



# FAMILY Matters



East Midlands Neonatal  
Operational Delivery Network

Welcome to the first Family Matters newsletter for the East Midlands Neonatal Operational Delivery Network (EMNODN). As part of the National Critical Care Review, the EMNODN has employed two new staff members with a focus on improving Family Integrated Care (FICare) and Public & Patient Involvement (PPI) across the network. Cara Hobby is our new Deputy Lead Nurse for FICare and PPI, and Haddie Borbely is our Network Care Coordinator.

This newsletter will share FICare specific network updates, parent experiences, innovative ideas and highlight areas of excellence across the network. If you have something that you would like to share with the wider network, please reach out so we can spotlight good practices and learn from each other!

The last few months we have been out meeting the teams at each trust and connecting with the FICare Link Nurses– A huge thank you to all of you for making us feel so welcomed!

We are very excited to be working with you all moving forwards!

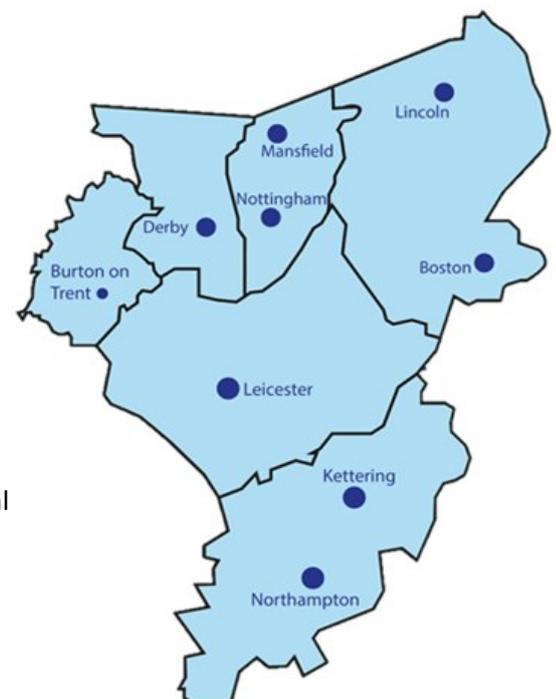
## OUR UNITS

### North Hub

- ◇ Pilgrim Hospital (Boston)
- ◇ Royal Derby Hospital
- ◇ Lincoln County Hospital
- ◇ King's Mill Hospital (Mansfield)
- ◇ City Hospital Campus (Nottingham)
- ◇ Queens Medical Centre Campus (Nottingham)

### South Hub

- ◇ Queens Hospital (Burton)
- ◇ Kettering General Hospital
- ◇ Leicester General Hospital
- ◇ Leicester Royal Infirmary
- ◇ Northampton General Hospital



### CONTACTS

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**Parents can also be directed to:**

📘 EMNODN– Parents Page

# THE ROLE OF THE CARE COORDINATOR

The role of the care coordinators is to work collaboratively with each trust within the network to ensure we are providing a high and standardised level of FiCare.

This will include:

- ◇ Supporting each trust to achieve Baby Friendly accreditation.
- ◇ Supporting each trust to achieve gold Bliss Baby Charter accreditation.
- ◇ Creating network parent competency documents, teaching packages, information leaflets and posters.
- ◇ Undertaking cot side visits to hear parent experiences and use the experiences to shape, inform and improve future practice.
- ◇ Working collaboratively with each trust to identify and recruit parent representatives.
- ◇ Working with the Parent Advisory Group (PAG) to ensure that the parent voice is integral to all aspects of care provision and delivery.
- ◇ Work collaboratively with LMNS's to create the Neonatal Voices sub group of their Maternity Voices Partnership.
- ◇ Ensure all network projects involve parents.
- ◇ Ensure that all elements of FiCare are integral within all ODN units.
- ◇ Ensure that the ODN and trust education programs include FiCare.

# MEET THE TEAM

## Cara Hobby- Lead Nurse for FiCare and PPI



Hi!

