

Bliss Baby Charter Grant Fund: supporting units to improve family-centred care

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For the past 18 months, Bliss has been privileged to work with the True Colours Trust (TCT), a charity supporting mainly disabled and terminally-ill children, to provide over £250,000 in grants to neonatal units across the country. The two organisations are working in partnership to offer neonatal units caring for premature and sick babies, an opportunity to improve their family-friendly facilities.

Hospital neonatal units can apply for a small grant (up to £1,000) or a large grant (up to £10,000). Only one application per unit will be considered by the fund in any 12-month period.

Who can apply?

To be eligible to apply for a grant, neonatal units must have completed the Bliss Baby Charter Audit Tool. The audit tool was developed by Bliss to help hospitals caring for premature and sick babies to assess the quality of family-centred care provided and identify areas for improvement. The family-centred approach to non-clinical care places the parents at the centre of their infant's care.

The audit tool allows units to map non-clinical, family-

centred care on a red/amber/green scale, depending on how well the unit feels it has met the criteria laid out in the audit tool. The Bliss Baby Charter Audit Tool contains seven core principles that summarise the care, respect and support that vulnerable babies and their parents should receive. Where the unit rates itself as delivering amber or red, an action plan is written to improve these areas. The grant fund has proved to be incredibly helpful to units in successfully making these positive changes. To help improve the parents' experience on the neonatal unit, the unit works with parents to complete the audit tool and to identify items to apply for.

The Bliss Baby Charter Grant Fund cannot fund staff time, staff training or pilot projects.

What has been achieved?

The Bliss Baby Charter Grant Fund has been able to approve 34 grants to units in England and Wales, with the majority of applications being for large grants.

Units have made some incredible changes and the following case studies give examples of what has been achieved with the help of the grant fund. Other examples include breastfeeding chairs, breast pumps and preemie cards, converting unused bathrooms into a large breastfeeding room, updating parent bathroom facilities, lockers for parents' valuables, and refurbishing rooms for 'rooming-in'.

Case study 1: Worcester Royal Hospital

Application details

Parent feedback found the nurseries and the breastfeeding room too clinical; they wanted a relaxing, homely and welcoming environment and somewhere to safely store their belongings while on the unit.

The unit wanted to provide resuscitation training before parents took their baby home but were forced to block the breastfeeding room whenever this training took place, due to lack of space. In addition, despite a strong community team who could look after both mother and infant following discharge, infants could not be sent home when they were still tube feeding due to a lack of portable breast pumps.

Impact

Having new wall decorations has made a difference to parents and staff. One member of staff said: "When you do a 12-hour shift it can almost be like working underground. It's so much better now, bringing the outside in." The working environment is welcoming and calm.

The refurbishment has brightened the environment for parents. The spaces are calmer, less clinical and more welcoming. The

improvements to the breastfeeding room are appealing to expressing/breastfeeding mothers.

Having extra breast pumps has reduced the stress of trying to find one for a mother in need and infants can be released into the care of the community team sooner.

DVD players have permitted training to more than one set of parents at a time and removed the need to commandeer the breastfeeding room; training can be delivered at the cotside, which is an added bonus. The DVD players can be further used to entertain siblings, allowing the parents to focus on their infant in the unit.



Worcester Royal welcome area and NICU after refurbishment.

Case study 2: Birmingham City Hospital

Application details

The parent 'rooming-in' rooms were 'not conducive to creating a warm and calming environment' and some families were avoiding spending time there. Due to the lack of community teams, longer stays were more common on the unit, meaning these rooms are incredibly important.

The unit applied for refurbishment of the transitional care rooms, including double and single beds, chair beds, wardrobes, blinds and new wallpaper.

Impact on staff

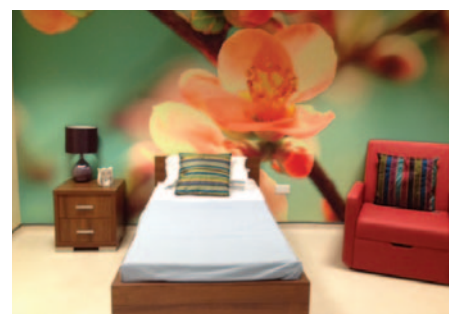
It is agreed that the rooms are so much better now and described as 'a boost to have achieved the change and been involved in the decisions'. Staff who were previously 'embarrassed and apologetic' when they showed parents these rooms, now feel proud.

Impact on babies and families

General feedback has been very positive; the rooms are more comfortable and parents love the look that links in with the style of the natural birth centre. Having the non-clinical parent rooms should encourage people to visit and to stay longer, with potentially better outcomes for infants as a result.



Birmingham City transitional care room before (above) and after refurbishment (right).



Case study 3: Royal Berkshire Hospital

Application details

The parent bathroom at Royal Berkshire was very poor and feedback from parents confirmed their dissatisfaction, especially as the parent bedrooms had been refurbished to a very high standard. Parents were so dissatisfied, they were going home to shower rather than use the old bath.

Impact

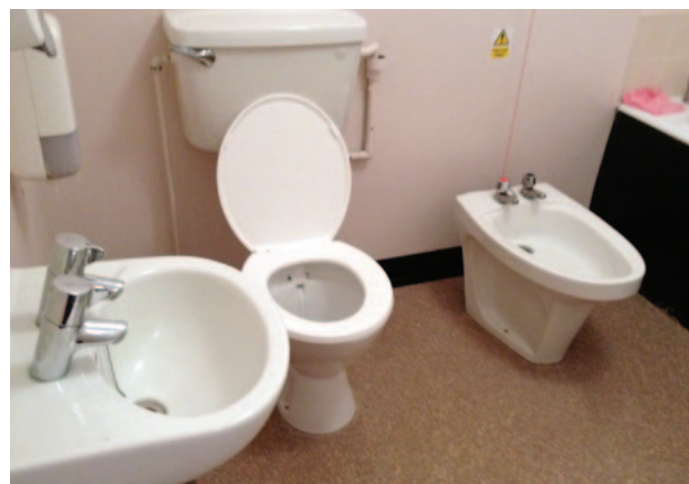
The bathroom is much nicer and positive, rather than negative, feedback is received from families. Parents can shower and live on the unit; previously they had to go home and leave their child for a prolonged length of time.

One parent, who worked with the unit to complete the grant fund application, offered the following feedback: "The new

bathroom is fantastic. It may seem like an odd thing to say about a bathroom, but it's true, the transformation is astounding and will make a huge difference to families on the unit."

As Lead Sister, Gina, says:

"A nice environment really makes a difference; it makes parents feel safe, cared for and comfortable, especially when they need reassurance before going home."



Royal Berkshire bathroom before (above) and after refurbishment (right and inset).

To find out more about the grant fund or the Bliss Family Friendly Accreditation Scheme, please contact Laura Knaier at laurak@bliss.org.uk

