Happy New Year!

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Keeping up..............................

The Journal of Perinatology supplement (35: 2015) has useful review articles about implementation of Family Centred Developmental Care (FCDC). These papers are open access.

Hall SL, Cross J et al, provide a concise but comprehensive overview of the impact that working in neonatal intensive care can have on our lives and makes recommendations for staff education. Recommendations for enhancing psychosocial support of NICU parents through staff education and support:S29-36

Craig JW, Glick C et al, briefly outline key issues for quality improvement initiatives in FCDC under the headings a) parent support b) staff support c) NICU policies. Recommendations for involving the family in developmental care of the NICU baby.S5-8.

Hall SL, Cross J et al, review the evidence for peer to peer support, describe different ways that this may be set up and makes recommendations for setting up and operating programmes, and training volunteers. Recommendations for peer-to-peer support for NICU parents. JS9-S13

Mothers and Fathers

Mothers’ perceptions of family centred care in neonatal intensive care units. We should be aware how sensitive parents are to power struggles, difficult relationships within the team, and inconsistencies in care. Sadly mothers may feel the need to adopt deferential behaviour in their relationships with health care professionals, and maintain a state of constant anxious surveillance, in order to protect their babies. Finlayson and colleagues introduce these thought provoking issues in a study with 12 mothers across 3 units in the UK, Finlayson K, et al (2015), Sex Reprod Health 5(3):119-24


‘This little piranha’: a qualitative analysis of the language used by health professionals and mothers to describe infant behaviour during breastfeeding. This study records some of the negative attitudes and interpretations that affect mother’s perceptions of their baby and looks at what makes for more positive communication. Burns E, Fenwick J et al Mat Child Nutrition (2016) 12(1): 111-124

Kangaroo Mother Care in Uppsala on YouTube.
The neonatal unit in Uppsala University Hospital is well known for its pioneering implementation of Kangaroo Mother Care in a high tech neonatal unit. Watch Professor Uwe Ewald describe their journey on www.youtube.com/watch?v=VVwbVJpfqAc
Family Integrated Care (FiCare) *

This low cost approach to upscaling parental involvement in infant care on the neonatal unit originated in Toronto and has attracted a lot of attention.

St. James’s Hospital in Leeds is the first unit in the UK to pilot this programme. Liz McKechnie, Consultant Neonatologists reports “We were well supported by the Toronto FiCare team, who shared many of their resources. We adapted these to our setting and having educated our staff began FiCare in our Special Care and High Dependency units at in May 2015. We have so far been successful in our primary aim of improving breast feeding rates at discharge. Family’s feedback is very positive about the programme. Change is always a challenge and FiC does mean that health professionals have to adapt their practise. This has required a lot of motivation, persuasion and chocolate from the converted to those more set in their ways; but we are getting there. We are always happy to talk and share our experience with other services interested in setting up a FiCare project. Having spent a year developing and rolling out the project we have come across the pitfalls along the way and may be able to smooth the road for others”.

Regardless of whether or not parents can sign up to be available to their baby for 6 to 8 hours a day it is important that all families are included to avoid a two tier system with those who are less able to be together being doubly disadvantaged. This model emphasises parent education to achieve competence in as many aspects of the infant’s care as is safely possible. Ideally this would be combined with an approach that encourages sensitisation to the infant’s behavioural communication, with staff skilled in behavioural observation and active listening.


The results of a multi-centre trial are expected in 2016.

### 2016 Dates for your diary

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<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Event Description</th>
<th>Contact Details</th>
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<tbody>
<tr>
<td>February 3-4</td>
<td>Friends House, London</td>
<td>Foundation Toolkit for Family Centred Developmental Care</td>
<td><a href="mailto:training@bliss.org.uk">training@bliss.org.uk</a>. Course fee £250.00</td>
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<td>March 11</td>
<td>Introduction in London</td>
<td>Practical Skills for Family Centred Developmental Care. Contact: <a href="mailto:training@bliss.org.uk">training@bliss.org.uk</a></td>
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<td>April 25-26</td>
<td>Sheffield</td>
<td>Foundation Toolkit for Family Centred Developmental Care Contact: <a href="mailto:Jennie.schooling@sth.nhs.uk">Jennie.schooling@sth.nhs.uk</a></td>
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<td>April 18</td>
<td>Stockholm</td>
<td>Ultra-early Intervention. Details to be confirmed</td>
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<td>May 24-25</td>
<td>Park Farm Hotel, Norwich</td>
<td>Foundation Toolkit for Family Centred Developmental Care Contact: <a href="mailto:training@bliss.org.uk">training@bliss.org.uk</a></td>
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<td>August 23-25</td>
<td>Dalarna, Sweden</td>
<td>Nutrition and Nurture In Infancy and Childhood: Bio-Cultural Perspectives. Contact: Renée Flacking: <a href="mailto:rfl@du.se">rfl@du.se</a>.</td>
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