

Developing an information booklet: Taking your preterm baby home - A discharge programme for NICU

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INTRODUCTION

For more than 85 years, Sigma Theta Tau International (STTI) has provided opportunities for nurses and midwives to develop their knowledge improve the health of people worldwide. Since 2004, STTI has conducted the Maternal-Child Health Nurse Leadership Academy with Johnson & Johnson as partners. This Academy has prepared more than 70 nurses to lead health care teams to improve maternal child-health in communities across North America. The purpose of the Academy is to prepare and position nurses and midwives in leadership roles within various health care settings to lead inter-professional teams to improve and sustain maternal child health outcomes for women and children.

METHODOLOGY

- The researcher conducted focus group interviews (qualitative) with the parents of the premature babies. The population, pilot study, data collection and data analysis are included in the research method. In this research the population include the parents of premature babies admitted to a private hospital that were willing to participate in the research.
- Participants were selected purposively (Brink *et al.* 2006:133) as it was the intent of the researcher to enquire what knowledge parents lacked. In order to empower parents can be included in the discharge programme (n=18).

BACKGROUND

A collaboration between STTI, NWU and Johnson and Johnson resulted in the first MCHNLA outside North America as a pilot, in South Africa. The Maternal-Child Health Nurse Leadership Academy (MCHNLA) was established in the Schools of Nursing Science, North-West University. Wilmed Park Private Hospital was the only private institution selected to take part. The main objective of the study was to improve maternal-child-health outcomes, through leadership and empowering parents of premature babies, as part of the MCHNLA SA pilot study.

PROBLEM STATEMENT

Our project is focused on Neonatal ICU. We did not have a structured discharge programme in place at our hospital at that moment. When babies gain weight and are weighing more than 2kg, are feeding well and almost ready for discharge, they are transferred to the maternity ward, where they stay for another 2 days in the baby room before they are discharged. Therefore, when discharged, they are treated as term babies and health education are given by the Maternity staff, the same as will be given to term babies. We've seen that these babies go home with extremely stressed mothers and fathers, for they remember the times in NICU when their child had stopped breathing or they didn't want to feed.

AIM

The purpose is to empower parents to take care of their babies, mostly babies with special needs, before they are discharged from the hospital. To reduce the admission of babies with problems that could have been prevented and to better prepare parents in taking care of a premature baby at home.



RESULTS

The time frame of the project was 18 months. Focus groups were conducted with parents to identify knowledge needs. Main themes and sub-themes emerged from the focus groups. Topics included a glossary of hospital/medical terms, breastfeeding, bottle-feeding, solid foods, sleeping guidelines, milestones, immunisation, when to take the baby to the doctor and emergencies. These themes identified, were used as framework to compile the information booklet that is distributed to parents when the babies are discharged from NICU. With this project we developed a discharge programme that the parents have to participate in before the baby is transferred to the ward or discharged from the hospital. It includes basic information such as taking care of the baby, hygiene, feeding problems, sleeping problems, milestones, immunizations and also more complex situations as CPR and when to take baby to the doctor. We want parents to feel confident and more empowered when they take their babies home from NICU, for them to enjoy this gift of life and to reduce the re-admission of babies to hospital with preventable problems.



OBJECTIVES

- Empowering families to function independently in caring for their premature babies after being discharged from NICU.
- Developing an information booklet for parents on discharge of preterm babies at NICU.

CONCLUSION

We want to continue our project through sustainability of the parent's empowerment to take care of the preterm baby after discharge and secondly roll it out to other private and public hospitals in the North-West Province. Through this project my leadership journey developed me as a leader in NICU. My colleagues in NICU are inspired to continue with the project even in my absence.

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