

Welcome to the Neonatal Intensive Care Unit (NICU) Family Guide



My Name:

My Hospital Number:

My Named Neonatal Consultant:

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Baby Detail

Name:

My parents like me to be called:

My date of birth:

My gestation at birth:

My birth weight:

My parents' names:

.....

My siblings' names:

.....

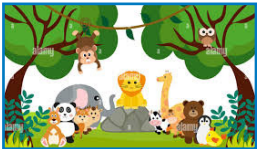
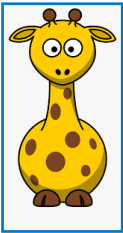
Research studies:

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Additional information about me:

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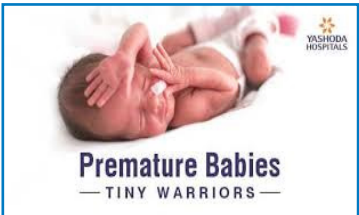
The key telephone numbers are: 01422 224421

Nursing hand-over :

Morning 07:00 – 07:30hrs

Evening 19:00 – 19:30hrs

Medical ward round Start 9:00 am



Introduction

Dear family

Congratulations on the birth of your baby. We appreciate that this is a particularly difficult time for you. We hope that this information is useful and will help take some of the stress away from having your baby on the unit. Our aim is to ensure that all parents are confident and skilled in looking after their baby and to help you to get home as a family as soon as possible. This may seem daunting at first, but the neonatal staff are here to always help you, so your confidence will soon grow.

The aim of this booklet is to provide you with information about the unit. However, it will not answer all your questions; if there is anything you do not understand please ask a member of staff.

Within the NICU, you will find that we provide many different types of care, both for babies that are born too soon or too small, as well as more specialist nursing for full term babies with problems at birth. We are happy for you to phone at any time to ask about your baby, but please be aware that we can only give information to parents.



About the Unit

The Neonatal Intensive Care Unit (NICU) is a level 2 unit which has 20 cot spaces providing different levels of – Intensive Care, High Dependency Care Special Care and Jake Nursery.

Medical ward rounds start at 9:00am daily. On Wednesday there is a grand ward round, where parents are welcome to be present, ear defenders are available for use, if you decide to stay while another baby is being discussed.



The NICU Team



Photographs of Neonatal team members are on the photo board located outside the main entrance. You may find this a useful way of identifying staff members. Every baby has a named Consultant Paediatrician who is responsible for their care. If at any point during your baby's stay on NICU you would like a meeting with the consultant then please inform the nurse caring for your baby. We have a team consisting of Consultant Paediatricians, Registrars and Senior House Officers.

Our specialist nursing team consists of a Matron Ward Manager, Advanced Neonatal Nurse (ANNP), Nursing Sisters, Neonatal Nurses, Associate Nurse, Family Support, Housekeepers and Ward Clerks. Dietitians, Physiotherapists, Speech and Language Therapists, Pharmacists and Social Workers all come to NICU as part of the multi-disciplinary team. We also have Student Nurses and Midwives on placement as part of their training.

Role of the ANNP

The ANNP's wear a purple tunic. They can review, examine, prescribe and manage the care of your baby and perform advanced procedures for your baby.

Care times

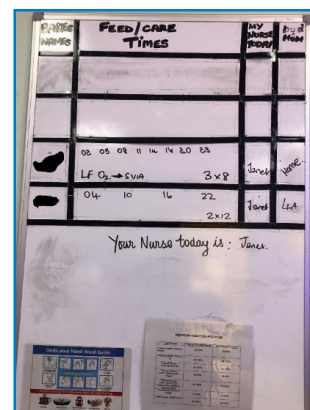
The number of cares your baby has in a day is determined by their general condition. Very sick babies have minimal cares as they need to be handled as little as possible (8 – 12 hourly).

As your baby condition improves, their cares will increase. It is important that babies are left to rest in between care times as this helps to promote growth and recovery.

White Boards

On the wall of the Nurseries there is a white board with baby's name and care times. Please put a tick above the times you will be coming in to perform cares, so the nurses know to save them for you. If at anytime, during your baby's stay, the care times do not fit in with you, please ask the nurse caring for your baby to change to suit your needs.

The nurse's name will be on the white board, wipe board on your baby's cot and on communication sheet for parents.



Jake Nursery

We have made this nursery as much like home as we are able to, as we are still in the hospital. This is the last stop before discharge. While you are finalising preparations to take your baby home, we are organising the final checks, hearing screen, discharge examination and requesting medications from pharmacy.

