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Bliss launches audit tool for its Baby Charter Standards

Last year Bliss launched its Baby Charter Standards, aimed at health professionals. After receiving feedback from units an audit tool is being formulated to help units implement these objectives.

Bliss re-launched its Baby Charter in October 2009¹. It was originally produced in 2005² to reflect the UN rights of the child. The original Baby Charter was a poster stating the seven elements that indicate the care and spirit within which care to vulnerable babies and their families is to be delivered, but with no guidelines on how to implement them. The innovation team at Bliss aims to share good practice and find new initiatives for how staff can deliver high quality care to sick or premature babies. We therefore decided to review the Baby Charter as it was seen as a valuable tool to highlight the needs of premature and sick babies and to clarify their rights within the context of family-centred care. Our idea was to one day create a quality award scheme for neonatal units and their community support teams.

The Baby Charter Standards are aimed at health professionals working in neonatal care. They should be used as guidance alongside the NHS Neonatal Taskforce Toolkit³ and in particular its principle on 'Care of the baby and family experience', published in November 2009. The Baby Charter Standards complement the Toolkit by highlighting the importance of both clinical and family-centred care working hand-in-hand, to provide these babies with the very best opportunity to not only survive but go on to have the best possible quality of life.

From our initial distribution of the Baby Charter last year we have received a great deal of positive feedback about the document and some of the issues it addresses. This document goes a step further than the Toolkit by giving some practical examples of how to implement some of the principles as well as addressing the inconsistencies of care across neonatal networks in England. One of the most common issues that we hear from parents who get in touch with Bliss is the different policies and procedures that units have adopted. It is parents and families that get transferred between units so staff are not always aware that units within the same network have

different ways of working. This can often lead to poor relationships between staff and parents as new procedures have not been explained to parents and staff may not realise the adjustments that parents have to make when they come to a new unit. Ultimately all staff should aim to give parents confidence and support in providing long-term care for these vulnerable babies and issues like units having different policies can leave lasting effects with some families and therefore a level of anxiety.

The Baby Charter gives the opportunity for units to take an objective look at the work they do and how they deliver family-centred care through facilities, culture and communication. Bliss one day aims to develop the Charter into a national benchmarking tool, however at this initial stage Bliss is developing a self-assessment tool that units can conduct themselves so that such family-centred interventions can be acknowledged and rewarded. Every unit across the country has the opportunity to participate in this audit and can carry out the assessment by themselves with support from their management team.

Although we are still at the planning stage we intend to split the Baby Charter into three stages each with its own criteria and rationale. The first stage will aim to achieve those elements that require no extra funding, just the goodwill and support of neonatal staff. It will address the standards around culture and communication. Stage two will require support from outside the neonatal unit in terms of investment in equipment and training along with a multidisciplinary approach. Stage three will identify those standards that require large investment from the local Trust or Network such as facilities and designation of services. It will be possible to achieve elements of stages two and three without having to complete stage 1 in full. Each stage will be certified and each unit taking part will have a certificate of commitment.

We ultimately want those staff working at the coal-face to participate in the assessment as they are the ones delivering the care to babies and families on a daily basis. In order for you to fully understand what your unit is achieving you will need to involve parents in some way, whether

this is by simply asking your parents about their view regarding facilities and breastfeeding support or through more formal methods such as focus groups.

Bliss wants to make certain the Baby Charter is used in a constructive way. A key part of the audit is the development of a set of improvement goals. Hearing what parents say, discussing it together and agreeing on improvement goals help create a strong sense of shared purpose. We are currently in the process of creating the self-assessment tool with the help of a steering group. We plan to have the tool available by the autumn and we will be contacting all units to find out whether they want to conduct the audit.

This is our first step in working towards creating a quality award for the baby Charter. Your unit is the first place these families get the chance to be together and with your support parents can bond more effectively and feel confident to deliver the long-term care when their baby goes home. Auditing your unit helps identify the areas of good practice that your unit

is delivering on as well as those that need some extra attention.

The Baby Charter aims to ensure that parents are actively involved as partners in their baby's care with neonatal care decisions based on the baby's best interest. They should also be involved in plans and processes for service improvement; and be informed, guided and supported to help them feel confident in caring for their baby. Mothers should receive practical support to express breast milk and achieve successful lactation. In addition parents should be involved in discharge planning co-ordinated from admission to discharge home to ensure baby and family have the appropriate care and resources they need. The Charter's audit tool aims to help staff deliver this too.

References

1. **The Bliss Baby Charter Standards. 2009.**
2. **The Bliss Baby Charter. 2005.**
3. **Toolkit for High Quality Neonatal Services.** NHS & Department of Health. October 2009.



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