

Neonatal Unit (NNU)

Gloucestershire Royal Hospital

Introduction

This leaflet provides you with information about the Neonatal Unit. We understand that Neonatal Units (NNU) can be very different to other wards, so we want to make sure that you are partners in your baby's care and help you to develop a close and loving relationship while also making you feel welcome on the unit.

Planning to go home

We start making plans with you for your baby to go home as soon as possible but there are many factors which must be considered. Usually, babies need to be taking all sucking feeds, growing and able to maintain their own temperature. This will usually be at around 36 weeks of gestational age. However, it may be earlier or later depending on their progress while on the unit.

When planning for discharge, we will work with you to enable you to feel confident with looking after your baby, for example when feeding, bathing and giving medications. For very preterm or sick babies, who are with us for several weeks, parents will gradually take on more of the practical side of care, whereas for others, the process may be quicker.

Parents may feel anxious when the time comes for their baby to go home. To help make the transfer from hospital to home feel less scary, we have 2 parents' rooms, where parents can have their baby with them all the time and take on the day-to-day care.

Alternatively, we have Nursery 5 which is a 4 bedded room, where mothers stay with their baby. Support will be available from a member of staff in these rooms.

Sometimes babies make rapid progress with their feeding, and you may only have 24 to 48 hours' notice that they are ready to go home.

Reference No.

GHP11538_06_23

Department

Neonatal Unit

Review due

June 2026

**Patient
Information****Staff**

We will always try to keep you informed about how your baby is doing, but please feel free to ask a member of staff if you are not sure about something.

Your baby will be under the care of one of the consultants on the unit. The consultant will answer any questions you may have. The consultant may also see your baby at a follow-up clinic appointment after discharge.

The unit is staffed by senior sisters, junior sisters, staff nurses and nursery nurses, ward clerks and dedicated housekeepers and cleaners. We also have Advanced Neonatal Nurse Practitioners (ANNPs) who have had further training to enable them to work on the medical rota.

The unit is also supported by a range of allied health professionals including psychologists, physiotherapists, ophthalmologists, dieticians and speech and language therapists.

Daily routine

The nursing staff have a changeover of shift at 7:00 am, with a handover before the new team continue looking after the babies.

At 9:00 am each day, the medical team who have been on duty overnight hand over to the day-time team. The ward round starts at about 9:30 am in the nurseries.

Please join us on the ward round so that you are involved in the planning of your baby's care. Other health professionals may join the ward round from time to time.

Quiet time on the unit is between 12:00 pm and 2:00 pm when we try to give the babies a period of reduced lighting and limited procedures. This time allows the babies to rest and grow.

There is a changeover of some of the nursing staff at lunchtime and another change at 8:00 pm. The medical team may handover at 5:00 pm and again at 9:00 pm.

The care of your baby will continue seamlessly. Where possible, most procedures are carried out during the day.

**Patient
Information**

Spending time with your baby

Parents, named carers and your baby's brothers and/or sisters (siblings) are all partners in care and can come to the unit at any time.

We ask that everyone entering the unit washes and dries their hands thoroughly, and uses the hand gel provided.

Access to The Women's Centre and NNU is via the Tower Block between 7:00 am and 10:00 pm. Outside of these hours, you will need to press the buzzer at the back door on the service road, Mayhill Way, to be let in.

Please see our virtual tour provided by the Neonatal Network, for more information.



For other family and friends, visiting time is between 11:00 am and 9:00 pm each day. We are sorry but children under 16, who are not siblings, are not allowed to visit; this is to reduce the risk of infection.

Occasionally visiting hours may be reduced but you will be notified of these changes at the time.

No more than 4 visitors at any one time are allowed on the unit. One of these people must be the parent/named carer. Any other visitors must wait outside the unit until one of the other 3 visitors has left.

The family room at the end of the corridor is not a waiting room for visitors and we respectfully ask that visitors wait outside the unit.

We ask that everyone respects the privacy and needs of other families, and staff if they are busy. If a member of staff is checking medicines, please do not disturb them as this will often involve complicated calculations.

Please always try to maintain 'library quietness'. If at any time the number of visitors is making the unit too noisy, or affects our ability to care for the babies, we will ask them to leave.

We ask that you keep your phone on silent while you are on the unit and please talk quietly if taking phone calls.