Quiet Room

We have a quiet room at the bottom end of the unit away from the hustle and bustle of the nurseries. This room is designed to allow you to express your milk and/or breast feed your baby in privacy if baby's condition permits.

On occasions, the room may be required for other purposes, so please always check with a member of staff when you would like to use it.



Ward rounds are held on a daily basis from 9am – 11am on the unit with the Consultant of the week present. There is a Grand Round once a week for all babies receiving special care with consultants present. If you are unable to visit during ward round, you can leave any questions in the Dear Doctor box situated at the nurses' station, or communicate on Teams and telephone. There are medical staff available daily to speak to if you have questions regarding your baby.

Visiting

Our unit has 24 hour visiting policy in place for parents to care for their babies. We are aware that some mothers are separated from their partners. In these instances, mum can choose one named person to visit the ward throughout the baby's stay, so mum can have the support when caring for their baby whilst in the unit.

We would also ask you to observe the following with regards to visiting:

- To avoid overcrowding around cots in case of emergency, visiting is restricted to 2 people at a time (including parents).
- We would ask you not to visit if you have cold/flu symptoms, diarrhoea and vomiting, or if you or a member of your family develops chickenpox, measles or shingles. If you are unsure, please discuss with the nurse looking after your baby.
- No visitors will be allowed to visit without parents being present unless prior arrangements have been agreed with the nursing staff.
- Following parent feedback, during quiet time only parents are permitted to visit.

Visiting times:

(Visiting schedule may vary in cases of a pandemic/or in accordance with national guideline)

Parents: 24 hours

Quiet time / Dimming lights (parents only) 2:00 – 4:00pm



Quiet time

We aim to give babies a period of complete uninterrupted rest between 14.00 and 16.00hrs. Whenever possible we avoid undertaking any routine procedures or interventions during these times. This gives parents/carers an ideal opportunity to enjoy skin to skin care or positive touch as appropriate. We ask you and your visitors to please keep noise to a minimum in the nurseries as premature babies are very sensitive to sudden or loud noises.



Parentcraft Sessions

Parentcraft teaching/classes are given on an individual basis (due to covid restriction). At these sessions you will be shown how to (for example) bath, sterilise of infant feeding equipment, and baby massage.

The NICU Team is committed to family-centred care. Staff will help you to adapt to being a parent with a baby on NICU and start to focus on developing your own role in supporting your baby's care. The aim of the parent guide is to help you become confident in looking after your baby as appropriate, based on their individual needs. This gives you an idea of what skills you can learn and how quickly these can be achieved during your baby's journey through NICU. We would be grateful if you could provide nappies and cotton wool when your baby is in SCBU. We have clothes that you can use, however, if you wish to provide clothes/blankets please do so. It is helpful if you label them with your baby's name and ensure that there is a note on the cot to say you are using your own.



Family time on NICU

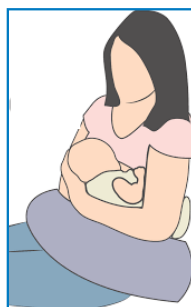
We value parents as partners in care and hope you feel fully involved in your baby's care. We will do this by encouraging you to be with your baby and take on responsibility for most of the care of your baby, as you feel able. We aim for you to feel as in control as possible, taking into account your confidence and the condition of your baby. Unless there is an emergency or in exceptional circumstances, we will not prevent you from being with your baby at any time.



Feeding and caring for your baby

We are currently working towards our UNICEF Baby Friendly Initiative accreditation. This means we actively promote the use of breast milk and know that every drop you can give your baby has value, even if you are not able to exclusively breastfeed. We want you and your baby to enjoy a responsive, positive and rewarding feeding experience whether you breastfeed or not. We take pride as a unit, in supporting all mothers however, they choose to feed their babies.

We know that close and loving relationships are incredibly important for all babies and parents. We will support you to understand your baby's behavioural cues and to touch, comfort hold and talk to your baby as soon as possible after birth.



We value skin to skin contact (kangaroo care) very highly, as it is beneficial in many ways, not just for your baby's development and for bonding, but also for enhancing breast milk production. All parents are encouraged to hold their babies next to their skin as soon as it is possible and to continue doing this throughout your stay, for extended periods of time. We will discuss with you why your breast milk is so important.

There are some important tips to help you establish your milk supply and get off to a good start with feeding. This includes early, effective and frequent expressing if your baby cannot yet breastfeed, to prime your milk supply. We will demonstrate how to hand express and how to use a breast pump. We would also encourage placing and swapping a small piece of material close to your baby and another in your bra, so you both get to know each other's smell. This improves the success of expressing, feeding and bonding between you and your baby.