I will no doubt be a familiar face to some as I have worked within the East Midlands Neonatal Network for nine of my eleven years as a neonatal nurse! I also worked for two years on a neonatal unit in Edinburgh, where I became qualified in speciality (QIS) and developed a love for haggis and hills!

I have been privileged to go on and hold positions such as Ward Manager, which saw me undertake the RCN Clinical Leadership Programme; Neonatal Project Manager, which saw me design and initiate a Network wide community outreach service; and latterly Neonatal Matron, which saw me gain a wealth of experience surrounding quality improvement, service development and communication and engagement.

My neonatal passion has always been with Family Integrated Care. I will never forget the goosebumps and buzz that I got the first time (and every time since!), I supported a new parent

to hold their baby in kangaroo care for their first time. I became acutely aware that what we were doing wasn't just nursing patients, it was building families. I was lucky enough to cover a short-term Family Care Sister role, which really cemented this for me.

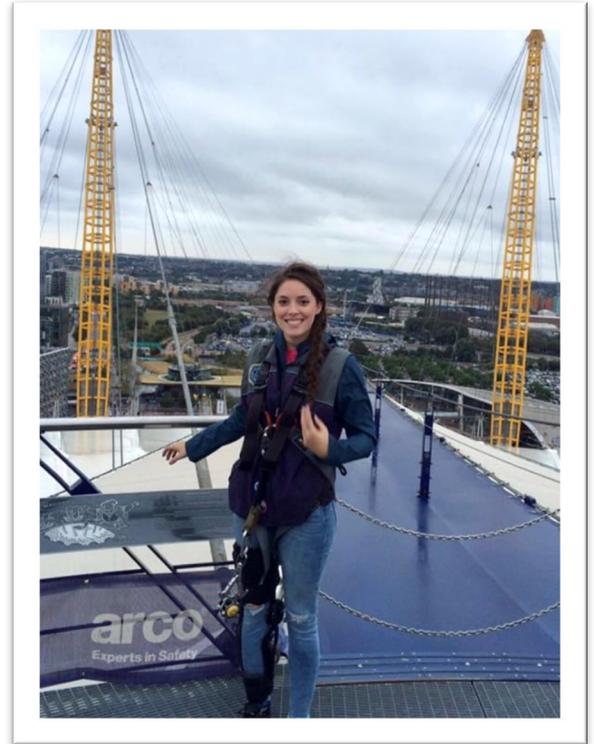
I am delighted to be writing to you in my new post, which will see EMNODN collaborate with neonatal parents and unit teams to implement the family experience elements of the Neonatal Critical Care Transformation Review. I am excited to support teams in reducing unwarranted variation in Family Integrated Care delivery across the region, ensuring the highest standard of family experience for all.

In my own time I am kept busy with two young horses, a cockapoo and an African Pygmy Hedgehog! I love reading, crochet and being outdoors - I will wild swim at any given opportunity!

I look forward to working with you all :)

# MEET THE TEAM

## Haddie Borbely – Care Coordinator



Hello!

Unlike our lovely Cara, I am likely to be a new face to most of you! So to give you a little insight into who I am, I will share some of my background with you.

I qualified as a paediatric nurse ten years ago, entered the world of neonates, and have lived in it ever since! I am absolutely committed to my craft and have always had a special interest in Family Integrated Care along with Infant Feeding, Developmental Care and Bereavement support.

I have had the great pleasure of working clinically in two NICUs as a Neonatal Nurse, Sister and Infant Feeding Lead, and have gained a wealth of knowledge and experience in FICare and patient engagement. As a result of this, I have been able to help as a source of knowledge for many of my colleagues, support students/ new starters and have actively sought to enhance the patient experience.

On a personal level, I have been a patient in critical condition and have truly understood the impact of how one nurse's compassion, professionalism, and good – honest communication can change your entire experience as a patient.