If any potential visitor feels unwell, we kindly ask that they do not visit the unit until they are well, this includes parents and nominated carers.

Patient Information

Photographing your own baby is allowed, but we ask that you do not film or take photographs of other babies or staff. We offer secure video messaging via a service called VCreate which requires an email address and your written consent. Staff can take videos and pictures and send them to you at any time. It is particularly useful if you have difficulty visiting at any stage. Please speak to staff for more information.

Please leave your coats on the rail in the family room. Lockers are available for valuables and require you to provide a small padlock to keep your belongings safe. The Trust and NNU cannot be held responsible for the loss of any personal items on the unit.

Do remember to use the alcohol gel on entering and leaving the NNU and to wash your hands before and after handling your baby. You must also use the alcohol gel on entering and leaving the nursery and after washing your hands.

You are able to have hot drinks in the nurseries, however, please make sure that you bring in a screw top insulated mug to use. For safety reasons, hot drinks must not be drunk while holding your baby.

Feeding

Breast feeding

We encourage all mothers to breast-feed their babies where possible. There are many health benefits to mum and baby as well as the financial benefits in doing so.

If your baby is not well or old enough to feed from the breast, you can express your milk, firstly by hand and then using a pump.

We have an expressing room on the NNU with hospital grade electric pumps and special fridges and a freezer for breast milk storage. You will be advised how to label your milk for your baby. Staff can print off specific labels for your milk. Please speak to the nurse looking after your baby if you require more information.

We are only able to store a certain amount of your milk but you can store some in your freezer at home. We will give your breast milk to your baby using a tube or cup, until you can breast feed.

Patient Information

You can hire a pump from us, free of charge. We ask that you return the pump when your baby is discharged from the unit. If you would like a pump for home use, please ask a member of staff.

We have Infant Feeding Specialists on the unit as well as other feeding support staff who can help with all types of feeding options.

Please provide your own bottle brush to wash your expressing kit or bottles if needed?

Bottle-feeding

If you are planning to bottle-feed your baby, we will ask that you to bring in your own bottles, cleaning brushes and teats as soon as possible, so that your baby can get used to them before going home.

Please see the First Steps Nutrition Trust for more information www.firststepsnutrition.org/parents-carers



Pain relief

There are a number of ways in which together, we can reduce your baby's possible distress during any procedure by:

- Swaddling or gently holding them and speaking soothingly
- Allowing your baby to suck on a soother, clean finger or at the breast
- Giving expressed breast milk or a sugar solution to your baby via a sterile syringe onto their tongue. This has been shown to increase a baby's natural pain-relieving endorphins

Some babies who require ventilation or complex procedures may be given morphine for pain-relief and sedation.

**Patient
Information**

Use of dummies/soothers

Mothers intending to breast-feed are advised that dummies are not recommended until breast-feeding is well established. For full term babies this is at around 4 to 6 weeks. This is because the way babies suck on dummies is different from how they suck on the breast.

However, there are occasions when use of a dummy may be beneficial, but we will always discuss this with you first and ask for your consent. For example, some small babies on CPAP (a form of breathing support given via a mask over the nose), may be more comfortable if their mouths are closed around a dummy. Sucking on a dummy can also help preterm babies with their digestion.

Smoking

We strongly advise parents not to smoke around their children. This is especially important for preterm babies, who may react badly even to the residual smoke on their carers' clothes. We advise you not to smoke immediately before entering the unit and, if possible, to shower and change your clothes before cuddling your baby. We will continue to perform CO monitoring, as was done during your pregnancy, and we can offer support in smoking cessation.

Please visit the Lullaby Trust and Healthy Lifestyle Gloucestershire websites for more information:



www.lullabytrust.org.uk/safer-sleep-advice/smoking/



<https://hlsglos.org/pregnancy-support/stop-smoking/>

Patient Information

Transfer to other units

The Neonatal Unit in Gloucester is part of the South West Neonatal Network. This is a group of units, working together to deliver the best in neonatal care.

Babies needing either a procedure or level of care which we do not provide will usually be transferred to one of the other units in the network.

There is also the possibility that your baby may need to be transferred to one of the hospitals in the network if we do not have enough cots or staff to be able to safely care for your baby.

If you have any concerns about this, please speak to a member of staff.

