

Welcome to the Neonatal Unit (NNU) Parents Booklet





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Introduction

Congratulations on the birth of your new baby. We understand this is a particularly stressful and difficult time for you and hope that you find the following information useful.

Neonatal Units (NNU)

Our neonatal unit is part of the East of England Neonatal Network and within this network there are 17 units and each Neonatal Unit is categorised into one of three levels:

- Level One: Special Care Neonatal Units
- Level Two: High Dependency Neonatal Units
- Level Three: Neonatal Intensive Care Units

Our unit is the level one unit for the Norfolk Region.

Within NNU you will find we provide many different types of specialised neonatal care, both for babies that are very small and premature (more than 30 weeks gestation) to term babies born with complications.

Sometimes babies within our unit may require a different level of care either they are born at JPUH less than 30 weeks gestation or require further specialised care such as surgical assessments. This will mean they need to be transferred to another unit within the region or the East of England Network, on rare occasions where cots are unavailable within the network it may mean a transfer out of area such as London.





To provide the specialised neonatal care we have a dedicated team of nursing staff consisting of a Neonatal Senior Sister, Neonatal Sisters, Neonatal Staff Nurses, Paediatric Staff Nurses, Nursery Nurses, Neonatal Clinical Educator and Neonatal Outreach Sister. We also have a dedicated Ward Clerk and Housekeeper. You can see pictures of our team on our photo board. Above each incubator/cot space there is a wipe board identifying the name of the nurse looking after your baby each shift and their named consultant.

Our medical team consists of Paediatric Consultants, Paediatric Registrars and Senior House Officers (either Paediatric or GP trainees) and Paediatric Nurse Practitioners.

We also have a multidisciplinary team made up of Hearing Screen Coordinators, Ophthalmologist, Dietician, Speech and Language Therapist, Cleft Team, Breastfeeding Support Workers and Safeguarding (Eden) Team. We also have student nurses and midwives on placement as part of their training and often have medical students working alongside the Doctors.

You will find that the nursing team work 12 hour shifts:

- Day = 0700-1930
- Night = 1900-0730

Our Neonatal Senior Sister works Monday to Friday

Our Neonatal Clinical Educator works a variety of 12 hour shifts both clinically and non-clinically throughout the week.

Our Neonatal Outreach Sister works Mon, Tues, Thurs and Fri.

Telephone Numbers

We are happy for you to contact us at any time to ask about your baby, please be aware we only give out information to parents, unless we have permission given by a parent to inform other family members.

Direct telephone Line (01493) 452202 or 452291

Our handover times are:

Nursing: 0700-0730 and 1900-1930

Medical: 0900-0930, 1700-1730 and 2100-2130





Visiting your baby

We have an open visiting policy for parents, siblings and grandparents, so please visit your baby whenever you wish during the day and night. We suggest that other visitors be restricted to late afternoon/early evening but this is at your own discretion.

No visitors will be allowed to visit without parents being present unless prior arrangements have been made and names have been given to nursing staff and documented in the baby's notes

Restrictions on visiting

- Children under sixteen years of age other than direct siblings to babies will not be permitted to visit.
- Between 1st November and 28th February no children aged two and under should visit due to the increased risk of winter infections.
- Only two adult visitors (including parents) at the baby's cot side at any time.
- The parents' room is for parents and siblings. If you have several visitors it may be more appropriate for them to use the café within main foyer.
- If you have friends or relatives working in the hospital that wish to visit, they may do so before their shift to minimise the risk of infection.

Quiet Time

We aim to give babies a period of complete rest between 1300 and 1400 each day. Whenever possible we avoid undertaking any routine procedures or interventions during these times. We ask that only parents/carers visit during this time.





Facilities for parents

A parent sitting room is available within the unit for you to sit and have a hot drink, watch television or just a quiet place to sit. Within the sitting room there are books and some toys for siblings but please do not leave children unsupervised in the room.



There are baby changing facilities within the visitors' toilet opposite the sitting room.



The unit kitchen is shared with parents where there are tea and coffee making facilities. You are welcome to use our fridge to store food/drinks but please ensure you name and date food/drink items. No hot drinks are permitted in the nurseries.

We have a parent bedroom with ensuite facilities located within ward 11 that is available for parents to be resident to establish breastfeeding or in preparation for home. This is our only parent bedroom so it is allocated by priority during busy times.



Mobile phones are permitted on the unit but please only use them in the corridors or sitting room. Phones should be in flight mode whilst in the nurseries.

We provide **free parking** for parents only, whilst your baby is with us on NNU. We can offer free parking to those that provide transport if you do not drive. We will validate your tokens on the unit at the nurses station.

