



better together...

a family-centred care guide
for your premature baby



Irish
**Neonatal
Health
Alliance**



PARTICIPATING IN ROUNDS

You are your baby's primary caregiver, his voice and an equal partner in all decisions concerning your baby's care. Request to be present for the daily rounds and use the opportunity to ask questions, seek clarification, learn about your baby's progress and build a relationship with the medical team.

OBSERVING

Get to know your baby and learn how he communicates by watching his facial expressions, breathing, skin tone, gestures and taking note of his hand and feet movements.

COMFORT HOLDING

Many premature babies do not like being stroked or touched lightly as it can be too stressful for them and they can only tolerate one form of interaction at a time. 'Comfort Holding' is a form of positive touch and will help your baby to feel secure and relaxed. It is often used after a medical procedure.

- Cup your warm still hand around your baby's head and/or feet.
- Gently rest the other hand around your baby's shoulders or hold his arms across his chest.
- Refrain from using light stroking.
- Breathe slowly and deeply and keep your hands relaxed.
- Comfort hold your baby until he feels settled.
- To finish, slowly remove one hand and only remove the remaining hand if your baby continues to remain relaxed.

EXPRESS MILK

This is one of the special things that only a mother can do for her baby. Breast milk helps protect babies and do not be surprised if you are asked to express breast milk within a few hours of the birth.

Talk to the Lactation Consultant attached to the unit who will help you establish expressing. Starting early, expressing frequently and double-pumping helps to ensure that you can provide breast milk for as long as your baby requires it.

MOUTH CARE

Learn how to clean your baby's mouth when he is awake and comfortable. Breast milk or sterile water placed on a cotton bud swab can be used to clean your baby's lips and mouth with a gentle "press and scoop" action on the lips.

If your baby has a feeding tube in situ, a cotton bud can be used to wipe around the inside of the syringe where there will be some fatty deposits that can be used to moisturise your baby's lips.

NEURODEVELOPMENT PROTECTION

Ask for your baby to be placed in a nest in his incubator and request that developmental positioning aids be used to aid your baby's neurodevelopment.

Shade your baby's eyes if the light is bright in the unit. Ask for an incubator cover to be placed over your baby's incubator with a corner folded back so that the baby can be observed while keeping his face in the shade.

Request sight of the unit's *Pain Management Policy* and request that you be consulted



regarding pain relief methods for your baby. Keep noise to a minimum in the area around your baby's incubator.

SKIN-TO-SKIN CARE

Skin-to-skin care is when the baby is placed next to Mum or Dad's skin on the chest. The benefits include:

- Helps calm your baby
- Regulates temperature, breathing and heart rate
- Encourages deep sleep which improves weight gain
- Facilitates the parent/baby bonding process
- Stimulates milk production
- Conserves your baby's energy
- Provides pain relief
- Improves neuro-behavioural responses

TUBE FEEDING

If your baby is not strong enough to breastfeed he will require feeding through a tube. You can perform the tube feed either when your baby is in the incubator or outside.

- Sit comfortably in a chair that supports your back.
- Hold your baby in a supported position either next to your breast, in the crook of the arm or resting on a padded blanket on top of bended knees.
- The nurse will ensure that the feeding tube is in the correct position, and will prepare the feed in a syringe.
- Gently lift the syringe until the milk begins to flow. Lower the syringe if the flow is too fast.
- Watch your baby's behavior for signs of

stress or discomfort (wriggling) and take a break if he indicates that he requires a rest.

- Encourage your baby to suck on a soother during tube feeds (the soother can be dipped in breast milk).
- Continue to watch or hold your baby for 20 to 30 minutes after the feed to make sure he is comfortable.

NAPPY CHANGES

You can learn how to change your baby's nappy by observing the nursing team as they perform the daily cares for your baby.

The myriad of tubes and lines may appear daunting to you at first; however, it is advisable to learn the task of nappy changing, working backwards from the finishing off of the nappy change and settling you baby, step by step, until you feel confident to do the entire nappy change.

It can be helpful to do the nappy change with someone else present who can concentrate on ensuring that your baby is comfortable during the process. If he becomes active, uncomfortable or unstable during the nappy change, pause for a moment and rest your hands over his body until he quiets and relaxes again.

BATHING

The first bath is a very special occasion and is worth careful planning with the nursing team. Wrapped or swaddled bathing (where your baby is bathed wrapped in a sheet or muslin cloth whilst slowly lowered into the bath feet first) is often the most relaxed option for the baby. Ensure that you talk gently to your baby and observe his responses for any signs of a stress reaction.



Irish
**Neonatal
Health
Alliance**



Contact the Irish Neonatal Health Alliance

t +353 (0)85 192 0602

e info@inha.ie

w www.inha.ie

Kindly supported by AbbVie

The views expressed are the views of the INHA

Date of Preparation: October 2016 | IRESYN160809