No strong-smelling perfume please.



Expressing by your baby's cot side or whilst your baby is in skin contact with you is encouraged, as it will boost your milk supply and calming hormones. Screens are available for privacy should you wish. There is a feeding room with a comfortable chair for you to use. Sterilising equipment and electronic breast pumps are also available for you to use on the unit which staff are happy to assist you with. Should you feel you would like any further assistance especially with making sure the breast shields are fitted correctly so as not to make you feel uncomfortable and sore please feel free to ask a member of staff. We encourage you to express frequently (8-10 times in 24 hours), as this is important for a good milk supply. Once your baby is ready nursing staff will be able to support you with breastfeeding and make sure you are happy and confident. Nursing staff on the unit are trained to UNICEF standards to support mothers with all aspects of expressing and breastfeeding. We have facilities on the unit for storing and freezing your breast milk during your stay on NICU. We provide labels for you to place on your expressed breast milk, however due to storage limitations we may ask that you store expressed breast milk at home in the freezer. If you have made an informed decision to formula feed or bottle feed your breast milk, please bring in your own feeding bottles and teats as soon as possible. The nursing staff can help support you with sterilising, making up formula feeds and ensure you are confident before discharge home.



Family Integrated Care (FI Care)

In the NICU, infants are physically separated from their parents, and this often has an impact on the physical, psychological, emotional health of both the parents and the infants. Family Integrated Care is an approach to planning and delivery of health care that encourages greater parent involvement in their infant's care. However, parents generally remain relegated to a supportive role in the NICU, and most of the care for the infant is provided by NICU professionals.

We are working towards achieving FI Care status

Caring for yourself

Please ensure that following discharge you continue to receive midwifery care. Please ask the nursing staff if unsure.

Meals

We understand the difficulties of leaving the unit for meals, but we urge parents to take regular breaks, to eat well and drink plenty of fluids. There is a restaurant and café within the hospital grounds.

We provide free meals for parents staying all day in the neonatal unit

Car parking/Travel expenses

Everyone is welcome to have a parking permit. We are only able to issue one parking permit per family which allows access to the Women and Children's barrier car park but not to a nominated parking space. The car park becomes very busy at different times of the day, which means that unfortunately you may have to wait for a space.

If you claim benefits, we may be able to help cover hospital costs. You will need to provide proof that you are in receipt of these benefits. Please visit our General Office located on the First Floor directly above the main hospital reception. The General Office staff will give you a yellow card which a member of our neonatal will put stamp each time you visit your baby. This will provide proof for reimbursement, which must be claimed on a weekly basis.

By receiving certain benefits, you may be entitled to claim back parking charges.

Further information available from a leaflet rack in parent's sitting room in the neonatal unit and the General Office.

Parent and family facilities

Our family room provides a quiet space to rest and make use of the kitchen area. The kitchen is available for you to use with facilities for making hot drinks, a microwave and fridge. Please label all food/drink left in the fridge.

We have limited rooms available on the unit for parents to stay overnight. However, priority is given to those parents who have a baby requiring intensive care. We encourage parents to stay overnight with their baby prior to going home.



We have an 'emergency toiletries pack' for mum and a separate pack for dad (Mum bag and Dad bag) for parents' use – please ask a member of staff

Free Massage Service

We offer free massage service for parents both mum and dad for relaxation by appointments once a fortnight (depends on restriction due to infection)



Calderdale Royal Hospital facilities opening times

Main restaurant ground floor (Ingleton Falls)

Monday to Friday 8:00 am – 3:00pm

Union House (Starbucks) Main Entrance

Opens 7 days a week from 7:45 am to 7:45pm

League of Friends refreshment bar (located within Outpatient Department)

Monday to Friday 9:45am – 12:45pm & 1:45pm – 4:15 pm

Closed Saturday and Sunday

Shop (WH Smith) Main entrance

Monday to Friday 8:00am – 8:00 pm

Saturday and Sunday 9:00am – 7:00pm

There is an ATM machine main entrance next to the shop and opposite Starbucks

Safety and security

Doors to NICU are locked at all times. To gain access, please use the doorbell and a member of staff will release the door. Please be patient, we will open the door as quickly as possible. You may be asked to identify yourself; this is a safety precaution so that we are aware of who is visiting at all times.