Local Public Transport. There is a very good regular bus network operating throughout the Great Yarmouth borough (and Norfolk), many of which stop at the Hospital. Taxi's are also available for hire throughout the area. Please see hospital website: www.jpaget.nhs.uk for further details



Meal vouchers are also provided for use in our hospital canteen at concessionary prices. We also provide sandwiches and fruit for all mothers; please ask our housekeeper/ward clerk or the nurse caring for your baby.



Financial Support

Please see the bliss website for information:

<http://www.bliss.org.uk/financial-advice-for-families>

Breastfeeding

We are a UNICEF Baby Friendly Initiative Accredited Hospital, achieving our Level Three in January 2016. This means we actively promote breastfeeding and value its importance for preterm or ill babies. Every drop of breast milk is valuable to your baby even if you are not able to exclusively breastfeed your baby. We support all mothers; however they choose to feed their babies. We want you both to enjoy a responsive, positive and rewarding experience whether you breastfeed or not. All staff on NNU, delivery suite and postnatal ward is trained to UNICEF standards to support mothers in all aspects of expressing and breastfeeding.

On the unit we have a breastfeeding/expressing room and a milk kitchen to store your milk either in the fridge or freezer, but due to limited space we may ask you to store some milk at home. We can also provide a pump on a trolley, so that you can express next to your baby and have screens to ensure privacy if you wish. We offer hand expressing packs, expressing logs and encourage skin-to-skin kangaroo care daily.





Infection Prevention and Control

Everyone entering the unit to visit must wash their hands and also use the alcohol foam. Hands should be washed prior to preparing feeds, carrying out feeds and after nappy changes. Visitors must remove outdoor coat/jackets, please hang them up in parents sitting room.

Safety and Security

Doors to NNU are locked at all times. Please ring the doorbell to gain access to unit but please be aware we may not answer straight away if we are busy please wait patiently to be let in or out. You may be asked to identify yourself as a safety precaution. The trust is not responsible for loss of valuables and personal belongings left in the parents' room. Please keep these on you at all times.

Fire

In the event of a fire NNU staff will tell you what to do. Fire alarms are tested every Wednesday morning.

Zero Tolerance

JPUH is a Zero Tolerance NHS Trust. Aggression, threatening and racist behaviour will not be tolerated. If any staff feel threatened at any time, visitors will be asked to leave the department or hospital security will be contacted.

Confidentiality

Ward rounds are carried out daily at approximately 10 am by our medical team. You are welcome to stay for the ward round but please be aware you will be asked to wait in the sitting room whilst other babies are being discussed.

All information concerning your baby is strictly confidential and will only be given to you. A member of the nursing or medical team will be happy to update you regularly on your baby's care and progress. If you wish to talk to the consultant please ask the nursing team who will arrange a time for you.





Smoking

JPUH is a non-smoking site please only smoke within designated areas

Complaints and Suggestions

If you have any concerns surrounding your baby's care, nursing or other issues, please make these known to a member of staff immediately as often issues can be resolved. Alternatively you can speak to the unit's Senior Sister or the Head of Neonatal, Children and Young Person's Services or contact PALS the Trust's Patient and Advice liaison Service (01493 453240).

Please also complete our friends and family survey cards prior to discharge as we will use data provided and suggestions to improve our services.

Chaplaincy

The chaplaincy team will offer support to people of all faiths and will liaise with religious leaders appropriate to your faith tradition and will visit anyone when asked. There is a multi-faith chapel located on the ground floor. Baptisms and naming ceremonies can be performed on NNU. Please speak to the nursing team who will arrange this for you.

INTRAN

There are translator facilities available within the hospital if required.





Investigations, Procedures and Treatments Consent

If your baby requires any procedures, investigations or treatment, other than routine, you will be asked to give **verbal** or sometimes **written** consent.

Routine Investigations, Procedures and Treatments
Routine Observations of Temperature, Heart Rate, Respiratory Rate and Oxygen Saturations
Administration of Vitamin K Intramuscularly
Routine Blood Tests i.e. Blood Sugar and Blood Gas Monitoring
Infection Screen including Bloods and Lumbar Puncture
Insertion of Intravenous Cannula
Administration of Any Therapeutic Drugs
Administration of Fluids via a vein to feed baby
Insertion of Naso-Gastric/Oro-Gastric Tube
Newborn Blood Spot Screening
X-Rays, Cranial Ultrasound (CRUSS), Electrocardiogram (ECG) and Echocardiogram (ECHO)
Expressed Breast Milk Fortifier
Newborn Hearing Screen (Audiology)
Retinopathy of Prematurity Eye Examination
Phototherapy
Urine Sampling
Immunisations
Urgent Investigations, Procedures and Treatments
Insertion of an Endotracheal Tube and Ventilation
Cerebral Function Monitoring (CFM)
Commencement of Passive Cooling
Administration of Sedation Drugs
Insertion of Umbilical Lines
Insertion of Long Lines
Administration of Total Parenteral Nutrition
Chest Drain Insertion
Treatment with Blood Transfusion or Other Blood Products

In emergency situations consent is not sought as your baby's health is paramount. In normal circumstances consent must be given by the person with legal 'parental responsibility'. The medical or nursing team will explain everything to ensure that you fully understand what you are consenting to.

