EVALUATION OF SKIN-TO-SKIN CONTACT IN NEONATAL WARD FROM PARENTS’ AND NURSES’ PERSPECTIVES

KCC QEH NICU / SCBU

Lo KY, Wong M, Liong MT, Chan OP, Tse YW, Wong WF, Ng J, Fung PC, Man A, Leung SFI.
Skin-to-skin contact (SSC)

- Developed by Rey and Martinez (1983) in Columbia as an alternative to incubator care (WHO, 2003)

- Initially defined as:
  “The care of preterm infants carried skin-to-skin with the mother.” (WHO, 2003)
Benefits on Babies

Physiological

- **Cardio-respiratory stability** (Aucott et al., 2002)
- **↓ Oxygen requirements** (Ludington, Ferreira & Swinth, 1999)
- **Maintain stable body temperature** (Ludington-Hoe et al., 2006)

Psychological

- **↓ Cry** (Ludington-Hoe et al., 2008)
- **Longer quiet sleep periods** (Ludington-Hoe et al., 2008)

Bonding

- **↑ Parental-infant bonding** (Wang YH, Kuo HH, 2006)
Benefits on Parents

Psychological

- **↓ Separation-dependent stress** (Feldman R, Eidelman AI, Sirota L, et al., 2002)
- **↑ Confidence in parenting skill** (Charpak et al., 2005)

Bonding

- **↑ Parental-infant bonding** (Wang YH, Kuo HH, 2006)

Breastfeeding

- **↑ Mother’s breast milk volume & Improved success with breastfeeding** (Mohrbacher & Stock, 2011)
Feasibility?

Is it feasible to apply in an acute hospital – a crowded neonatal ward without rooming-in service?
On trial SSC program

- SSC program in neonatal ward
- Evaluate
Aims

- To evaluate the concerns of parents & nurses after SSC
- Identify areas for improvement
How to apply SSC in an acute hospital neonatal ward

- Plan
- Do
- Check
- Act
Plan

Set up workgroup on skin to skin care

- Review literature
- Set up a plan for implementation
  - Develop SSC guidelines
  - Preparation of environment
  - Staff and parental education
  - Set a roadmap for implementation
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Do

Parental Education

☐ Notice Board

☐ SSC leaflet
Do

Staff Education

- Guidelines on SSC
- Briefing session for nurses
- SSC at least 1 hr by parents
- On trial period for one month
  - Collect feedback
  - Anticipate problems and evaluate
- Develop a record sheet for documentation and data collection
# Record and documentation

<table>
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<th>Week</th>
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<tr>
<td>Wk 1</td>
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</tr>
<tr>
<td>Wk 2</td>
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<td>Wk 3</td>
<td>D9</td>
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<td>D13</td>
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<td>Wk 8</td>
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## Breast Milk Oral Care
- Record every date and number of times oral care is done!
- Use only fresh colostrum / EBM
- Do NOT thaw milk for oral care.
- Do after each time mom pumps!

## Skin to Skin Care
- Record every date it is done!
Check

Parental survey performed
- Pre and post study questionnaires were designed
- Collect feedback
- Study parental satisfaction

Staff survey performed six weeks after full implementation
- Collect feedback for improvement
Findings - Parent’s perspective

- Total 35 parents completed questionnaires
- 13 of them are father (37.1%)
- This is the first child (85.7%)
Findings - Parent’s perspective

Wish To Have Skin-to-skin contact

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<tr>
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<th>Pre</th>
<th>Post</th>
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<tbody>
<tr>
<td>Yes</td>
<td>82.9</td>
<td>94.3</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Missing</td>
<td>5.7</td>
<td>17.1</td>
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%
# Findings - Parent’s perspective

## Items of Concern During Skin-to-skin contact

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<thead>
<tr>
<th>Item</th>
<th>Pre</th>
<th>Post</th>
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<tbody>
<tr>
<td>Wound pain</td>
<td>5.7</td>
<td>5.7</td>
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<tr>
<td>Tiredness</td>
<td>5.7</td>
<td>2.9</td>
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<tr>
<td>Baby's condition</td>
<td>74.3</td>
<td>80</td>
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<tr>
<td>Baby's safety</td>
<td>54.5</td>
<td>57.1</td>
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<td>Wear clothes with open front</td>
<td>14.3</td>
<td>11.4</td>
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<tr>
<td>Lack of privacy</td>
<td>8.6</td>
<td>11.4</td>
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<td>Low temperature</td>
<td>26</td>
<td>22.9</td>
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<tr>
<td>Others</td>
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The chart above illustrates the percentage of concerns during skin-to-skin contact. "Baby's condition" and "Baby's safety" are the most significant concerns, with a notable increase in concern post-skin-to-skin contact. Other concerns such as wound pain, tiredness, and low temperature also show an increase in concern post-contact.
Findings - Parent’s perspective

- 100% reported enhance the parental-infant bonding
- All parents agreed SSC was an enjoyable experience
- ↑ confidence in caring babies (47.1% to 91.5% after SSC)
- Fathers are willing to perform than mothers
Findings - Nurses’ perspective

- 33 nurses completed the questionnaires
- 90.9% nurses understood the purpose of SSC
- 81.8% nurses acknowledged that SSC benefited premature babies
- 78.1% nurses reported SSC was worthwhile
- 27.3% nurses reflected that there were not enough resources to support SSC
Act

- Purchase more comfortable arm chairs and footstool
- Replace bed side curtain by ceiling mount curtain
- Extend visiting hours to facilitate SSC
- Enhance clinical observation at bedside
- Organize sharing sessions for staff and parents
Conclusion

- The best incubator is parent’s chest
- SSC is an evidence-based practice and had positive impact on parents and babies
- Every neonatal unit should promote SSC for the benefits of both parents and the babies
- Parents and nurses are satisfied with the SSC
Thank You
References


References