I also understand how your life can become an uphill battle overnight and how much of a difference supportive healthcare can make to that climb! This experience fuelled my passion for FICare even further, and I still have to fight back the tears every time I see a parents' 'first'... the first nappy change, the first cuddle, the first bath! So please forgive me if I get overly impassioned! I am super excited to work with you all in my new role as the Network Care Coordinator, creating a standardised network approach to FICare and ensuring we provide the best possible care to every family we care for in the East Midlands!

# AN INCLUSIVE CULTURE

## Caring With Pride



Within the NHS we hold the principles of equality and inclusion at the heart of everything we do, and the EMNODN is committed to creating initiatives to ensure that we are hearing the voice of our diverse patient groups and using the patient experience to inform and improve our practice.

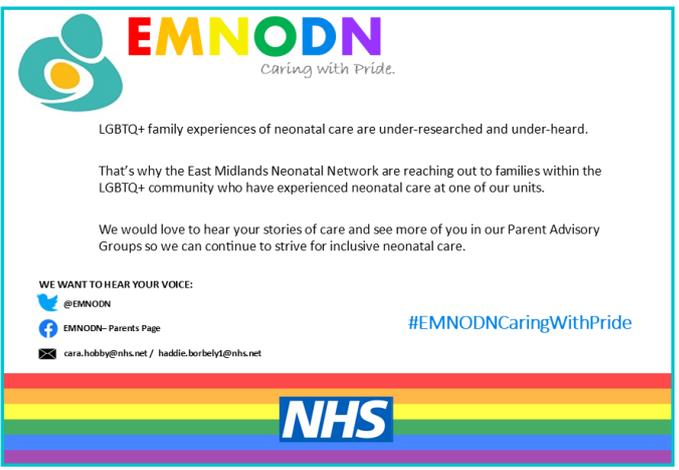
We want to reflect the diverse communities we serve, and we will do this by investing in patient experience and encompassing what we learn in our staff education .

In June, we focused on our LGBTQ+ families to link in with Pride Month and Pride day on the 28th of June.

During Pride Month, we launched our new EMNODN Pride logo, we reached out to families to share their experiences with our 'Caring with Pride' poster, and we asked you to take your Pride Pledges.

We shared your pride pledges along with our own across our social networking sites, this is something we will take forward annually to align with Pride Month, and we would love you all to take part!

We will continue to strive for an all inclusive culture across the East Midlands and hope you will join us in this journey.



Caring with Pride Poster

# PRIDE PLEDGES

## PRIDE PLEDGE

*"I pledge to ensure the voices and experiences of LGBTQ+ families touched by a neonatal experience are heard and included in staff education across the East Midlands"*

*~ Cara Hobby, Deputy Lead Nurse East Midlands Neonatal Network*



#EMNODNCaringWithPride



## PRIDE PLEDGE

*"I pledge to reduce inequalities by ensuring the voices of LGBTQ+ families are heard and reflected in our practices and staff education throughout the East Midlands Neonatal Network"*

*~ Haddie Borbely, Care Coordinator- East Midlands Neonatal Network*



#EMNODNCaringWithPride



## PRIDE PLEDGE

*"I pledge to lead a team that embraces diversity and strives for equality. I will endeavour to deliver a service that thrives on inclusion and learns from the diversity of all"*

*~ Julie Versteeg, Family Care Sister – Nottingham University Hospitals*



#EMNODNCaringWithPride



## PRIDE PLEDGE

*"I pledge to ensure that all families I meet at both Leicester University Hospitals and across the East Midlands Neonatal Network have a voice and are treated equally when accessing our services"*

*~ Jane Gill, Clinical Lead (South Hub) for EMNODN & Neonatal Consultant at University Hospitals of Leicester.*



#EMNODNCaringWithPride



## PRIDE PLEDGE

*"I pledge to value each and every person for who they are to support diversity, equality and inclusivity"*

*~ Emma Pallett, Registered Nursing Associate Nottingham University Hospitals*



#EMNODNCaringWithPride



## PRIDE PLEDGE

*"I pledge to include pronouns in my email signature to show that I am a LGBTQ+ ally supporting the normalisation of pronoun use for everyone"*

*~ Linsay Hill, Office Manager at East Midlands Neonatal Network*



#EMNODNCaringWithPride



# FAMILY IN FOCUS

Foster carers Nicola and Chantelle responded to our 'Caring with Pride' flyer from June to tell us about their experience.

