

Information for parents

Neonatal Intensive Care Unit



Congratulations on the birth of your baby

We welcome parents and siblings to the NICU anytime, day or night.

We understand that the admission of your baby to the Neonatal Intensive Care Unit (NICU) is a very emotional time, and you are likely to be very anxious. This booklet is designed to answer some of the questions you may have, provide information about the care your baby is receiving, and give some insight into life on the NICU.

Our direct telephone number is: 0121 335 8190

Staff are only able to give information to a baby's parents unless there is a specific instruction in place.

Please make sure that we have an up to date telephone number where you can be contacted at all times. If your telephone number changes please inform the ward clerk immediately. If your phone does not accept withheld numbers, we will be unable to contact you in an emergency.

Visiting

If you would like family members or friends to see your baby:

- They are welcome every day between 9am 12pm and 3pm – 7pm.
- Visitors must always be accompanied by the baby's mother or father
- There should not be more than 3 people by your baby at any one time including parents.
- Visitors must be over 16 (the only children able to visit are your baby's siblings)

We understand that the time for visiting may appear very restrictive, however this is designed to reduce the risk of infection for all babies, and promote a quiet, restful environment to help your baby sleep, grow and develop.

As you can imagine, your baby may require many investigations and procedures during your stay with us on the Neonatal unit that form part of their routine neonatal care. We will always try and keep you informed of what we propose for your baby and involve you in decision making.

For a few of these vital procedures, we will ask you for written or verbal consent, but the majority of these procedures will be carried out routinely. This is because they are an essential part of your baby's care and sometimes they have to be performed during part of an emergency. Please feel assured we will always contact you and explain these events once your baby is more stable.

The nurse caring for your baby will show and explain to you a list of investigations/ procedures your baby may require. You will also be given a copy to keep and refer to over the course of your stay.

We hope that this information helps you to understand some of the care your baby may receive. Please don't hesitate to ask a member of the team if anything is unclear.

If you would like to talk to the nurses to find out how your baby is, please call at any time. Sometimes there may be a delay before your call is answered, please be patient; we will answer the telephone as quickly as possible.

During Visiting

When you enter the NICU please hang your outdoor clothing in the cloakroom. Lockers are available for you to store your belongings whilst you are with your baby. These require a £1 coin to operate. Please leave the locker empty for other

parents to use when you go home. Make sure valuable items remain with you or are locked away at all times, as the Trust does not take responsibility for loss of items.

If you wish to use your mobile phone to make a call, please only do this in the parents' lounge or outside the NICU.

Please note this is a no smoking trust. If you want help or support on quitting please contact a member of staff who can refer you to a local smoking cessation service. You can also purchase nicotine replacement products from the Boots Pharmacy.

Infection control

Premature babies are vulnerable to infection because their immune systems are immature. The most important thing to do to protect your baby from infection is to make sure that your hands are clean and that you are bare below your elbows. This may mean removing watches, jewellery and artificial nails. Regularly wash your hands and arms with soap and water, dry them thoroughly and use the alcohol gel provided.

Always wash your hands

- When you arrive on the unit, at the silver trough opposite the reception desk
- When you enter your baby's room
- Before and after touching your baby,
- Especially after nappy changing
- When you leave your baby's room
- Always wash your hands



If you are involved in providing day—to—day care for your baby (feeding, changing nappies) please be as hygienic as possible. Your baby's nurse will advise you. In particular, dirty nappies must not be placed on the same surface as milk to prevent cross contamination. Please tidy and clean dirty items straight away. Hand—wash basins must only be used for hand—washing and not for discarding any other fluids. It is recommended that only parents handle/touch the baby.

If you are unwell (for example, with a cold or cough, or you have a cold sore) we strongly recommend that you do not visit your baby until your symptoms have improved. If you are suffering from diarrhoea and/or vomiting you must not visit the NICU. We appreciate that this is upsetting, but this will reduce the possibility that the infection will be passed onto your baby and to other vulnerable babies.

MRSA Screening

Most of the time MRSA lives harmlessly on the skin but occasionally it can enter the body and cause harm. As a way of protecting your baby You and your baby will be screened for MRSA on admission to NICU. This is done by taking a swab from the nose or skin which is then sent to the laboratory for testing. It is important that this infection is picked up early and treated correctly before it causes more serious infections.

