



SCOTLAND







## The Reality of Intensive Care





IN a NICU environment we focus on the biomedical model and the psychosocial model get overlooked.







## **Risk of Sensory Development from the Environment**

- High noise levels
- Lack of pleasant touch
- Lack of pleasant smells
- Intrusive light levels
- Lack of visual stimulation
- Lack of light/dark cycle
- Interrupted sleep







## **Risk of Sensory Development**



## **Toxic Stress**











Babies are capable of telling the trained eye if they are stressed or comfortable.



### "it's the responsibility of everyone to make sure " I am alright"





### HUG\_U











# Helping Us Grow (HUG): Innovative Family Integrated Care

## Neonatal Unit Royal Hospital for Children Glasgow

Twitter: @hugrhc Facebook: @nhsggcneonatalrhc









PATIENT'S NAME: YOUR BARY						
All Routes: As Require	ed Prescriptio	ons	_		_	-
Kangaroo Care		DATE	-	_	-	-
DOBE NOUTE NOCATON	A6'Y	1002	-		-	-
PRESCRIBER SIGN & MINIT MAXPREDUBIC A DOCTOR, AS REQU	pare.	DOSE GIVEN BY				
ADDITIONAL INSTRUCTIONS / COMMENTS / PHW	a state of the sta	GIVEN D1				
DRUG	<b>9</b> ***	DATE	it-it			
Encouragement	STOPP	TIME				
Unlimited Self - do	ubt	DOSE			1	
A DOCTOR ALL THE	Constraint and	GIVEN BY				
ODITIONAL INSTRUCTIONS / COMMENTS / PHAN	MACT .					
REASSURANCE	934	DATE				
OSE NOUTE INDICATION	STOP	TIME	-			
IRINEY AT BEDSIDE BURTION ESCHIERT SION & MINIT MAX.PREQUENCY	DATE:	DOSE				-
A DOCTOR AS REQUI		GIVEN BY				
ONTIONAL INSTRUCTIONS / COMMENTS / PHARM	BACY					
KINDNESS	Case.	DATE				
E ROUTE NOICATION	STOR	TIME				
CUP HUG DISTRES	5 IDATE	DOSE				
DOCTOR UNUMIT		GIVEN BY				
NORMLINETRUCTIONS / COMMENTS / PRAMM	ACY					















"Everyone will work together to ensure that parents are empowered to be primary caregivers with the confidence to care for their baby during their stay in the neonatal unit, through their transition to home and beyond."













Thursda Norses - Janie + Wendy Dear Janie & Wendy, Thank you for being my roice for these past days. Hy communication with mommy doddy flrough you has been very precious to them .. And also , thank you for taking such a good care of me. Love,







#### Medics use video to help parents of neonatal babies



#### www.vcreate.tv







#### FAMILY AWARENESS SESSIONS

#### **MARCH 2018**

#### NICU Level 1 Seminar Room

Next to Waiting Area 2-

a 2-3pm

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
5 <sup>TH</sup> "Getting Ready for Home"	6 <sup>th</sup> "Bathing, Sterilising and Making up Feeds"	<b>7</b> <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup> OUR FAMILY'S TEA AND COFFEE AFTERNOON	10 <sup>th</sup> CPR	11 <sup>th</sup>
12 <sup>th</sup>	13 <sup>th</sup> "Level 2 Tour – Meet on Level 1 reception"	14 <sup>th</sup>	15 <sup>th</sup> "Comforting your baby"	16 <sup>th</sup> OUR FAMILY'S TEA AND COFFEE AFTERNOON	17 <sup>th</sup> <b>Bathing, Sterilising</b> and Making up Feeds"	18 <sup>th</sup>
19 <sup>th</sup>	20 <sup>th</sup>	21 <sup>st</sup>	22 <sup>nd</sup>	23 <sup>rd</sup> OUR FAMILY'S TEA AND COFFEE AFTERNOON	24 <sup>th</sup>	25 <sup>th</sup>
26 <sup>th</sup>	27 <sup>th</sup> "Level 2 Tour – Meet on Level 1 reception"	28 <sup>th</sup> "Helping Your Baby to Develop while in NICU"	29 <sup>th</sup> Glasgow Children's Hospital Charity	30 <sup>th</sup> OUR FAMILY'S TEA AND COFFEE AFTERNOON	31 <sup>st</sup>	1 <sup>st</sup>

#### ALL PARENTS & FAMILY MEMBERS WELCOME – We would love to see you all!





*"I love the sessions but I just lose track of time and forget* 











"A great opportunity to learn and socialise"

"A very emotional session ....."

"It's nice to meet other young mums, to bond and perhaps develop friendships"































enugine











			GATHON
2	Si	MAY 1 <sup>ST</sup>	
3	1	MAY 2 <sup>ND</sup>	(3) (3) (3) (3) (5) (4)
3		MAY 3 <sup>RD</sup>	
9	i	MAY 4TH	(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)
2	1	<b>MAY 5</b> <sup>TH</sup>	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
2	I.	MAY 6TH	I I I I I I I I I I I I I I I I I I I
9		MAY 7 <sup>TH</sup>	
Š	i	MAY 8TH	3 & & & & & & & & & & & & & & & & & & &
2	1	MAY 9TH	3 8 8 8 8 8 8 9 8 9 9 9 9 9 9 8 8 8 8 8
9	1	<b>MAY 10<sup>TH</sup></b>	3 \$ 3 3 3 3 5 5 5 5 7
Å		<b>MAY 11<sup>TH</sup></b>	
2		<b>MAY 12<sup>TH</sup></b>	
2	1	<b>MAY 13<sup>TH</sup></b>	
8		<b>MAY 14</b> <sup>TH</sup>	
0		<b>MAY 15<sup>TH</sup></b>	
1.24			









	2015 (Pre-HUG)	2017-2018
Are you able to be with your baby as much as you want?	56 %	100%
Were you made to feel at home in the Neonatal Unit?	83 %	94%
Do you feel involved in your baby's care as much as you would like to be?	76 %	89 %

#### Unicef Baby Friendly Audit











Chief Pledical Officer's Annual Report 2016-17 PERCISING REALISTIC MEDICINE

NHS SCOTLAND

#### PRACTISING REALISTIC MEDICINE



HELPING US GROW GROUP (HUGG), ROYAL HOSPITAL FOR CHILDREN, GLASGOW.