Nicola carried their little boy, Joseph, who was born in 2018 at 30 weeks gestation via caesarean section due to pre-eclampsia. As a family, they experienced neonatal care for three and a half weeks in two of our eleven Network units. During this time, Nicola was in a separate hospital from Joseph and Chantelle for one week.

Below are the **'highlights'** and **'food-for-thoughts'** from our chat with Nicola and Chantelle.

"She was made welcome when we had the c-section, they stuck the label on that said 'Mum' which was quite nice and **felt very inclusive**"

"I don't remember us having a Specific conversation with staff about what we were going to be called, but we were calling ourselves Mum and Mummy to Joseph, and the **staff picked that up**. We didn't really know in concrete what we were going to call each other then!"

"At no point was Chantelle made to feel that she wasn't a part of Joseph; she was able to hold him when she wanted and was **always called 'Mum'**"

"We were in over Mother's day, and they made two mother's day cards – **little things** like that, that recognise we are both Mum's **made all the difference to us**"

"We never felt at any point that we weren't treated fairly, but **our experiences were quite different** with me being the birth mother and Chantelle being the partner mother"



"We think Chantelle had PTSD from the traumatic birth she witnessed and separation of the family unit. As a birthmother, I was able to access perinatal care, but for Chantelle, there was **nothing out there for her, everything was aimed at Fathers**, and **nothing was aimed at just partners**. We were a bit stuck at that point and felt a bit on **our own**"

"When people say, 'I need to see baby with Mum', I know they mean me (birthmother) because they want to check my health, but **there is a better way of saying that**. There is no harm in saying 'I need to see baby with his/her Mums' or using the name of the birthmother to be really clear about who they need to see"

"Once Joseph was born, at that point **me and Chantelle were equal**. If a health professional needs to know which one of us gave birth, then maybe they could word it as 'who carried the baby?' rather than 'who's the mummy?' because we both are. It's about being **mindful** and thinking about **terminology** used"

"The day that I was able to join them, he was ready to come back to the original unit! I self-discharged **as I did not want to be separated from him and Chantelle again**, and it was closer to home, and we had two foster children at home to think about too"

# AREAS OF EXCELLENCE

## Parent Led Ward Rounds



The FiCare model promotes parents as true partners in care, it not only requires staff to promote parent-infant interaction, but also parent-staff interaction. Parental involvement in ward rounds ensures that they are integrated into the team and involved in decision-making. This involvement can help to strengthen parents relationships with the medical team and give them the confidence to raise any concerns they have early, thus, allowing the medical team to act promptly when required.

Dr Simon Rhodes has been a champion for Parent Led ward rounds at Kings Mill Hospital and has shared his experience with us.

*“I am currently Head of Service for the Neonatal Unit at King’s Mill Hospital. On a service week where we attend the NICU and NTC babies on daily ward rounds we have trialled the approach of encouraging parents to present their babies to the team. This is not something that all parents wish to do but by starting the week explaining that as partners in care we would like to share the experience some families have embraced the opportunity to help us challenge the old routines. During my recent week on service we had positive experience with a few of our families. Initially we set up the ward round as a traditional doctor led review with family listening and providing feedback last in the running order. This transitioned during the course of the week so that by the middle/end of the week the family was presenting their own infant’s story and were able to get across ideas, concerns and expectations effectively and in a family integrated way.*

*It isn’t for everyone and can be challenging. We need to also ensure that we are covering the relevant medical needs appropriately but in a holistic way that is inclusive. There is a great deal to do to so that this is embedded but we are on that journey!”*

# AREAS OF EXCELLENCE

## Parents as Partners in Care



The World Health Organisation (WHO) talks about how 'Mother-baby NICUs' are the gold standard for neonatal care, allowing the family to have 24 hour unrestricted access and be the primary care givers for their baby.