Levels of care

The NICU at Birmingham Women's Hospital works in partnership with several hospitals as part of a network of care. Our Network is the Southern West Midlands Neonatal Operational Delivery Network (SWMNODN). This ensures that babies receive the right care, in the right place, as close to home as possible.

The NICU at Birmingham Women's Hospital provides intensive care to premature babies born as early as 23 weeks, and babies diagnosed with a heart or other problem requiring

surgery which is diagnosed during pregnancy. Term babies who become ill during or shortly after birth are also treated on the unit. Babies from across the Midlands who have had surgery at Birmingham Children's Hospital may also be transferred for continuing care.

Neonatal Intensive Care is very specialised, and can only be provided in a small number of hospitals. As a result, the capacity for this level of care is limited. For this reason, babies who no longer require intensive care may be moved to other neonatal units that provide high dependency or special care. This allows other very ill babies to receive the care they need.

When your baby does not need intensive care, he or she may be moved to a neonatal unit more appropriate for their level of care. This will hopefully be closer to your home, but occasionally babies are transferred to another unit to allow a baby to be transferred to Birmingham Womens Hospital to receive intensive care.

Transferring Babies To Other Neonatal Units

If arrangements are made to transfer your baby to another neonatal unit, we contact them to ensure that they have all the information they need to continue your baby's care. This is a really positive time, as it means your baby is getting better. Other hospitals often have slightly different procedures, and whilst this may take time to adjust to, be reassured that your baby will continue to receive the best possible care.

When babies are transferred, they are transferred by ambulance using a specialist team; you will be kept informed of any transfer arrangements and have the opportunity to see your baby before they leave the unit.

Research

Survival rates of premature babies and the way we care for all babies have improved significantly over the years due to clinical research. The NHS strongly encourages research and all departments in this hospital (including NICU) are actively engaged in research studies which we hope will improve care for all patients. You may be approached by a member of the research team about participation in a study; they will provide you with all the information you need to make an informed decision about whether or not to be involved. If you are interested in research or have any questions please ask the nurse looking after your baby.

Facilities for parents

Parents' lounge

Here you can make a drink, heat up food, relax and talk to other parents. Tea and coffee are provided free of charge—please ask the ward clerks for extra supplies. A TV/DVD player, toaster, microwave and fridge are also provided for your use.

This facility is provided only for parents on the unit– please ensure the room is left tidy.

Eating and Drinking

The dining room is on the lower ground floor and is open at various times throughout the day for meals, drinks and snacks. Meal vouchers are available to reduce the cost of meals purchased in the dining room. The meal vouchers run from Monday to Monday and must be obtained weekly. If you are an inpatient and miss a meal because you are with your baby please ask for a voucher to entitle you to a free meal from the canteen. Please speak with the ward clerks.

There is a coffee shop on the ground floor in the main hospital, where you can also find several vending machines.

There is a cash machine opposite the coffee shop.

A short walk away at the Queen Elizabeth Hospital Birmingham there is a Costa Coffee and WHSmith. Please ask for more information about other services and facilities in the local area.

Parents' Accommodation

Rooms may be available for parents to stay in. Priority is given to parents whose baby is very ill, or parents who live a long distance away. Any parent under the age of 18 must be accompanied by an adult. The accommodation cannot be used by other family members or friends.

Please speak to the ward clerks or nurse in charge for further information.

Car parking

The hospital does not own the car parks; they are run by a private company. The closest car park is the multi–storey opposite the main entrance (CAR PARK D). This is pay on foot.

There is a discounted weekly car park ticket available to everyone who visits the hospital. Information about how to purchase a weekly ticket is displayed on the front of the pay machines. There are options for reducing parking costs for the parents of all babies admitted to the neonatal unit. Please speak to the ward clerk for more information.

Parent Information and support

There are information leaflets for parents available in the corridor just outside the parents lounge for you to read and take away. Information and short video clips can also be obtained from the Trust website: www.bwc.nhs.uk

A video book is available for those without a smart phone which has a variety of information including breastfeeding

and general support. Please ask your nurse if you wish to use these.