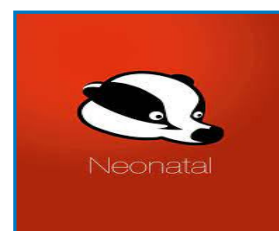
The Trust is not responsible for the loss of valuables and personal belongings. Lockers are available at reception for parents. Please ask at the reception desk for a key if you wish to make use of a locker.



Badger Net Baby Diary

One of the challenges parents' faces is not being with their baby 24 hours a day. Badger Net Baby Diary allows parents/guardians secure, real-time access to photos of their baby while in the hospital care over the internet through their PC, tablet device or mobile phone. This is an opt-in service and if you decline to use Badger diary your information will not be available on this service.

All information is held securely and cannot be accessed without appropriate login detail. A leaflet with login details to access this service will be provided on your baby's admission to the neonatal unit



Badger Net Database

Your baby needs the expert care of the medical and nursing team on the neonatal unit. To help deliver the best care possible we collect information about all the babies we look after.

The Badger Net Database is implemented within all the neonatal units across Yorkshire and Humber. It is a web-based system which collects clinical information regarding your baby.

Frequently asked questions

Why do we need this information?

We use the information we collect to help us:

- Collect accurate details about the care of sick or premature babies in the neonatal unit
- Monitor neonatal care and make sure it is always up to date
- Plan and develop services for you and your baby within your area
- Produce reports that highlight areas of good practice that we can share across the region

Clinical information necessary to those staff directly involved in your baby's day to day care will be identifiable data. Clinical data required for all other purposes will be anonymised.

What information do we collect?

We record:

- The NHS number for you and your baby
- Personal details such as your contact details
- Your baby's condition and treatment on a daily basis
- GP details
- Your baby's medication and follow up information
- Where your baby was born
- How many babies you had
- Your baby's birth weight
- How many weeks pregnant you were when your baby was born

Who collects the information?

The staff on the neonatal unit – usually this is a neonatal nurse, doctor or ward clerk. All information will be stored on a secure system and password protected.

When will we collect the information?

Information is updated regularly throughout your baby's stay in the neonatal unit.

How will we collect the information?

We collect the information from the medical notes and nursing records. We enter it directly into the database system.

Who will see the information?

Only the people who care for your baby see all the details. There are very strict regulations controlling access to personal information like your baby's NHS number and date of birth.

By law, everyone who works for the NHS must keep all personal information confidential and the Trust has strict confidentiality and security procedures in line with GDPR (2018).

What is the consent procedure?

If you are happy for your baby's details to be used for clinical care purposes, secondary analysis such as audits and for clinical information to be transferred between units should the need arise then you do not need to do anything. If, however you do not want your baby's clinical information to be available please ask a member of staff for an opt-out consent form. A signed copy of the opt-out consent form will be given to you for your information.

Can I see the records on the database?

Yes, you can see a copy of the information we have about you and your baby. To do this please talk to the nurse in charge.

How can I find out more?

Please talk to a member of staff if you:

- Need more information
- Have any questions or concerns
- Want us to remove any information from the database

Infection prevention and control

It is extremely important to protect all babies from infection risks. All visitors must wash and gel their hands on entering NICU and before opening the doors to the fridge or freezer in the milk kitchen.

Before handling your baby, please remove wrist watches, bracelets and excessive numbers of rings as these can also be an infection risk and may cause damage to your baby's fragile skin.

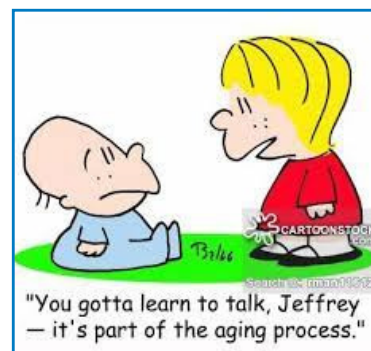
Outdoor coats must be kept outside the nurseries. Lockers are available in the parents' sitting room. Please discuss with nursing staff if you are unsure of correct procedures.



The Speech and Language Therapist on NICU

The Speech and Language Therapist on NICU is available to help with establishing feeding skills. Whilst not all babies will need this specialised help, some babies will need some extra support to establish oral feeding (that is breast or bottle feeding by mouth).

The Speech and Language Therapist may begin work with you and your baby well before the introduction of oral feeds. This might include working on your baby's tolerance of touch around the mouth and sucking practice on a finger or dummy. The Speech and Language Therapist will work alongside staff on the NICU to support you and your baby on the safe and timely introduction of oral feeding.



