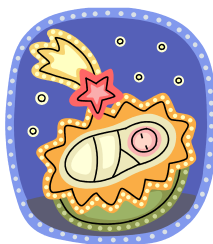


Neonatal Intensive Care, CUMH.



Neonatal Intensive Care is a specialist module in which you will spend 3 weeks of your second or third year. Throughout this placement we will encourage you to take advantage of your time here, aim to become a member of the unit's team, build up a reciprocal relationship with your allocated preceptor, identify learning opportunities and utilise the various resources available.

The aim of this clinical placement is to link the theory you have learned in college with nursing/midwifery practice. You are expected to observe and participate in, with your preceptor the delivery of holistic, individualised patient care. On the first day of placement it is advised to arrange a date and time with your preceptor for your initial, mid and final interviews'.

Student midwives should ensure to study the practice learning outcomes for this specialist placement. These are available in the Midwifery Educational Folder, or from your CPC. As you will not be returning to NICU during your midwifery training it is imperative that you get as much exposure too the care of the sick neonate as possible.

Mission Statement

'Women, babies and their families are the centre of our service as we strive for excellence and innovation'.

Ward Information

The Neonatal Intensive Care Unit (NICU) is located on the ground floor of CUMH.

The NICU consists of approximately 32 special care cots, 6 intermediate care cots, and 6 intensive care cots. Access is swipe only for staff. Midwives/ nurses stations' are located in each area. Only parents and grandparents are permitted to visit infants in the neonatal unit. Strict visiting guidelines must be adhered to.

Babies are admitted to the neonatal unit for a variety of reasons. Many are born prematurely and require careful observation and monitoring. Others, such as full-term newborns, may have health problems that require treatment, observation or surgery.

Approximately 60,000 babies are every year in Ireland, of these around 3,000 babies are born prematurely, that is, before 37 weeks gestation..

On entering the NNU you will see a lot of equipment, incubators, ventilators, CPAP drivers, cardiac&SAO2 monitors, infusion pumps and phototherapy units. You may hear a lot of different noises. The equipment is designed to keep babies warm, monitor many of their vital signs, treat jaundice and support breathing if necessary. As a supernumerary student, it is very important that you remember not to adjust any of this equipment without supervision!!!!

Where to find things

It can be very stressful when you are told to get something, but you don't know where it is. Please do not worry, just take this opportunity to ask any of the staff to show you. It can be very frustrating when things are moved and are not in their usual place, so remember to always put things back to where you found them. On your first day of clinical placement you will be orientated to the unit.

Hand Hygiene



Hand-washing is essential upon entering the unit. Our purpose is to prevent infection. Hand washing is one of the most effective ways of preventing infection and safeguarding the babies (Pediatrics, 2004). Hand hygiene should be practiced routinely and thoroughly, even when gloves are worn, and after their removal. It is important that you are familiar with the use of "standard precautions" for both the safety of the women and babies in your care and your own safety. A sink is located at the entrance of the unit, and there is an ample supply of sinks located throughout the unit. Alcohol rub can only be used when hands are socially clean. Nails must be kept clean and short and jewellery should not be worn.

Important telephone numbers

IMPORTANT TELEPHONE NUMBERS:

(Internal extension numbers in bold text)

Cork University Maternity Hospital	021 4920500
Ward 2 East	021 49 20634
Ward 3 East	021 49 20661
Ward 2 South	021 49 20627
Ward 3 South	021 49 20650
Ward 4 South	021 49 20688
Birthing Suite	021 49 20547/20548/20544
Neonatal Unit	021 49 20514/20515/20516
Admissions/Emergency Room	021 49 20595/20596/20545
Day Services	021 49 20563/20562

Multi-disciplinary Team on this unit includes:

- Clinical Midwife Manager 3 (C.M.M III)
- Clinical Midwife Manager/Nurse 2 (C.M.M/C.M.N II)
- Clinical Midwife/Nurse Manager 1 (C.M.M/C.N.M I)
- Staff Midwives/Nurses (who work full-time, part-time or flexi time and rotate between day and night duties.
- Clinical Placement Co-Ordinator
- Student Midwives (post-graduate and under-graduate students)
- Paediatricians"/ Neonatologists'/ Ophthalmologists
- S.H.Os' / Registrars
- Physiotherapists/ Radiographers/Dietitians/ Pharmists'/ Occupation therapists'
- Neonatal social workers
- Household Staff
- Ward clerks
- BSc General/integrated Students on their Midwifery Placement.

Learning Resources Include:

- Policies, guidelines and procedures (Badger System)
- Clinical Placement Guidelines for BSc Midwifery Students
- Midwifery/ Nursing Practice Education Folder
- Parent Information Booklets
- An Bord Altrinais Guidelines
- British National Formulary for Neonates (B.N.F 2008)

Some of the Frequently found conditions in NNU



Prematurity.

Respiratory Distress Syndrome

Transient Tachypnoea of the Newborn

Jaundice of the newborn (Physiological and Pathological)

Neonatal infection/ sepsis

Intra Uterine Growth Retardation

Small for Dates

Trisomys' (For Example, Downs Syndrome, Edwards Syndrome, Patau Syndrome)

Congenital / genetic anomalies of the newborn.