**Not every baby will require all the Investigations, Procedures and Treatments listed. Please ask the nursing or medical team for further information regarding Investigations, Procedures and Treatments that your baby is receiving or require.*





Further Information on Investigations, Procedures and Treatments

Vitamin K

Vitamin K is an essential supplement for babies because it helps to prevent bleeding which can occur, although very rarely, in the first weeks of life. The cause of this bleeding is an unpredictable blood clotting deficiency. The bleeding can be serious, lead to severe illness, handicap or even death. Babies who are at higher risk are those that are born prematurely, have had complicated deliveries, who are ill with liver disease or who suffer minor bleeds and bruising and babies whose mothers are taking anti-epileptic drugs. It is therefore recommended that all newborn babies are given Vitamin K. It is given as a single dose via an intramuscular injection in the thigh.

Jaundice

Jaundice is common in all newborn babies and especially in premature babies. It is caused by a build-up of a normal chemical in the blood called bilirubin. It is produced naturally when red blood cells are broken down by the liver. In some babies the liver is still developing and takes a while to function properly. This results in excess bilirubin in the body causing a yellow colour in the skin and the whites of the eyes. In most babies, Jaundice clears up without intervention, but if the bilirubin levels build up too high it can be serious; this is monitored closely with blood tests (SBR). If levels are too high this is then treated with phototherapy. The phototherapy light breaks down the excess bilirubin which then passes out of the baby via urine. Phototherapy involves the baby being placed under a blue light or on top of a light blanket (biliblanket). The baby is usually naked (except nappies) and eyeshades (Biliband) to protect the eyes from the light exposure.

CRUSS

CRUSS is an ultrasound scan of the brain. This test looks at the structure of the brain and the size of the inner fluid chambers (ventricles). It is used to detect any complications following a premature birth, to detect bleeding on the brain or damage of the brain tissue, to screen for congenital abnormalities and also to look for signs of infection. It is carried out at the cot side by a paediatrician or radiologist. **Please ask the medical team for further information regarding CRUSS.**





ECHO and ECG

ECHO is an ultrasound scan of the heart to help diagnose and monitor certain heart conditions by checking the structure of the heart and surrounding blood vessels, analysing how blood flows through them, and assessing the pumping chambers of the heart. It is performed at the cot side by a paediatrician **Please ask the medical team for further information regarding ECHO.**

ECG is a simple test to check the heart's rhythm and electrical activity. Sensors are attached to the skin and signals are recorded by a machine. It is performed at the cotside by a paediatrician or nurse. **Please ask the medical team for further information regarding ECG.**





Parental Involvement in Babies Care

The neonatal team are committed to family centred care, staff will support you to adapt to being a parent with a baby in NNU. We will work with you to help you develop confidence in providing cares and comfort for your baby.



Feeding

Bathing



Comfort Holding



Kangaroo Care





Discharge Planning

Ready for home

Before your baby is discharged home they need to be able to:

- Breathe without respiratory support *
- Maintain their own temperature in a cot
- Be breast or bottle feeding well
- Gaining sufficient weight

*Except nasal cannula oxygen

Preparing for Home

Going home can be an anxious time especially if your baby was premature or has been unwell. To ensure you are confident and prepared for going home, staff on the unit will provide support and guidance to ease this transition. We offer a detailed parental teaching plan and advice for post discharge such as safer sleeping. We would also recommend a resuscitation demonstration.

Rooming In

We offer parents the opportunity to stay overnight in our parents room on ward 11. This means you can stay overnight with your baby to build your confidence while the staff are still at hand to help if necessary.

Neonatal Outreach Service

We have a dedicated Neonatal Outreach Sister who will be involved in the discharge process and where necessary will provide home visits, especially to those babies born prematurely or require further nursing support.





Badger

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. It is a web based system which collects clinical information regarding your baby.