Research

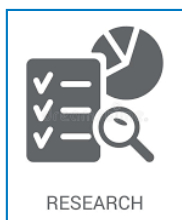
Our Neonatal Unit is very enthusiastic about clinical research.

We believe that we must all do research to better help babies and their families.

As Doctors and Nurses caring for babies, we are continually involved in various research studies because we always want to find how we can improve the care for our babies and increase their chances of survival.

Consequently, our Neonatal Unit is proud to be currently involved in some of the most important national and international studies. These studies have the potential to significantly improve treatments and outcomes of sick and premature babies. We firmly believe that, by being involved in these various important studies, it keeps us at the 'cutting edge' of providing the latest and best treatments for the babies we care for.

During your baby's stay on NICU, it is possible that you will be approached by one of our research nurses to consider including your baby in one or more of these studies. Your participation will directly help answer important question that will let Doctors and Nurses know how to care for premature and sick babies in the future. You should be reassured however that the care you and your baby receive will not be affected if you decide not to take part.



Mobile phones

Mobile phones are allowed on the unit, but to be kept on silent mode. If you need to make or accept a phone call, please use the parents' sitting room. Free Wi-Fi is available throughout the hospital. Unfortunately, personal mobiles chargers are not permitted to be used in the neonatal unit due to fire risk.



Confidentiality

All information concerning your baby's health is strictly confidential and will only be given to you. During the medical ward round you are welcome to be with your baby while the team are discussing his or her care. In order to promote parents' unrestricted access you will be asked to wear ear defenders while other babies are being discussed.

To respect the privacy of other babies and families, we ask that you do not approach their cots/incubators or ask staff for information about them.

Safeguarding children

As a Trust, we have a legal duty to protect and promote the welfare of all children and young people. This means that sometimes we contact Children's Services and other professionals deemed necessary if we have any concerns about the babies on NICU. We will usually discuss this with you prior to a referral and give you further information regarding this process.



The Chaplaincy Team

Coming into hospital is often an anxious time for both patients and their families. The chaplains are available and happy to spend time with anyone who needs a 'listening ear' or to talk things through. Our chaplains come from different faith communities and denominations, but you do not have to follow a particular faith to contact the chaplains. We will respond to everyone who contacts us and are sensitive to all cultural and religious needs, always respectful of personal feelings and beliefs.

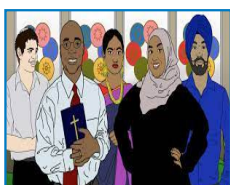
Facilities For Prayer, Religious Observance, or a Quiet Space Huddersfield Royal Infirmary

The Hope Centre (Chapel and Prayer Rooms) are located in the main entrance of Huddersfield Royal Infirmary. They offer a quiet space for reflection or prayer. Due to restrictions due to COVID19 we are not able to provide prayer mats and there are currently no gatherings for prayer or worship.

Calderdale Royal Hospital

The Chaplaincy Centre (Chapel and Prayer Rooms) are located on the first floor next to the General Office. The Centre has a Chapel area which is often used for quiet reflection, prayer and Christian worship and male and female prayer rooms with wudu (washing facilities).

The Chaplaincy Centre at CRH, and the Hope Centre at HRI are open to people of all faiths and none; all we politely ask is that people show respect to others who might be using the facilities at the same time. Religious material and resources (including things to take away and keep) are not currently available in the centres. Please ask a chaplain if you require such materials. It is not our policy to distribute religious materials indiscriminately.



Preparing for home

Staff will complete the Parent Guide with you included in this booklet to ensure you feel happy with caring for your baby at home.

Your baby may be prescribed medicines that will need to be continued at home. You will have the opportunity to give these to your baby whilst they are still in hospital. Please ask staff for details. All parents will need to watch a resuscitation DVD before going home and be offered a practical resuscitation demonstration.

Your baby needs to be registered within 6 weeks of birth. Their NHS number is required. Please ask a member of staff for this.



Complex needs

For babies with long-term complex needs, you will be kept informed and given the opportunity to meet other professionals from the multi-disciplinary team who may be involved in supporting your baby and family in the future. Please speak to the consultant or nurse if you have any questions.