The Helping Us Grow Group (HUGG) is a unique inclusive collaboration of families and staff in the neonatal unit. Our aim is to support parents to be primary caregivers for their baby, no matter how sick in partnership with clinical staff. This is our model of Family Integrated Care (FIC). Two key encouraging peer-to-peer support.

Inspired by other leading FIC centres, and motivated by feedback from families in our unit, we organised a programme of innovative daily Family Awareness Sessions (Figure 4). These are held most days from 2-3om for all families in the neonatal unit and aim to give parents skills and knowledge to care for their baby, as well as an important to meet and support each other. Topics are requested by parents and sessions are led by staff of all backgrounds including send him a video of his baby, Working with an staff nurses, nursery nurses, neonatal doctors, pharmacists, dieticians and psychologists. "Veteran" parents, both mothers and fathers, also return to lead sessions and share their experiences.

#### Figure 4. HUGG Formity Awareness Session



Family feedback is extremely positive. Parents tell us they feel more confident, have improved understanding of their baby's condition and care, and are forming strong and long-lasting friendships.

These sessions are organised by a fantastic group. of staff nurses, working above and beyond their normal clinical duties. HUGG has empowered them to lead change and improve care for our patients.

In order to foster collaboration we also developed a simple but effective innovation: shared whiteboards at each cot-space. Families are able to leave messages for staff, including when they can be present to care, which care they want to be involved in and their baby's likes and dislikes. elements of our work are education for families and Staft especially those on nightshift, write updates and messages of support, including translations for non-english speaking families. Parents are delighted to know that staff are listening. These simple white-boards have created a new relationship with staff, as one parent wrote "thank you for being a voice for my baby".

> Another innovation was inspired by a father in the neonatal unit. He told us that he used video messaging for his clients, and asked if we could industry partner, IT and governance teams we developed and plicted a secure video-messaging system in the neonatal unit in March 2017. Staff create short, friendly video updates for parents when they cannot be with their baby (Figure S).

Figure 5. HUGG Video Messaging



The positive impact of this innovation has far exceeded all of our expectations. Parents tell us they feel reassured, less anxious and sleep better. They feel a deeper trust and connection to staff who took the time to make and send the video message of their baby. With the support of grateful families we are now spreading our system to over 60 neonatal units throughout the UK and to other clinical areas in our organisation.

www.vcreate.tv/secure-video-messaging









## Thank you

Twitter: @hugrhcFacebook: @nhsggcneonatalrhc

Family Integrated Care: changing the culture in the neonatal unit. Archives of Disease in Childhood 2017.

www.vcreate.tv

https://player.vcreate.tv/royalhospitalforchildren/kmc2018

https://player.vcreate.tv/royalhospitalforchildren/kmc2017

https://player.vcreate.tv/royalhospitalforchildren/nnuxmas20 16











## **Role of the Parent**



## The Book-Bug "Look at me, I am talking to you !" Behaviour is my language








# Bringing Bookbug into the neonatal unit







fppt.com

## Singing, talking, rhyming, bonding







fppt.com

### **Building relationships**







fppt.com







#### The Impact of prematurity on social life and Education







#### The Preterm Phenotype: Implications for Learning

- Cognitive Profile
- Self-regulation: Attention
- Behaviour
- Emotions and Social Relationships
- Visual spatial skills, processing speed and working memory







#### The Human Brain Under Stress: key brain regions





Atrophy



Amygdala Emotion. fear, anxiety

Hypertrophy.

later atrophy











# Early Developmental intervention programs provided post hospital discharge to prevent motor and cognitive impairment in preterm infants

Spittle et al Cochrane Library developmental intervention 2015



Evidence suggests that early developmental interventions improve cognitive outcomes up to preschool age.





Parent behaviour moderate the relationship between neonatal pain and internalizing behaviors at 18 months CA in VP Vvinall et al Pain 154 (2013 1831-1839)

Positive parent interaction and lower stress appears to ameliorate negative effects of neonatal pain on stresssensitive behaviors in the VP (<32/40)







Maternal-Preterm Skin to Skin Contact Enhances Child Physiologic Organisation and Cognitive Control Across the First 10 Years of Life

> Ruth Feldman et al BIOL Psychiatry 2014;75:56-64

 KC improved both child physiologic organisation and maternal behaviour







Cerebral motor function in VP at birth adolescents: a brain stimulation exploration of kangaroo mother care effect

> Schneider et al Acta Paediatrica 2012,101 1045-1053

- KMC adolescents presented faster conduction times
- KMC positively influenced the premature brain networks and synaptic efficacy up to adolescents.







# WHAT? CAN WE DO





## **Practical points**

How to promote development through prevention

- Infancy
- Toddler
- Pre-school
- School readiness









#### **Thank you for Listening**