Transport is provided by SoNAR, the South West Neonatal Advice and Retrieval Team, who are specialists in neonatal transport.

The network has a website with lots of useful information that you may find helpful.



www.swneonatalnetwork.co.uk

Safety advice for after discharge

Sleeping in the same bed as your baby puts them at an increased risk of sudden infant death. The current advice is that the safest place for your baby to sleep is in a cot in your room for the first 6 months of their life. Please avoid putting toys into the cot with your baby.

It is strongly advised that you do not fall asleep on a sofa with your baby. Lullaby Trust provides further information and advice on this issue.



Please visit www.lullabytrust.org.uk

Patient Information

Remember 'feet-to-foot' and 'back-to-sleep' saves lives.

While we hope that you will never be in the position of needing to resuscitate a baby, we will offer you a film to watch before going home.

If you would like a practical demonstration, please let us know and we will be happy to demonstrate how to perform resuscitation on infants via a specially designed mannequin and give you the opportunity to practice yourself.

If you need advice about your baby after going home, you can speak to your midwife, Health Visitor or GP.

Support for families

The NNU has a parent led support group called 'HOPE'.

They meet for tea and cake most Tuesdays at Finlay Children's Centre, Gloucester, GL4 6TR.

They have a closed face book page

www.facebook.com/groups/hopegrnu and can be contacted by email at Boppertwins@gmail.com



The HOPE group can provide emotional and practical support for mothers, fathers and carers both throughout their neonatal stay and after discharge. A representative of the group usually runs a drop-in session on the unit.

Support and Help for Every Dad

S.H.E.D aims to support and help every dad who have experienced or are experiencing having their baby start its life on the Neonatal Unit.

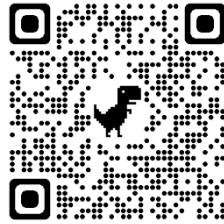


S.H.E.D, who are linked to Gloucestershire Royal Hospital Neonatal Unit, wants to bring together these dads to make sure that everyone has the opportunity to speak, learn or listen to other dads who have walked the same journey; balancing caring for a new child, partner, siblings and families - while in many cases having to continue to work to provide for their family.

Through sharing experiences, S.H.E.D is looking to make the journey of neonatal care a less stressful time.

Patient Information

Dad Matters



Dad Matters Gloucestershire exists to support dads to have the best possible relationship with their families. They work closely with other professionals within Gloucestershire and nationally to better support dads in the first 1001 days of their parenting journey

Scoo-B-Doo



Scoo-B-Doo is our own charity which has supported the NNU at Gloucestershire Royal Hospital for over 25 years. Much of our equipment has been bought using money raised by them. There are leaflets at the reception desk, or you can visit the website:

www.scoo-b-doo.info



Bliss is a large, nationwide charity, which supports neonatal care in the United Kingdom. You can download free information on a huge range of topics, including those useful for after you go home such as weaning preterm babies.

Patient Information

There are Bliss support groups, there is one locally which is run separately from the Neonatal Unit, details of which can be accessed via their website or by calling their information and support line on:

Tel: 0800 801 0322

Website: www.bliss.org.uk

Tommy's

...is another baby charity, which has useful information about preterm birth.

www.tommys.org/pregnancy-information/premature-birth



Contact information

Neonatal Unit

Tel: 0300 422 5570

Tel: 0300 422 5529

ITU Nursery

Tel: 0300 422 5677

Nursery One

Tel: 0300 422 5678

Nursery Two

Tel: 0300 422 5169

Our phones will be answered but it may take some time if staff are busy with families.

Website:

www.gloshospitals.nhs.uk/our-services/services-we-offer/maternity/our-maternity-services/having-your-baby-gloucestershire/neonatal-unit/



**Patient
Information**

Feedback

Please let us know if you have any suggestions for improving the experience for parents on the Neonatal Unit.

We welcome all feedback in order to improve the service and care we provide to both babies and their parents/carers.

A survey will be sent to you electronically via email following discharge. Please make sure that we have your current email address.

If you would like to give feedback in person before discharge, please speak to a member of the team

Instagram

The Neonatal Unit has its own Instagram page. Please follow us and feel free to send us stories and updates that we can post on your behalf. Find us @GRH.NNU



Content reviewed: June 2023

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>