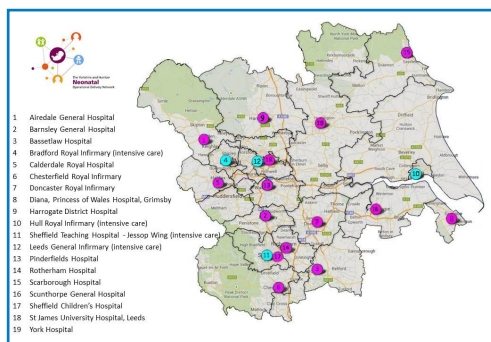


Receiving oxygen therapy at home

Transfer to other Neonatal Units or Paediatric Unit

If your local hospital does not have the level of neonatal care your baby needs, your baby may be transferred to another hospital in the Yorkshire and Humber region until your baby is stronger. You will be transferred before your baby is born, or your baby will be transferred by our specialist transport team (EMBRACE) after your baby was born.

If babies have long-term care needs, it is more appropriate that they are transferred to a children's ward where the environment and specialist team can further support their development. The nurse in charge is happy to discuss any planned transfers and can arrange a visit to the ward/unit. If your baby requires further investigations, surgery or if NICU is at full capacity then your baby may be transferred to another NICU.



Smoke Free

The hospital building and grounds are designated “NO SMOKING” areas. We ask that where possible you do not attend the unit for at least one hour after you have had a cigarette. You will also be asked not to hold your baby for an hour after a cigarette due to the toxins and chemicals that remain on your clothing.

Electronic cigarettes aren't risk free, however they are 95% safer to use as they do not contain the 4 – 7000 chemicals as cigarettes do. The Public Health England review has noted that the amount of nicotine released into the ambient air poses no identifiable risks to bystanders. Please remember electronic cigarettes need to be stored and placed well out of reach of children.



Zero tolerance

CALDERDALE and Huddersfield Hospitals will do all it can to prevent abuse, assault and discrimination towards its staff members. Aggression and racist behaviour are unacceptable and will not be tolerated.



Complaints and suggestions

If you have any suggestions, complaints or concerns regarding NICU, nursing or other issues, please make these known to a member of staff immediately as we can often resolve issues for you. We seek to learn from the issues raised regarding our services and put processes in place (action plans) to prevent these from happening again.

Alternatively, you can ask to speak with the ward manager or contact the Trust's Patient Advice and Liaison Service (PALS).

We are always looking for ways in which we can improve our service and would appreciate parents completing The Parent Experience Survey regarding your baby.

Parent support

For many parents the first few days, weeks and months with a premature or sick baby are extremely tough, especially if your baby is very little or unwell. The staff on the unit are experienced in supporting families in your situation and will always find time to explain things to you.

Bliss is a charitable organisation that offers a listening ear, emotional support and information to families whose babies were born premature or sick.

For support in over 200 languages please call: 0808 801 0322

For online support please visit: www.bliss.org.uk/messageboard

For free information please visit: www.bliss.org.uk

For email support please message: www.hello@bliss.org.uk / www.parentssupport@bliss.org.uk

Support Groups

The Parent Support group is a place to hear from parents, who have shared or are sharing a NICU or SCBU journey, in order to help and support each other, connect with other parents, share stories, milestones, helpful hints, bad days and importantly good ones.

Find us on Facebook @ Calderdaleneonatalunit



Baby Cafe

The baby Café charity coordinates a network of breastfeeding drop-in centres and other services to support breast feeding all across the UK. All pregnant women and breastfeeding mums are welcome to drop in at any time, along with siblings.

The Baby Café is run by health professionals.

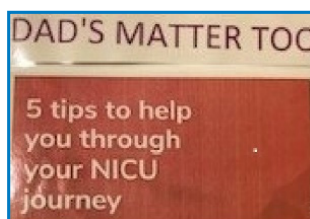
The nearest Baby Café is the Calderdale Baby Café based at Baby Ballet, 25 Square Road, Halifax HX1 1QG and takes place on Thursday between 9am to 11am

There is also Baby Café in Huddersfield at the Zone, St Andrews Road, Huddersfield HD1 6PT It is open every Monday (except Bank Holidays) between 12 noon to 2 pm.

For further information contact Marilyn Rogers, Infant Feeding Advisor on 01422 224417 or email marilyn.rogers@cht.nhs.uk

Information Boards and Leaflets

Information on various aspects of caring for your baby leaflets/booklets, and guidance on supportive networks are available located in various nurseries, parents' room, quiet rooms and along the corridor for further information. The information/ contents on our Information Board are change regularly in keeping with current issues.



BLISS

This is the only UK charity dedicated to working for special care babies and their families. Their Family Support Team offers a freephone help line, website information leaflets and other support groups. In your 'Welcome Pack' you will find BLISS family Handbook. This contains useful information on further information on support groups, other relevant organisations, and various aspect of your baby's care, including 'About Neonatal Care Leaflet', 'Going Home Leaflet', 'Look at me I'm talking to you', 'Handle me with care', 'Breastfeeding Leaflet'.