The "Tea at 2" Family Group meet in the parents lounge regularly, and posters advertising the next Family Group can be found around the NICU. During this group you can talk to other parents about their experiences, receive support and ask any questions you may have.

Regular parent information sessions (Advertised in the parents lounge) are available on the unit to provide support on a variety of subjects applicable to your babies.

Parent feedback

Opposite the parents' lounge, you will see a notice board called "Glad or Sad". This provides you with an opportunity to give us positive or negative feedback about your experience whilst in the NICU. Your opinions are very important to us and we will act upon feedback received in order to improve our services.

You will also be given a Friends and Family Survey to complete, you can fill this out at any point during your stay or as many times as you wish if your experience has changed. You can complete all or some of survey but we value all feedback we receive and use this to improve our services. Further copies are available in the parents room for you to complete.

Who's who on the NICU

There are a team of people caring for your baby on the NICU including doctors and nurses, who work different shifts to provide care 24 hours a day, 7 days a week.

Consultant Neonatologist

This is the senior doctor responsible for your baby's care. There are two Consultants present during the day, one responsible

for Intensive/High Dependency Care, the other for Special/ Transitional Care.

Each supervises a team of doctors who co-ordinate your baby's treatment. These are specialist registrars and junior doctors. ANNPs are specially trained experienced nurses who undertake the same roles as doctors.

Senior Sisters

Senior Sisters frequently take on the role of nurse in charge, acting as a manager, overseeing the care of all babies and supervising nursing staff. Senior Sisters may also be directly involved in the day-to-day care of your baby.

Junior Sisters, Neonatal Nurses and Nursery Nurses

The junior sisters, nurses and nursery nurses provide the majority of the day-to-day care for your baby. Junior sisters are experienced nurses who often take charge of the unit. If you have any questions about your baby's care, or if you need any help or advice, please speak with the nurse caring for your baby. If you require further assistance or information, please ask to speak with the nurse in charge.

Health Care Assistants

Health Care Assistants (HCA's) help the unit run smoothly. They will often provide comfort for your baby during a clinical procedure if you are not available or do not wish to be present.

You can also ask them about breast feeding, hand expressing and the use of a breast pump.

Other Neonatal staff

Ward Clerks

Based at the main reception near the entrance to the unit, our team of ward clerks are available to offer help and assistance during your baby's stay on the neonatal unit.

Breast Feeding Advisor

Our lactation consultant works on both NICU and Transitional Care. She can answer questions you may have and provide help with expressing your breast milk, breastfeeding and skin-to-skin contact.

Developmental Care Lead Nurse

Responsible for ensuring the developmental needs of your baby are met, the lead is supported by a team of nurses.

Discharge Planning Co-ordinator

Our lead nurse responsible for discharge planning will ensure everything is in place ready for your baby's discharge from the neonatal unit, easing the transition from hospital to home.

Physiotherapists

The NICU has two neurodevelopmental physiotherapists. They look at your baby's movements and posture, and will discuss and recommend the best way to handle and position your baby. The unit also has a respiratory physiotherapist, who you may meet if your baby is having difficulties with his/her breathing, and has lots of secretions (mucous– phlegm–sputum).

Speech and Language Therapist

A Speech and Language Therapist is employed across the SWMNODN Network. Your baby may be referred to her if nurses are concerned about his/her ability to suck and swallow.

Dietician

Trained to assess your baby's dietary needs, and ensure he or she receives the best possible nutrition.

Radiographer/Sonographer

Performs X-rays and ultrasound scans for your baby.

Opthalmologist

Will check your baby's eyes for signs of a condition called Retinopathy of Prematurity.

Audiologist

Will check your baby's hearing before discharge.

Pharmacist

Oversees the medication and intravenous fluids given to your baby.

Psychologist

The NICU has access to a clinical psychologist, who is able to offer support to parents and staff during difficult times. Please speak with the nurse caring for your baby if you feel you would benefit from additional support, or ask the ward clerks for an appointment as they hold her diary.

Chaplaincy

There is a team of multi-faith chaplains available to provide spiritual and pastoral care and counselling. They can be contacted in an emergency should you need them. If you wish for your own faith leader to visit you, this can be arranged by speaking with the nurse in charge.

