

IMPLEMENTING FAMILY LED WARD ROUNDS IN A LEVEL 3 NEONATAL UNIT IN THE UK

B. Ramunno¹, E. Turk, ¹ K. Jones¹, H. Fraser-James¹, K. Sweeney¹, H. Rabe² for the RISEinFAMILY Study Group ¹University Hospitals Sussex NHS Foundation Trust, ²Brighton and Sussex Medical School, University of Sussex

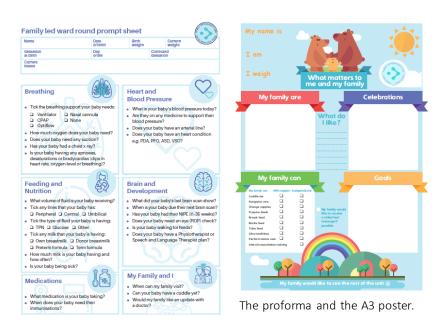


BACKGROUND

Family integrated care (FICare) is a model of neonatal care which fosters the involvement of the family in partnership with the healthcare team. It has been associated with positive outcomes, including an increase in infants' weight gain, increased rate of exclusive breastfeeding at discharge and decreased parental stress and anxiety¹. By supporting greater parental presence in the neonatal unit, FICare impacts positively on the infants' neurodevelopment and improves maternal wellbeing².

AIM

To implement Family Led Ward (FLW) rounds in the neonatal unit; to encourage the involvement of parents in the care of their infants during the admission time, ease parental stress and promote informed decision making.



METHODS

The FLW rounds were planned through a Plan-Do-Study-Act approach, as below.

1.Review of the unit and multidisciplinary team (MDT) timetables and choice of allocated day for FLW rounds.

2. Distribution of informative leaflet in the nurseries and display of posters, to advertise and recruit.

3.Distribution of a proforma containing specific neonatal topicsprior to the day, to direct the discussion during FLW round.4.Production of an A3 poster, placed at the cot side, as a visual

tool to document the achievements from the previous week and set goals for the week ahead.

5. The FLW round was attended by the parents and members of the MDT. The discussion about all aspects of individualised care was directed by the parents.

6. The A3 poster was completed as a summary at the end of the round. For those parents unable to attend, the poster was completed by the team for later discussion.

FLW rounds conducted in 6 weeks period	Number of parents attending	Total number of patients
27 (=48%)	41 (=37% considering 2 parents per patient)	56

Attendance data extrapolated from 6 weeks period.

FINDINGS

The implementation of FLW rounds increased parental participation and involvement in the neonatal unit. Some of the feedback received by the parents stated: "I felt welcomed and involved when caring for my child [...] I have a lot to learn, but being part of this makes it all easier"; "The FLW rounds made us feel knowledgeable"; "[...] I felt really listened to and my concerns were all addressed".



MDT performing FLW round with a parent at the cot side.

CONCLUSION

The implementation of FLW rounds represents a cost-effective intervention to improve parental experience in the neonatal unit. By encouraging parental involvement and promoting informed decision making, FLW rounds decrease parents' anxiety and stress levels. The FLW rounds foster the foundation of a trustworthy relationship between the parents and the MDT; whilst the patients benefit from the intervention through receiving high levels of individualised care.

The FLW rounds could be replicated in different units, independently from the acuity of care provided.

REFERENCES AND ACKNOWLEDGEMENTS

1.Lee, S.K. and O'Brien, K. (2018) 'Family integrated care: Changing the NICU culture to improve whole-family health', Journal of Neonatal Nursing, 24(1), pp. 1–3. 2.Mclean, M.A. et al. (2022) 'Lower maternal chronic physiological stress and better child behavior at 18 months: follow-up of a cluster randomized trial of neonatal intensive care unit family integrated care', The Journal of Pediatrics, 243, pp. 107-115.e4.

The study team was partially supported by the H2020 MSCA RISEinFAMILY grant no 101007922.