We are working towards achieving Baby Bliss Charter Accreditation

<https://www.bliss.org.uk/health-professionals/information-and-resources/resources-for-parents>



Useful Information

How to Register a Birth

Registrations at Calderdale Register Office are by appointment only.

Please ring 01422 288080 for an appointment.

If you attend the office without an appointment, it is unlikely that you will be able to register at that time.

Who can register a birth?

Parents married to each other.

If the parents of the child were married to each other at the time of the birth or conception, either the mother or the father may register.

Parents not married to each other.

If the parents were not married to each other the simplest way is for both parents to attend to register together. If this is not possible, please contact Calderdale Register Office for further advice.

Documents and fees

There is no charge to register a birth.

You will be given the following document

A birth certificate showing your child's name and date of birth. They can be send with your child benefit claim.

Certified copies of the full birth entry (required for passport, bank account, etc.) are available for £4.00 (at the time writing this information) each from the Registrar at the time of registration.

Registration by Declaration

If you would prefer to go to an office nearer your home, you can give the information about your child's birth 'by declaration'. The Registrar will take the information about your child and send it to Calderdale Register Office to be recorded in the birth register.

You will need to take a cheque or postal order with you to pay for any full certificate that you require.

The nearest alternative offices are:

Huddersfield 01484 221030

Bradford 01274 432151

Parent guide: learning to care for your baby on NICU

Staff to photocopy and place in notes on discharge

Education Skills for Parents Parental Teaching	Staff Signature/ PRINT NAME	Date (dd/mm/yyyy)	Parent/Carer Understood Initial
Important information			
Introduction and tour of NICU			
Advice on visiting NICU			
Infection prevention measures			
Safety / Security / Confidentiality			
Admission pack for parents			
Developmental care			
Comfort holding / Recognising stress cues			
Kangaroo care / Skin-to-skin holding			
Quiet time: noise and light			
What your baby hears and sees; see Bliss booklet "Look at me I'm talking to you")			
Sucrose / Pain relief			
Feeding cues			
Using a dummy (Pacifier or/and comfort sucking at the breast)			
Infant Cares			
Mouth care (Breast milk or sterile water)			
Nappy changes and skin care			
Daily washes / top and tail / dress baby			
Temperature control 36.5 - 37.5 normal range Record and understand temperature instability			
Bathe (swaddle bath) my baby with special attention to water temperature, positioning and safety			
Weigh baby and record weight (and recalibrate scale if necessary)			
Feel comfortable in taking baby in and out of incubator/cot. Reposition baby safely			
Change O2 Sat probes and leads			
Feeding			
Breast feeding			
Colostrum pack			
Hand expressing effectively			
Safe use of breast pump (check sizing of pump shield)			
Cleaning & sterilising breast pump equipment			
Breastfeeding advice			
Defrosting / Warming of breast milk Label, store and transport from home safely			
Feeding plan started			
Bottle Feeding			
(Types of bottles and teats) Making up formula feeds			
Tube feeding			

Education Skills for Parents Parental Teaching	Staff Signature/ PRINT NAME	Date (dd/mm/yyyy)	Parent/Carer Understood Initial
Check position of tube with pH strip			
How to position / re-position my baby for feeding and watch for signs of stress and feeding intolerance			
Cleaning and sterilising bottles / teats			
NHS bottle feeding leaflet			
Giving Medicines			
Renewal of medicine prescriptions			
Safe administration and storage			
Advice given regarding medicines			
Preparing for home			
Discharge passport			
Register with GP			
Resuscitation DVD and/U tube/practical training			
"Safer sleep for Babies" booklet			
Medical examination of baby before discharge			
Follow up appointments			
Specialist milk prescription			
Car seat, bouncer and baby walker safety			
Immunisations (inform parents when these are due)			
Meningitis baby watch leaflet			
Tummy time leaflet			
Smoking advice			
Weaning leaflet			
Documentation			
How to document appropriately and ask for clarification when needed			
Communication			
Use care plan to communicate with nursing staff and update regularly			
Use Badger Diary/Teams/Zoom/Telephone			
Participating on ward rounds and have an active role in discussing a plan of care for my baby			

