# **Patient Advice and Liaison Service (PALS)**

Please contact us if you need general information or advice about Trust services: www.bartshealth.nhs.uk/pals

# Large print and other languages

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request. For more information, speak to your clinical team.

এই তথ্যগুলো সহজে পড়া যায় অথবা বৃহৎ প্রিল্টের মত বিকল্প ফরম্যাটে পাওয়া যাবে, এবং অনুরোধে অন্য ভাষায়ও পাওয়া যেতে পারে। আরো তথ্যের জন্য আপনার ক্লিনিক্যাল টিমের সাথে কথা বলুন।

Na żądanie te informacje mogą zostać udostępnione w innych formatach, takich jak zapis większą czcionką lub łatwą do czytania, a także w innych językach. Aby uzyskać więcej informacji, porozmawiaj ze swoim zespołem specjalistów.

Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

ریم نوٹر بہک اسی ج ، ری ہی کے ساکس اج یک بای تسد ریم سٹی مراف لدابت م تامول عم می شن رہ اور درخواست پر متبادل زبانوں میں بھی دستیاب ہو سکتی ہیں۔ مزید معلومات کے لیے، اپنی کلینکل ٹیم سے بات کریں!۔

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#### Patient information

# Welcome to the Neonatal Intensive Care Unit, Ward 8D



#### **Welcome to the Neonatal Unit**

Congratulations on the birth of your baby and welcome to the Neonatal Intensive Care Unit (NICU) at the Royal London Hospital. This booklet has been prepared to provide information that we hope you will find useful, whilst your baby is in our care.

The staff at the Royal London NICU are dedicated to delivering family-centred, high-quality care to the babies and families on the unit. We are a level 3 tertiary unit and deal with the most premature babies, as early as 23 weeks.

Having your baby admitted to a NICU unit can be a worrying and frightening time. Our exceptional team of doctors and nurses will be able to help you manage this experience. The team will try and involve you in your baby's care as much as possible, helping you every step of the way with your journey to become your baby's main carer.

Please do not hesitate to speak to a member of your neonatal care team if you have any questions during your time on the unit.

In this admission booklet, you will find relevant information explaining the process from Admission to Discharge. We recommend that you read this information as it will give more details on the type of care given to babies in hospital. It also has a lot of useful advice on support services and other help.

#### Our contact details

Main Reception		020 359 40524/5
Special Care Room	Cot 01 to 10	020 359 40536
Neonatal Intensive Care Room 1	Cot 11 to 24	020 359 40531/2
Neonatal Intensive Care Room 2	Cot 25 to 36	020 359 40528/9
Isolation Room	Cot 37 to 38	020 359 40535
High Dependency Room	Cot 39 to 46	020 359 40536
Medical Secretary		020 359 40541

#### **Further Information**



Barts Charity – www.bartscharity.org.uk Text to donate 70070



Bliss- Charity for premature babies www.bliss.org.uk



**Ickle Pickles**- Charity for supporting units <a href="www.icklepickles.org">www.icklepickles.org</a> rachael@icklepickles.org twitter@icklepickles



**Noah's Big Charity-** Contributes to buying much needed equipment for the ward to enhance patient care e.g. Ultrasound scanner. <a href="mailto:hello@noahsbigcharity.com">hello@noahsbigcharity.com</a> Twitter @NoahsBigCharity



**Sick Children's Trust** – Facilitating much needed accommodation for parents whose children are very sick. www.sickchildrenstrust.org

# Feeding and vitamins

You may go home with some extra vitamins and minerals or special formula milk to give your baby. We advise you to continue until your Doctor at the hospital tells you to stop, usually when your baby is eating a good variety of foods, around one year of age. Your GP will be able to prescribe further supplies once you run out.

#### **Immunisations**

Like all babies, preterm babies should start immunisations 8 weeks after birth; there is no need to delay. If your baby stayed in the Neonatal Unit for more than 2 months, he/she will have had some injections and the details will be written into the Red Book. Take your baby to the child health clinic for the other immunisations.

## What Do I do if baby is unwell?

You can ask your GP or Health Visitor if you need advice or if your baby is unwell. The discharge summary may be helpful when you need to do this. This is given to parents before discharge and is always sent to your GP as well. In the first week at home, you can also telephone the nursing staff on the Neonatal Unit.

If you are concerned that your baby is unwell out of hours and you cannot obtain a General Practitioner visit, please go to the Emergency Department nearest to your place of residence.

# **Follow up Appointments**

Your baby may have some appointments after you go home. These appointments are your opportunity to share any concerns you may have about your baby with the paediatrician. It is important for you and your baby that you attend these appointments, these might include:

- Neonatal Follow up Clinic
- Respiratory Clinic
- Neurodevelopment Clinic
- Hearing Clinic
- Ophthalmology Clinic

# **On Admission**

Whether you have delivered your baby on the labour ward or they have been transferred from another hospital, upon admission your baby will be placed in a cot or an incubator depending on your baby's needs. Some babies need help with breathing therefore we use several different kinds of ventilation support.

