











# INFANT AND FAMILY CENTERED DEVELOPMENTAL CARE (IFCDC)

## Standards for infant- and family-centred developmental care

	<b>Education and training for IFCDC</b>	IFCDC competence is ensured by providing formal education and recurrent training for hospital and unit leadership, health care professionals and other staff working or visiting the neonatal unit.
	<b>Supportive sensory environment</b>	The hospital sensory environment is adjusted to the infant's sensory expectancies and perceptual competencies.
	<b>Family support services</b>	The family receives care in an environment where its socioeconomic, mental health and spiritual needs are supported.
	<b>Management of the acoustic environment</b>	A managed acoustic environment reduces stress and discomfort for infants.
	<b>Family access</b>	Parents (and substitutes designated by the parents) have continuous access and are able to remain with the infant throughout the 24 hours.
	<b>Support for parental-infant bonding</b>	The fostering of early bonding between parents and their newborn infant is pursued through strategies which promote early contact for the parental-infant dyad.
	<b>Clinical consultation and supervision for health care professionals on supporting families</b>	Health care professionals receive counselling and regular clinical supervision in communicating with and providing emotional support for parents.
	<b>Very early and continuous skin-to-skin contact</b>	Skin-to-skin contact between mother or father and newborn infant is initiated as early as possible and maintained continuously.
	<b>Parental involvement</b>	Parents are members of the caregiving team and, with individualized support, assume the primary role in the provision of care of their infant, and are active partners in decision-making processes.
	<b>Case management and transition to home</b>	An individual case management plan for each newborn infant is established, in collaboration with the parents, to plan and coordinate needed investigations and procedures, ensure the acquisition of needed parental competencies prior to discharge and to plan follow-up and continuing care.

My Daily Care Plan



My Name is \_\_\_\_\_

My Parents names are \_\_\_\_\_

My Nurse today is \_\_\_\_\_

When my parent(s) come, they are able to:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Sing and read to me     | <input type="checkbox"/> Give me a top and tail wash | <input type="checkbox"/> Measure and warm my milk     |
| <input type="checkbox"/> Do my mouth care        | <input type="checkbox"/> Give me a wrapped bath      | <input type="checkbox"/> Breastfeed me                |
| <input type="checkbox"/> Change my nappy         | <input type="checkbox"/> Take my temperature         | <input type="checkbox"/> Bottle feed me               |
| <input type="checkbox"/> Take me out and hold me | <input type="checkbox"/> Check my tube pH            | <input type="checkbox"/> Give me medications/vitamins |
| <input type="checkbox"/> Do skin to skin         | <input type="checkbox"/> Hold my tube feed           |   |



My parent(s) are coming in at \_\_\_\_\_

About me:

I really like ...

My feeding plan is ...

Next steps to home are ...

- |   |  |
|---|--|
| <input type="checkbox"/> My local hospital is _____       | <input type="checkbox"/> I have had BLS/safe sleep training  |
| <input type="checkbox"/> My birth/GP registration is done | <input type="checkbox"/> I am in a cot, on my back, no rolls |

Thank you for helping to take care of me.

NHS

North West London Perinatal Operational Delivery Network

STEPS TO HOME

You and Your Baby's Journey through the Neonatal Unit from Birth to Home



Baby's Name:  
NHS number:  
Hospital of birth:

Parents as Partners in the Neonatal Journey