Tube feeding my baby: competency statement for parents

Statements of competency	Parent/Carer Signature	Nurse Signature
I have been given a demonstration of nasogastric feeding by NICU staff including:		
•Reducing risk of infection		
•Positioning - safe and secure		
•Skincare and correct positioning of feeding tube		
•Visual observation of the baby throughout process of feeding		
•I also know what to do if my baby vomits and at the same time		
I know what a normal aspirate (clear/milky) looks like and to call for help if green/yellow or blood stained, when in hospital and contact CCNT if at home		
I have been shown the types and sizes of syringes that I need to use and how to use them:		
•5ml and 20ml in hospital		
•20ml and 60ml at home		
I know how to effectively wash my hands using the correct technique before I start the procedure		
I know how to gather the correct equipment		
I know how to safely warm the milk if needed and not to carry hot water outside of the milk kitchen		
I know my baby must be in a safe and secure position/place before I start to feed		
I have been shown how to check the feeding tube is securely attached		
I have been shown how to check the feeding tube is at the correct length and documented on the feed chart		
I have been taught how to check the correct position of the tube by gently aspirating immediately before use, then testing the aspirate on a pH indicator strip		
I understand the result range on the pH paper and that it must be 1 - 5.5		
If 6 or above I must not feed by the tube until re-testing pH		
1. Re-check tube positioning ensuring secure taping and correct length as documented		
2. Change position of baby		
3. Attach a syringe with approx. 1ml of air and gently push through the feeding tube. Re-check pH - if remains 6 and all of the above have been confirmed, then attach a syringe with 2mls of sterile water and gently push water through the tube		
If still 6 or above whilst in hospital inform the nurse. If at home inform the Community Children's Nursing Team (CCNT)		
Before starting to feed baby, I will check the temperature of the milk to make sure it's not too hot or too cold		
I know how to pull back the plunger on the syringe before I attach the syringe to the feeding tube and then remove the plunger to start the feed. When my baby requires more than 20mls, then I will attach an empty syringe to the feeding tube instead and fill this from a bottle of milk, then reinsert the plunger and remove to commence the feed by gravity		
I know the milk must flow slowly into my baby's stomach and this depends on how high or low I hold the syringe		

Statements of competency	Parent/Carer Signature	Nurse Signature
I know how to stop the feed quickly if my baby vomits, becomes unwell, or changes colour (becomes blue) or has signs of reflux		
I know I must call for help if I am at all worried		
I know how to remove the syringe at the end of a feed and then use approx. 0.5mls of air in a 5ml syringe to gently push milk through the tube to clear it when in hospital. To clear it when at home use approx. 2mls of sterile water before and after feeds		
I know where to dispose of equipment at the end of the feed while in hospital. At home I know how to clean and sterilise my equipment at the end of the feed		
I know to make sure that the feed is written on the feed chart		
I know that I should not allow anyone else to feed my baby who has not been trained to do so by the NICU staff		
I know what to do and who to contact if the nasogastric tube is pulled out, dislodged or I have any other concerns (CCNT once at home and nursing staff whilst in hospital)		

IF IN DOUBT DO NOT USE FEEDING TUBE AND SEEK ADVICE

Tube feeding my baby: competency statement for parents

Supervision log - Please ensure an assessment is carried out over a period of time to ensure parents are consistently competent. The number of supervised feeds will be dependent on each parent/carer's individual needs and the staff will need to assess this

Date (dd/mm/yyyy)	Staff Signature	Parent/Carer Signature	Comments

Staff and parent to sign prior to completing nasogastric tube feeds without supervision

Parent Name, Sign and Date Parents: Date: I have received training, been assessed and feel safe and able to feed my baby by nasogastric tube. I am willing to take responsibility for feeding my baby using a nasogastric tube without supervision	Parent/Carer (1)	
	Parent/Carer (2)	
	Staff (1)	Staff (2)

Infant Basic Life Support

If I stop breathing

- To keep me alive - give me breaths of 5
 - Then 30 pumps to my chest + another 2 breaths
 - Repeat** 30 + 2 until I'm fine
-but as soon as you can call 999

If I'm choking & turning blue.....

- Up to 5 steady back blows I may need from you
 - If that fails and I'm still in a pickle
 - Push on my chest 5 times in the middle
 - Repeat** 5 +5 until I'm fine
- and if you need, call 999

If you have any comments about this leaflet or the service you have received you can contact :

Clinical Nurse Manager
Neonatal Unit
Calderdale Royal Hospital

Telephone (01422) 224 344

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce,
obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych
informacji w innym formacie lub wersji językowej,
prosimy skontaktować się z nami, korzystając z ww.
danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਚੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ,
ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم
المذكور أعلاه"