For most Neonatal Units across the UK this is not currently possible. However, some of our units have been making steps towards this by utilising recliner chairs/ fold out beds with positive results.

Kettering General Hospital Neonatal Unit does not have an abundance of space, however, the staff are dedicated to providing a true Family Integrated Care experience. Catherine Johnson has shared her experience with us.

*"From a nursing point of view it is so lovely to create an environment where parents feel welcome to stay by their babies side. We have 4 bedrooms available on the ward but some parents want to be closer and stay by their baby's side.*

*In the last two weeks we've had three dads who have stayed by their babies side all night but two of them did not want to sleep although this was offered. The dad who slept was on a reclining chair, he did this regularly during his baby's two week stay, we were unable to use the z bed from labour ward as it was in use.*

*I believe some nurses have concerns that the area to accommodate this is small and worry that in an emergency there must be safe enough room around the cot area. I feel the concerns raised will subside when more nurses see this in practice and it is embraced as common practice on the unit. Any change in practice takes time for all staff to adjust but from my view point this is the way forward in implementing true family integrated care and a welcoming supportive environment. We would expect a parent on a paediatric ward to stay by their child's side so we should really expect the same for neonatal parents".*

# AREAS OF EXCELLENCE

## Going for Gold



The EMNODN are funding all units to work towards gold accreditation in the Bliss Baby Charter. Cara and Haddie will be working closely with the FiCare link nurses to support them in the process.

Nottingham University Hospital have already achieved gold accreditation across both sites and we heard from Polly Humphrey about what it means to her.

*“There is definitely a sense of pride as a nurse working on a unit with Bliss accreditation, knowing you have the support and resources to provide the best experience for families.*

*We are fortunate to have an excellent family care team who provide holistic support to our families to overcome any worries they have. They provide invaluable knowledge and expertise to address anything from emotional worries about baby, to practice concerns such as transport costs. The family care team also offer amazing support and education to staff to empower us to deliver the best family care possible.*

*I am also proud of our developmental care focus, including our ‘all time is quiet time’ view, and the brilliant input from all staff in educating parents to promote developmental care for their baby through positioning, comfort, and interaction”.*

# SHARING INNOVATION

Kings Mill Neonatal Unit started a '2am club' for mothers who are breastfeeding/expressing.

It is a survival kit to keep parents going when they need it the most, made for parents with care and understanding from other mothers who have been where they are – members of the 2am club!

Mothers are provided with a little survival kit with a hot chocolate, some supportive information and are welcomed to the unit to use the comfy chairs, survival kit and the support of the staff and other mothers in the 2am club!



# IMPORTANT DOCUMENTS

Bliss: Locked Out Report



BAPM: FiCare Framework DRAFT



WHO: Immediate “Kangaroo Mother Care” and Survival of infants with Low Birth Weight



NICE: Babies, Children and Young People’s experience of healthcare



Archives of Disease in Childhood: Facemasks during COVID-19 and the importance of smiles in developmental assessment



# UPCOMING COURSES/ EVENTS

North West Neonatal Study day- 24th  
September 2021

BAPM Annual Conference- 4th and 5th  
October 2021

Baby Friendly Annual Conference-  
24th November 2021

# HAVE YOUR SAY...

**WE WOULD LOVE YOUR SUGGESTIONS!**

We will continue to share updates from families and highlight things that are happening within the Neonatal Network including areas of excellence and innovation in individual units.

In our next newsletter we will talk about Family Integrated Care in more detail and share some suggestions for implementation in practice.

Please get in touch if you have something you would like to share or if there is a particular topic you would like us to cover, we would really love to hear from you!

Contact us with your suggestions:  
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