Skin-to-Skin Holding Across the Continuum of Infant Care

The InterDepartmental Initiative

Skin-to-Skin Holding, also called Kangaroo Care, occurs when a parent holds an infant clad only in a diaper next to their bare skin. STS is known to provide benefits for the infant and parents including:

- physiologic stability for the infant
- bonding and improved breastmilk production for the mother
- an increased sense of involvement in infant care for the family, especially during prolonged separation

The Infant Care Team

- Labor & Delivery Unit Clinical Staff Susan Crafts RN, MS
- Mother / Baby Unit Clinical Staff Janine Caruso RN, MEd Jan Gutweiler RN, IBCLC Mary Ann Ouellette PNP, MS
- NICU Clinical Staff Susan Young RNC, MS

Skin-to-Skin (STS) Holding practices were evaluated across the areas of infant care – Labor and Delivery (L&D), Mother / Baby Units (MBU) and the Newborn Intensive Care Unit (NICU) – and it was determined that we could be doing more to support this practice.

Skin-to-Skin Holding Aims

- Standardize language when referring to Skin-to-Skin Holding
- Increase parental and staff awareness, and therefore the occurrence, of STS holding for the infant and parent
- Provide STS holding opportunities for all infants

Implementation Interventions

- Standardize the language of STS holding across all infant care areas
 - NICU (Previously, the NICU referred to STS holding only as "Kangaroo Care")
 - MetaVision documentation fields were changed
 - NICU brochure language was changed
 - > L&D and MBU
 - A brochure was developed about STS holding for healthy infants
- Increase awareness and opportunities
 - Antenatal
 - Added as a topic to the drop-in Childbirth classes
 - STS brochure added to prenatal information packet
 - ➤ L&D
 - Uninterrupted Skin-to-Skin Holding during the first hour after birth was instituted for all uncomplicated vaginal deliveries
 - STS posters are displayed in each labor room
 - STS brochure given to patient

➤ MBU

- Standardized signage in all MBU patient rooms
- STS brochure added to postpartum information packets
- Encouraged STS in newborn care classes for all parents
- Focus on rooming-in to promote STS
- STS education added to lactation classes

➢ NICU

- O Initiated Kangaroo-a-thon event to highlight STS holding
- STS brochure added to admission packet for infants of all gestational ages



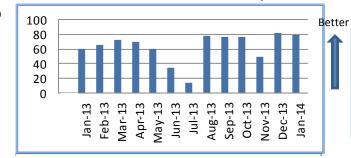




Result and Progress of Skin-to-Skin Holding Initiatives

Skin-to-Skin Performed in L & D Immediately after Birth

L&D



This may reflect lower than actual occurrence due to missing documentation.

MBU

Rooming-in, a care practice where infants remain in the mother's room, is encouraged on the Mother / Baby Units.

This occurs 50% of the time at 0200, & 90% of the time at 1700.

NICU Kangaroo-a-thon (Skin-to-Skin Holding Focus Event)

- 18 parents participated
- 23.5 hours of STS holding were documented over 48 hours

Discussion with parents indicated they enjoyed the focused event and STS holding increased during this time.

Lessons Learned

- Staff are not always aware of STS benefits for older infants
- Standardized language helps standardize practice
- Clearer STS holding criteria needed for NICU
- Parents don't always want to hold their infant STS, or to room-in with their infant
- Practice changes, such as rooming-in, can take longer than anticipated

Next Steps

- Permanently add STS documentation language to newborn flowsheet
- Continue promotion of rooming-in
- Schedule regular Kangaroo-a-thons









For More Information Contact: Susan Young RNC-NIC, MS
NICU Clinical Nurse Specialist
syoung1@bidmc.harvard.edu