

CARE BY PARENT

Objective

- The goal of the *Care by Parent* (CBP) is to simulate the home environment so that independent care can be provided by the family for a set period of time in preparation for discharge home. This program is designed for infants with complex needs or technology dependence, hospitalized in the NICU, who are preparing for imminent discharge. Examples where care by parent may be done include long-term patients who are tracheostomy dependent with or without the need for ventilator, a baby with BPD with oxygen dependence if parents live outside the area of Montreal, or for parents who have expressed anxiety regarding their baby's complex needs and their ability to care for baby appropriately at home.
- The patient's room in the NICU will be reserved during this time but the patient is coded as CBP.
- For CBP, the home equipment and supplies should as much as possible be used in order to better simulate the home environment. This includes the home ventilator, feeding pump, oxygen compressor, milk as it will be prepared at home, and medication on the home schedule, as well as anything else the patient may need.

Eligibility Criteria

- Prior to care by parents, there are key elements that need to be taken into considerations:
 - Infant is intended to go home in the week following CBP
 - No change in the medication or immunization to be done in the 24hrs prior to CBP nor during the CBP period
 - A room (may be on other unit) is to be assigned in discussion with the leadership of the NICU for the CBP. This room must be prepared with the crib, bedding, nearby fridge and supplies. The leadership and nurse in charge of the department where the room is located must be notified of the family's presence (time and date).
 - Parents should have received all the teaching for the equipment, procedures (suctioning, enteral feedings, etc) and for medication administration prior to selecting a date for care by parent. A written schedule for the medications and feedings should be given to parents.
 - Parent must have demonstrated proficiency in emergency measures (ex: CPR)
 - Parents should be given the name of a contact person (eg. Team Leader extension) to reach if any questions or concerns.
 - Parents should be instructed on what to do in case of an emergency (who to call for which type of problem).

Roles and Responsibilities

- Parents
 - Parents are responsible for all care during this time. They are allowed to bring the infant out of the designated room in the stroller with the required equipment to go around the hospital.
- NICU medical team
 - The NICU medical team usually responsible for the child must be aware that this family is doing CBP and must be told their exact location as they will respond to any emergencies.
- NICU nurse
 - A NICU nurse will be assigned and expected to check in (by phone) with the family at the beginning of the shift. This check in must be documented in the chart, and medications signed as 'OOP' (Out on Pass)

Communication with Team Members

- Once the decision is made and a date and time has been confirmed with family, the following stakeholders must be notified:
 - NICU Nursing Team Leader and ANM
 - The Nurse Manager, ANM, and/or nurse in charge in the department where care by parent will be situated.
 - NICU Unit Coordinator
 - NICU medical team that will be on call after hours
 - Respiratory therapist usually responsible for the patient
 - Pharmacy (NICU satellite)
 - Nutrition
 - MCH Nursing Resource Manager
 - Social Worker (if necessary)

Medical Orders

- A *Care by Parent* order is to be written in the infant's chart with the following information:
 - Date and duration of CBP
 - Unit and room number where this is to be carried out
 - Out on pass medication prescription
 - Information given to parents - who to call for what (eg. RT for ventilation mechanical issues and TL for other issues)
- The treating team should follow the *Care by Parent* checklist provided in the Annex in order to ensure all steps are complete.

Follow-up After Care by Parent

- Once the CBP period has been completed and the patient comes back to the NICU, the RN assigned to the patient will:
 - Complete a head-to-toe assessment, a weight, and vital signs
 - Review all the medications that were given with the family
 - Review how the baby tolerated feeds
 - Review sleeping patterns and any other issues that arose.
 - Ensure medical team is informed of patient's return and of any issues that arose
 - Chart information received from family, and any interventions, in nursing notes

Annex – Care by Parent (CBP) Checklist

Eligibility Criteria

- The baby is medically stable and discharge planning is ongoing
- The team has discussed care by parent concept with the parents
- The baby has had no changes to plan of care in the last 24 hours prior to the care by parent
- Parents have completed the emergency training (CPR)
- Parents have been taught and demonstrated independent proficiency in all aspects of the baby's care including feeding, respiratory management and medication administration

Organization

- Date and time has been scheduled for CBP
- The location (room) for CBP has been identified and communicated to all stakeholders
- Parents have the necessary equipment and supplies that will be used at home
- Pharmacy has met the parents and the home schedule for medication administration has been reviewed with parents
- Nutritionist has met the family and teaching has been completed for all feeding schedules and recipes. Enough formula/milk and additives are available for the period of CBP
- Parents are aware they need to prepare for staying overnight (bring pillow, blankets, toiletries)
- NICU nurse will prepare the room on designated unit – ensure bed made with linen, show parents fridge in parent lounge

Communication

- Team members are made aware of CBP, date, location and responsibilities
- Parents understand what to do if situations arise and have written instructions who to call- RT, MD, nursing and know where the emergency bell is in the unit
- Nurse had been assigned and phone numbers for emergencies given to parents
- Medical team has charted all information given to parents prior to CBP

Medical Orders

- CBP is prescribed in the orders, including:
 - Date and duration of CBP
 - Unit and room number where it will occur
 - Out on pass medication prescription
 - List of phone numbers for emergency or questions (RT-RN)