

## Conclusion

Our small sample (N=87, average=15 patients/audit & NIDCAP N=7, average - 3.5 patients/audit) and non-statistically significant results are explained by the size of the NICU and we recently followed patients for the NIDCAP advanced practicum for a few months. Despite this small sample, we were able to demonstrate that this project not only improved SSC duration and frequency in our NICU but also that NIDCAP Professional follow-up almost doubled the duration of SSC sessions.

## Relevance to NIDCAP

These findings are relevant to NIDCAP, as they support previous similar findings in France.<sup>6</sup> Since parent-infant attachment is at the heart of NIDCAP, the importance of SSC as an essential strategy to foster behavioral cue understanding, co-regulation, and the principle of zero-separation cannot be understated. This study demonstrates that we can maximize this strategy with NIDCAP advanced practicum follow-up.

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# "This is the best ward round I have ever been a part of": Implementing Developmental Care Ward Rounds in a Tertiary Neonatal Unit in the UK.

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## Aims

The neonatal unit at University College London Hospital is the only NIDCAP Training Centre in the United Kingdom. We are committed to improving the collaboration between healthcare professionals and families. In 2023, we identified an opportunity for our multi-disciplinary team to work together to enhance this relationship by launching developmental care ward rounds.

Our quality improvement project (QIP) had three main aims:

1. Support parents as key nurturers
2. Provide individualised care plans for infants and their families
3. Ensure that staff feel valued as part of a wider interdisciplinary team

## Methods

Key members of the neonatal team were identified as stakeholders for this project. These included an occupational thera-

pist (NIDCAP trained), physiotherapist, speech and language therapist, psychotherapist, neonatal nurse and neonatal consultant with an interest in developmental care. The Plan-Do-Study-Act (PDSA) model was used in project planning and execution. A questionnaire was sent to parents asking them for their views and recommendations. Families were keen to participate and expressed a desire for an opportunity to share what they knew about their baby and to learn more about the different stages of their infant's development. Regular meetings were held to design a poster, parent leaflet and a bedside record sheet which includes an individualised care plan for the infant and family supported by the wider interdisciplinary team. The project was registered as a QIP within maternity services. To ensure a clear and efficient referral and selection process, a standard operating procedure (SOP) was developed and distributed to all staff. Additionally, regular bedside education and engagement sessions were held with all members of the neonatal team.

## Results/ Findings

Our developmental care ward rounds were launched in August 2023 and have been running regularly for the past ten months. Two to three families are referred by staff and approached every alternate week. They are invited to participate and are supplied with information about what to expect during the ward round. This gives them time to prepare questions addressed to the interdisciplinary team. Around 40 families have been seen so far. Verbal feedback from families and staff involved has been very positive with some stating that it has been the best meeting they have ever had with professionals since they started their journey with us on the neonatal unit. A formal post-implementation questionnaire is currently being distributed to families and staff involved as part of a research project run by our chief research nurse intern.

## Conclusion/Relevance to NIDCAP

Our developmental care ward rounds focus on providing individualised care to the infants and families on our neonatal unit. They offer parents the opportunity to demonstrate and enhance their role as lifelong nurturers as they lead on discussions and care plans for their baby. It has also helped NIDCAP Professionals identify which babies would benefit from a detailed observation. Each bedside record sheet emphasises the infant's unique behavioural communication and contains information on how to adapt their caregiving environment to make it more suitable to their needs. Moreover, this open communication helps build trusting relationships between health professionals and families. Staff involved have commented that it has helped advance their professional and personal growth and increased their job satisfaction. Our commitment to improve ensures that we continue to make a positive impact on families.

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