Other people you might meet on the NICU

Specialist Staff

The Surgical Liaison Nurse visits the NICU Monday to Friday to check on the progress of babies who have had surgery.

Surgeon

A surgeon from Birmingham Children's Hospital visits the NICU Monday to Thursday to plan the care for babies who have had surgery.

Cardiologists

Doctors specialising in the care of children with a heart problem visit the NICU when needed. Other staff may be asked to come and see your baby if he or she needs specialised care or tests.

Volunteers

You may see volunteers on the NICU who are happy to chat,

join you for a cup of tea, or offer information about the hospital and surrounding area. Hospital volunteers wear a royal blue polo shirt. They can also help youcomplete the various feedback forms and ensure any issues are raised with the staff or NICU. Noahs Star Volunteers can provide sibling support. Information and times are in the parent lounge.



Day-to-day routine

The nurses and doctors change shifts at various points during the day.

The ward round starts at 9am on most days. This is where the doctors and ANNP's examine your baby and plan care and treatment. You are very welcome to join them during the ward round, as this is a good opportunity to ask any questions you may have. If you are unable to attend and wish to talk to a doctor, please ask the nurse



caring for your baby, who will organise an appointment for you. Please be patient, the speed of the ward round and opportunities to talk to medical staff will vary according to how poorly the babies are at the time.

Care is planned around your baby's clinical condition and your availability. We try to ensure your baby's cares can be carried out by you, but there are times when this may not be possible, for example, following X-rays or if your baby is unsettled. There may be times when you and your visitors are asked to leave the room for handover and during some procedures.

Rest time

We try to promote a quiet, restful environment throughout the whole day, but rest time is a special time where no routine care is undertaken in order to give your baby a period of undisturbed sleep. It will vary from day to day and room to room. This may be a good time to hold your baby skin-to-skin.

Equipment

You will see lots of equipment around your baby. The nurse caring for your baby will be happy to explain what each item is and why it is being used. The alarms act as a warning system for staff, and although these may seem frightening we will always react and respond to them as appropriate.

Feeding your baby

Initially your baby might receive all the nutrition and fluid they need intravenously (a small line going directly into a vein). This may be due to the fact they are premature or are unable to digest milk.

As soon as possible milk feeds will be introduced. This may be via a feeding tube, which is inserted into your baby's nose or mouth and goes directly into their stomach. This is often used when a baby is too premature, small or sick, or has not developed the coordinated suck and swallow reflex which allows them to feed from the breast or the bottle. If you would like to tube–feed your baby, the nurses can teach you how to do this.

Breastfeeding and Expressing Milk for your Baby

Mother's breast milk is best for your baby. Your body makes it especially for your baby; it is much kinder to the digestive system and provides protection from some infections. Even if you do not intend to breast feed, expressing your milk means that your baby will still get all of its benefits. This is even more important if your baby was born early, is small, or sick.

The nurse looking after your baby can offer advice and guidance on breast feeding and/or expressing your milk. We have separate information packs on expressing breast milk which give you all the information you will need from hand expressing and obtaining a breast pump to breastfeeding your

baby. There are also useful videos available on the Birmingham Women's App and the Video folders available in the expressing room—ask a member of staff for further help and support.

Caring for your baby on the NICU

As parents, you may feel helpless and think that you cannot do anything for your baby– but please be assured that this is not the case. There are many very important things that you can do for your baby. Nurses and doctors will help, encourage and support you to be involved as much as you feel able.

Over time, we hope that you will feel able to be involved with many aspects of your baby's care, such as;

- Routine care nappy changes, washing and dressing your baby.
- Kangaroo care often referred to as skin to skin care.
- Nasogastric tube feeding If your baby is too small or too poorly to take full feeds from the breast or bottle.
- Comforting your baby during uncomfortable or painful procedures, such as taking blood samples.

What you need to bring in for your baby

You will need to provide nappies, cotton wool, cotton buds and nappy sacks for your baby. If your baby has dry skin, we recommend you use sunflower oil. Baby oil, olive oil and perfumed products are not recommended due to the sensitivity of the babies' skin.

If you would like to bring in your own baby clothes and/ or blankets please ensure they are clearly labelled with your baby's name.