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

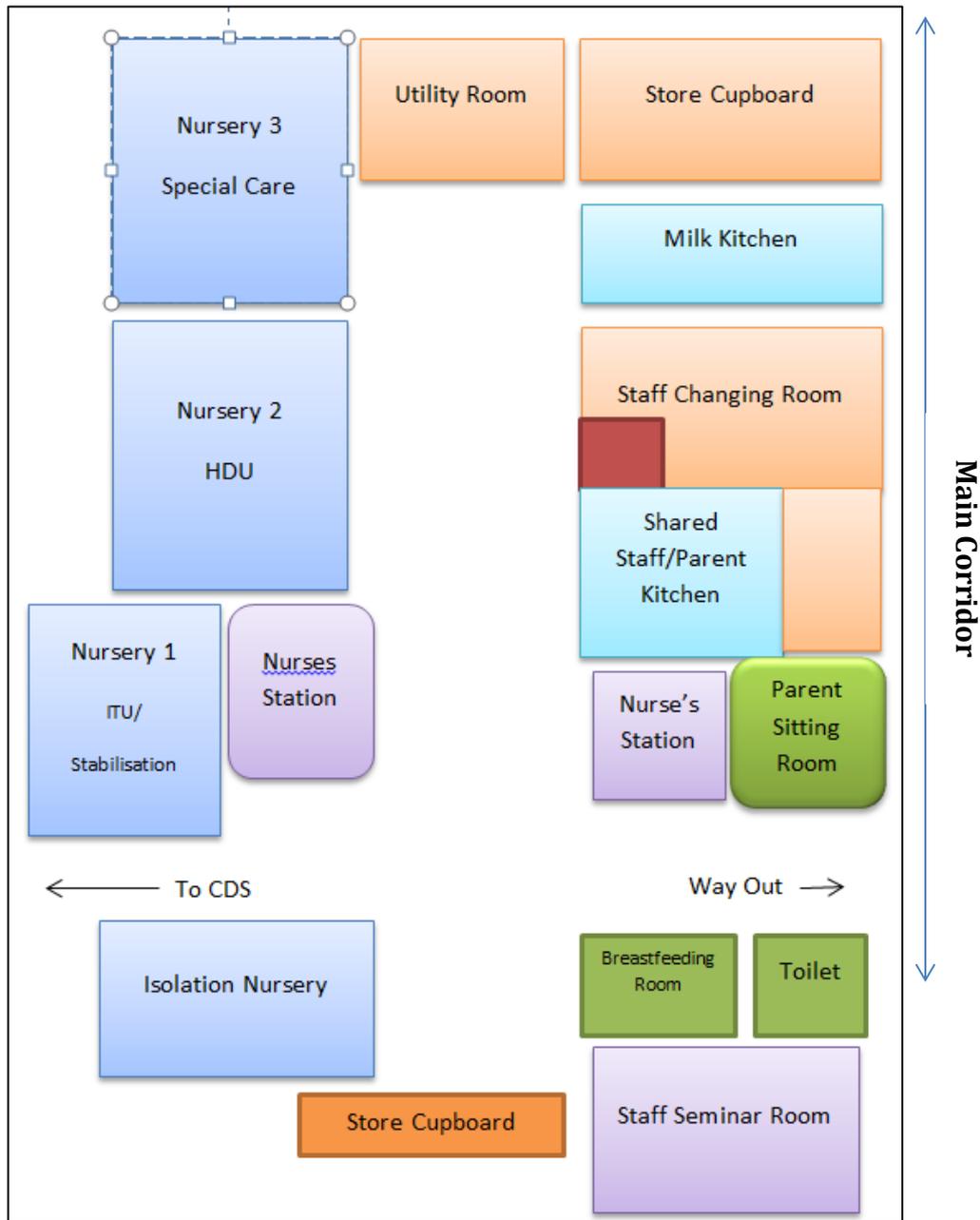
Clinical information necessary to those staff directly involved in your baby's day to day care will be identifiable data. Clinical data required for all other purposes will be anonymised.

If you require further information regarding the Badger System please ask a member of staff





Unit Floor Plan





Useful Telephone Numbers and Websites

Neonatal Unit

Direct telephone Line (01493) 452202 or 452291

James Paget University Hospital Foundation NHS Trust

www.ipaget.co.uk

Main Switchboard: 01493 452452

Facebook

<https://www.facebook.com/eoneonatalodn/>

BLISS

www.bliss.org.uk

Helpline: 0808 801 0322

UNICEF UK Baby Friendly Initiative

www.babyfriendly.org.uk

National Breastfeeding Helpline

0300 100 0212

Lullaby Trust

www.lullabytrust.org.uk



Author: Kelly Melton, Neonatal Clinical Educator
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