Your baby's temperature, breathing, heart rate and other observations will be recorded from small leads placed on to baby's chest and abdomen. An intravenous (IV) cannula may be inserted into one or more of the baby's veins to administer fluids and medications. Other lines may also be inserted into the baby's veins, umbilical cord or as a last resort the scalp.

Once your baby has been admitted and stabilised on the unit, medical staff will speak to you and update you in regard to baby's condition and care. Please be aware that you may be asked to wait in the parent room while your baby is being admitted.

### What can parent's and carers do when a baby is in NICU?

One of the most difficult experiences of having a sick baby in hospital is one of a sense of helpless and having to rely on others to care for your baby. However, even if a baby is very seriously ill there are many things parents and families can do.

We recommend some of the following things:

- Comply with Infection prevention control by removing all coats, jackets, watches, bags and frequently washing your hands. Your nurse will show you how to wash your hands.
- Talk and or read to your baby by the incubator or cot.
- Hold or touch your baby if appropriate.
- Cuddle and feed your baby when they are well. You can ask the nurses for help and support.
- Bring baby's own clothes to dress them when able.
- Please bring baby's own blankets, nappies and if bottle feedingbottles and teats. A small toy is allowed too.
- Involve yourself in baby's care even if they are in an incubator, e.g. nappy changes and all cares.

# **Visiting policy**

Entrance to the unit is via the secured door on the main corridor. Please ring the buzzer and wait to gain entry. You will be asked to state your name and baby's name. Please do not allow anyone to follow you onto the ward or let anyone else in as you leave.

There is open visiting for parents, please note you may be asked to leave during handover, emergencies, procedures, etc.

Only Grandparents are permitted to visit between 15:00 and 19:00.

Other Siblings for the baby (Brothers and Sisters) are permitted to visit Sundays between 15:00 and 19:00, if they are free from colds and other viruses. Children must be supervised at all times and not left by themselves in any area of the unit during visiting times.

Only 2 visitors at the cot side at any time and one must be a parent

No other relatives or friends are allowed to visit due to strict infection prevention control. However, based on needs flexibility will be considered.

Only parents/ guardians will be given information regarding baby's condition.

Nursing handover is between 07:45 – 08:15 and 19:45 – 20:15.

You may be asked to leave the nursery if emergency situations arise or during certain procedures e.g. X-ray, and other procedures and/or admissions.

Quiet time for babies on the unit is from 1-3pm. This is where we try not to disturb the babies and avoid doing medical procedures unless they are clinically essential. Parents can still visit at this time.

Please do not use mobile phones in the ward area. You may however use your phone in the parent's room and front waiting area. No hot food or drinks are allowed on the ward. Facilities are available in the Parents room.

Visitors are not permitted in the Parents Room, this room is for Parents use only. Please do not bring children into this

# Travelling to the hospital

There are very limited parking facilities available in the area near the hospital. We would therefore recommend avoiding travelling by car to the hospital, unless you are preparing to take your baby home.

The nearest underground station is Whitechapel station, located across the road to the hospital. This is via the District and Hammersmith & City lines.

The nearest over ground stations are Liverpool Street and Fenchurch Street which are approximately 20-25 minute walk from the hospital. Shadwell DLR is a 10 minute walk to the hospital.

There are many frequent buses that stop outside the hospital and run past and to various underground and over ground stations on route. If you are arriving or leaving the hospital by car we recommend using the Stepney Way entrance which is at the south of the central tower of the hospital.

# Taking your baby home

As you baby's condition continues to progress, discharge planning will begin. You will be involved with the whole process and should ask any questions you have about the discharge process.

Upon discharge you will be given a red book and a discharge summary, with all the information relating to your baby's stay at the Royal London

Red Book – This will be completed with a NIPE check, hearing screen etc. Please remember to bring it with you if and when you have any future hospital appointments.

# **Growth and development**

In the first two years, we make an adjustment for growth and development, taking your baby's actual date of birth and expected date into account. When your friend and relatives ask, you may find it simpler to give the baby's age from when he/she should have been born; this age is known as the (corrected age). Your preterm baby may appear to 'lag behind' term babies born at the same time, while in reality, the baby is making excellent progress for his/her 'corrected age'. Weaning to solids and immunisations are given at actual age. Development is calculated on corrected age.

Monday	12:00 Midday prayers
Tuesday	12:00 Midday prayers
	12:30 Holy Eucharist (Free Church or Anglican)
Wednesday	12:00 Midday prayers
Thursday	12:00 Midday prayers
	12:30 Roman Catholic Mass
Friday	12:00 Roman Catholic Mass
	12:40Female Muslim Prayers
Saturday	17:00 Roman Catholic Mass (Sunday Vigil)

# **Jewish Community Room**

Jewish patients, their families, friends and staff can access this room with a pin number available from the Chaplaincy office, Stepney Way Entrance security staff or ask one of the ward staff to obtain the number for you. Kosher food is available.