Birth Injuries"

Cardiac Anomalies

TERMS RELATED TO PREMATUREITY

Premature infant	born before 37 weeks gestation
Low birth weighs infant	birth weight less than 2,500
Very low birth weigh infant	birth weight less than 1,500
Extremely low birth weight	birth weight less than 1,000
Chronological age	based on date of birth
Gestational age	Age of baby estimated from time of conception
Corrected age	Chronological age adjusted according to how early The baby was born.

Changing Facilities

Changing Facilities are available in ground floor. Lockers are available. Staff and students are advised not to bring valuables to work.

Dress code

Please refer to hospital policy and practice placement booklets for uniforms of staff and student uniforms. Please ensure Uniforms are clean and tidy and all times. Identification badges and Security i.d must be worn at all times. Jewellery should not be worn. Please abstain from chewing gum while on duty.

Shift and Break Times



The staff on this ward usually work 12 hour shifts. Staff on Night Duty also work 12 hour shifts. Some Students may work other shifts E.g. 8am-2pm or 2pm-8pm. The off-duty rota will be available in the Midwives station. Student allocations and off-duty will also be kept with the off-duty rota. Ward report commences on or before 7:45am so it is imperative that you are at the midwives station punctually. Off duty is completed by CMM, and it is completed so that student midwives work alongside your preceptor. Requests therefore can only be accommodated in a "at need" basis.

All shifts include a 'break', and it is important that you take your breaks.

Break times include 20 minutes for morning break, 30 minutes for lunch and 20 minutes in the evening. The main canteen is situated in the CUH campus which is accessible via a link corridor located near the main staff changing facility on 1st Floor. Alternatively you can use the main entrance at CUH and ask for directions at the reception desk. There is a staff dining area on 4 East. This is Accessible using your ID swipe card. This room has a staff fridge, microwave, toaster, kettle, vending machines, coffee machine, TV, Dining and Lounge area. Alternatively you can use the "Coffee Station" Café located on 1st floor CUMH.

Hand Hygiene



Hand-washing is essential upon entering the unit. Our purpose is to prevent infection. Hand washing is one of the most effective ways of preventing infection and safeguarding the mothers' and babies (Lancet, 2000). Hand hygiene should be practiced routinely and thoroughly, even when gloves are worn, and after their removal. When you are dealing with body fluids gloves should be worn. It is important that you are familiar with the use of "standard precautions" for both the safety of the women and babies in your care and your own safety. A sink is located at the entrance of each room, and there is an ample supply of sinks located throughout the unit. Alcohol rub can only be used when hands are socially clean. Nails must be kept clean and short. False nails are not permitted.

Sick Leave



Undergraduate Sick Leave

Sick leave must be reported to the CPCs, ward and Midwifery Management prior to the beginning of the shift. It is imperative that students remember that **ALL** sick leave must be repaid, prior to entering the following year. Please adhere to UCC and hospital guidelines for BSc in Midwifery with regard to sick leave.

Post Graduate Sick Leave

Students are required to **directly** notify your immediate manager; (CMM/midwife in charge, allocated ward and Clinical Coordinator) that you are unable to attend work. Any absence from practice placement or block must be reported by phone as soon as possible. Please make every effort to give notice of sick leave as changes are required to provide adequate cover in the clinical area. The night superintendents will deal with this between 20.00- 08.00hrs. It is not acceptable to get a family member or friend to contact the hospital. Please refer to hospital orientation booklet for further information re hospital sick leave policy.

Preceptors/ Associate for students

Each student midwife will be allocated a midwife preceptor during their clinical placement on this ward. Your preceptor will have completed a teaching and assessing course/ preceptorship course that enables them to support, guide and assess and supervise students in the clinical practice setting and assist students learn the practice of midwifery.

Where possible you will work alongside your preceptor and so it is important that you feel you can approach ** at any time to discuss your learning needs while you are on this ward. Therefore off duty request s can only be accommodated at a "at need" basis. Your preceptors name will be next to student name on the off duty. Please identify yourself to your preceptor on the first day of clinical placement.

While you are on this ward, you will work with other midwives, which will provide you with valuable knowledge and experience.

Clinical Learning Outcomes Handbook

It is important that prior to a placement, students should study their Clinical Learning Outcomes handbook to identify the elements and skills they would like to achieve exposure/participation/identification or internalisation in. You can then discuss these with your preceptor and CPC at the commencement of placement interview.

Student Midwives in accordance with An Bord Altrainais, must also record experiences in a Clinical Practice Experience Booklet .2 East will provide you with ample opportunity to record antenatal & postnatal examinations.

Student tip don't wait until the end of your placement to get your clinical learning outcomes handbook signed off. Do it as you go along. Be persistent, and ensure you have your booklet with you every day.

Reflective time



REFLECTION! Reflective practice is an essential facet of learning from practice for both students and midwifery staff. It enables us to utilise what we see and do during clinical practice in a way which links theory and practice. This encourages us to examine and explore behaviours, thoughts, feelings and attitudes about clinical experiences. Undergraduate students are allocated 5 hours of reflective practice per week of reflective time, in addition to practice placement hours. All students should aim to complete reflective accounts during practice placement, on competencies which are achieved in midwifery practice, using the stages of Gibbs Cycle as a framework. This enables learning to occur not just from a theoretical perspective, but also from that of experiential learning. *The student should aim to complete one reflective account per week.*

What to do if you have a bad day!



Please don't be afraid to approach your preceptor or another member of staff if you are feeling upset or unhappy during your time in 2 East. There are many reasons that might trigger these feelings, but remember it is most important that you tell somebody. Please don't hesitate to contact your CPC.