Photographs and videos

You are welcome to take as many photos of your baby as you like, but please try to limit the use of the flash as this will often startle your baby. You must not approach or photograph

any other babies on the unit. Also, if there is a possibility that a member of staff may appear in the photo you must ask their permission.

Emotional support for parents and families

Having a premature or sick baby is often frightening and overwhelming. You may experience a wide variety of feelings and emotions, all of which are completely normal at such a stressful time. Neonatal and maternity staff understand the difficulties faced by families, and will provide advice, support and information to help you, your family and your baby.

Staff can also arrange for you to speak to our Clinical Psychologist in confidence about any concerns or worries you have. She will listen to and support you through this difficult time.

Developmental care

Your baby has been admitted to the NICU because he or she has been born too early, too small, or sick. Whilst on the NICU your baby will continue to develop, but as all babies are different the rate of their development will vary. Your

baby's development will be affected by their gestation at birth, their weight and how well they are.

Developmental care is an integral part of your baby's nursing and medical care. It aims to reduce the stress experienced by your baby during his or her neonatal journey, helping to achieve the best possible



developmental outcome for your baby.

After birth your baby has to adjust quickly to a new environment. The NICU is often busy, noisy and bright, and this can affect babies' behaviour and development. By carefully watching your baby and their reactions to their environment, we can ensure that the care given by you, the nurses and the doctors is as developmentally appropriate as possible. In addition to providing care that focuses on your baby's individual needs, there are many other things which we can do that prevent stress for both you and your baby, and which will help your baby's development:

- Good quality sleep is essential for brain development.
 Therefore, we aim to protect your baby from light and noise. Incubator covers and cot canopies are used to offer protection from bright light; parents, families and staff are encouraged to talk quietly and alarms are silenced quickly.
- To further protect your baby's sleep, we carefully time care and procedures whenever possible to avoid waking your baby.
- Comfortable and supportive positioning.
- Skin to skin contact (often referred to as kangaroo care) and breast feeding.
- Positive parental touch.
- Minimising and treating pain and discomfort. This can be done in a variety of ways, such as gently holding and supporting your baby during an uncomfortable procedure, allowing them to suck on a pacifier or offering breast milk.

The nurse looking after your baby will be happy to offer guidance about your baby's development and how you can help. The developmental care team will also regularly review your baby's developmental needs. If you have any concerns regarding your baby, or you would like additional advice, please ask to speak with the lead nurse for developmental care or a member of the developmental care team.

There is lots of information available including DVDs produced by Bliss and Best Beginnings (portable DVD players are available to borrow) and a book written especially for parents.

Transitional Care

Transitional Care is a ward dedicated to the support of families where the baby has additional medical needs including preterm and small babies. Facilitating a step closer to going home, it is available to all families who have a baby on the NICU.

Transitional Care provides the opportunity to have dedicated time with your baby 24 hours a day, in a supportive environment. The team offers assistance with all aspects of your baby's care, including feeding and parent craft. This is sometimes known as "rooming in".

On rare occasions your baby may be briefly transferred to Transitional Care if a cot is needed on the NICU. However, this is only done in exceptional circumstances and not on a routine basis.

Nursing staff will be happy to answer any questions you may have regarding Transitional Care.

Going home

Staff will begin to prepare for you baby's discharge from the unit as soon as possible. Prior to discharge the NICU or Transitional Care, staff will ensure that you feel confident in caring for your baby. They will provide support advice and guidance on feeding your baby and all aspects of parent craft, including how to give any medicine your baby may need.

Before going home your baby will be fully breast or bottle fed, and gaining weight. Your baby MUST BE REGISTERED WITH A GP before you can take them home. Before you leave, the nurse will also check that we have the correct discharge address.

If you have any specific concerns regarding taking your baby home, please talk with the nurse looking after your baby.

Neonatal Outpatients Clinic

When your baby is discharged from the NICU or Transitional Care, you may receive a follow up appointment for the Outpatients Clinic. If an appointment is required, it should be given to you before you leave the hospital. It is very important that you bring your baby's red book to any of these appointments.

The Outpatients Clinic is located off the main corridor of the ground floor.

Birmingham Women's Hospital

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Website: www.bwc.nhs.uk