# **Hospital accommodation**

#### The Sick Children's Trust

Stevenson House is sponsored by the charity The Sick Children's Trust. This is to provide short to long term accommodation for families who do not live in Tower Hamlets or within a reasonable travelling distance. Rooms are allocated on the basis of availability. This is located within a short walk of the hospital. If you think you may need a room please ask your nursing team to make a referral.

### **Rooming in rooms**

There are rooming in rooms available on the Ward. Their primary purpose is to offer parents/carers the opportunity to stay to gain confidence in caring for their baby before going home, but with nursing care nearby to provide reassurance and support. They are also available to establish breast feeding. These rooms are set slightly off the ward but close enough to the main corridor should you need clinical assistance. Your nursing team will be able to provide more information, should you require it.

# room and ask your visitors to wait in the main reception area only.

If you have any questions regarding the visiting times and policy of the unit, please speak to your neonatal care team who can advise you further.

#### Protection from infections

To help us protect your baby from infection, please ensure that you wash your hands in the designated areas prior to coming onto the unit. There is a sink available when you arrive onto the ward in the Parents Room. You should also use the antibacterial gel, which will be displayed throughout the unit. If you require more information please speak to your nursing team

#### Who are the staff in the Neonatal Unit

There are many members of staff on the Neonatal Unit. As well as Doctors and Nurses, we also have Physiotherapists, Radiographers, Pharmacists, Nursery Nurses, Psychotherapist, Ward Administrators and many, many others. We work together as a Multi-Disciplinary Team (MDT). In total, there are over 200 members of staff needed to give specialist care to babies on the unit.

Some members of staff are easy to identify because of their clothing. Consultants wear burgundy scrubs, Doctors wear blue scrubs, the senior nurse wears purple, senior sisters wear Navy blue scrubs/uniform, junior sisters wear Royal Blue scrubs and Staff nurses wear light blue scrubs, nursery nurses wear green scrubs and specialised cleaning team wear teal scrubs.

However, many members of staff will also be seen in civilian clothing. All members of staff will carry a trust identification card, so if you are unsure who they are, please ask.

# **Categories of care**

### Intensive care

This refers to babies who require invasive ventilation and/or maybe considered to be extremely premature (born under 1000g or under 28/40 gestation at birth). This may also include babies born at term who are very sick or require surgery.

# **High Dependency**

This refers to babies who require a less invasive form of ventilation such as CPAP (Continuous Positive Airway Pressure). Babies may also require a form of intravenous nutrition known as TPN (Total Parental Nutrition).

# **Special Care**

This category of care refers to babies who are preterm, small and receiving small amounts of oxygen who may also require support with establishing their feeding. They may also require treatment for conditions such as jaundice or antibiotics for the treatment of infection.

# Repatriation of care

As your baby's condition improves, the level of medical care needed will decrease. It's at this stage that the team will look to transfer your baby back to your local hospital. If the Royal London is your local hospital, then your baby may be moved to a local level 2 unit namely Whipps Cross or Newham. This will allow the Royal London hospital to care for the sickest and smallest of babies and to continue appropriate level of care for your baby in not such an intense environment.

When the need arises this will be explained to you, please remember it is usual practice to send babies back to your local level 2 or 3 hospital so follow up care can be arranged locally.

Transfer will be usually carried out by The Neonatal Transfer Service (NTS), or Acute Neonatal Transfer Service (ANTS, Essex area.)

# Support for you and your family

Having a baby on NICU is a particularly stressful experience. As well as support from family and friends there are also many other support services available. Further information can be found around the ward

area and in the Parents Room.

**Parents Support Group** every 2<sup>nd</sup> Thursday led by nurses, psychotherapist and other speakers. This is usually held 11:00 – 12:00.

**Bliss** (The premature and Sick Children's charity) produce a wide variety of booklets and information leaflets. Some of these are available on the ward however they can also be obtained from the charity from the website at bliss.org.uk

Bliss Buddy – We usually have volunteers from BLISS that if you have any questions we recommend you write these down and ask her when she visits the ward or on coffee mornings.

**Psychological and emotional support** A Specialist Support Counsellor is available on the ward for parents and carers to talk to on an individual basis or as a family. For more information, please discuss this with your nursing team.

# **Religious and Faith Support**

Chaplains are available for everybody, who can be contacted as below or by asking a member of staff to contact us on your behalf.

# The Multi-Faith Chaplaincy Centre

Located on the second floor (Lift Core 5), the chaplaincy centre can be accessed 24hours a day. All patients and visitors are welcome. You will have to re-enter the 8<sup>th</sup> floor via Lift Core 9.

# The Sanctuary

The Sanctuary is open for those who wish to pray or seek a quiet place. Seasonal variations to these services are advertised within the Sanctuary.

# **Muslim Prayer Room**

There are Muslim prayer rooms with separate prayer and ablution facilities for men and women. Worship times are advertised weekly.

Direct telephone: 020 359 42070 E-mail: chaplains@bartshealth.nhs.uk