Neonatal Intensive Care Unit
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