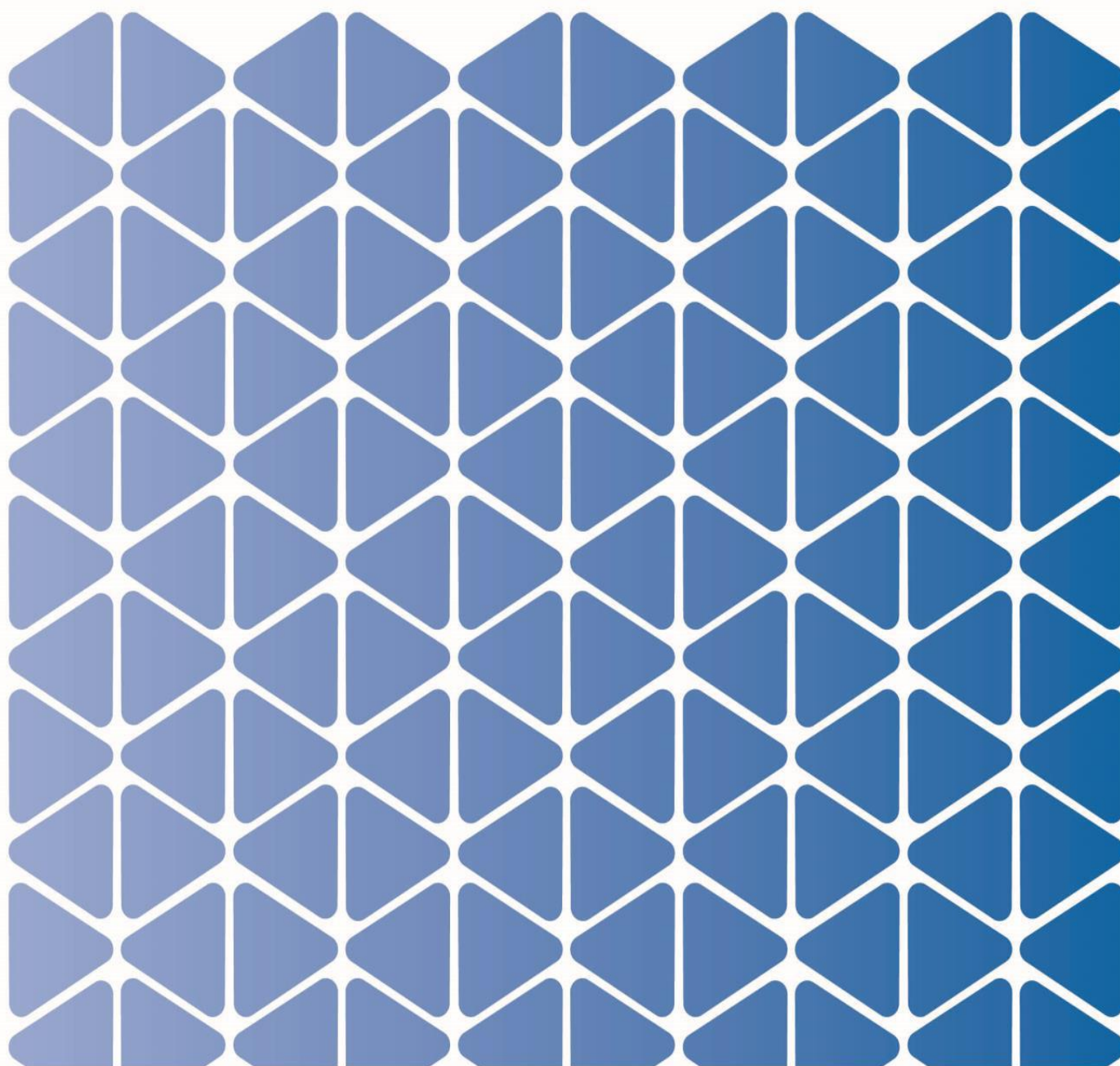


PARENT INFORMATION**SUPPORTING YOUR BABY'S
DEVELOPMENT****30-32 WEEKS GESTATION**

Congratulations on the birth of your baby. Having a baby in a Neonatal Unit can be frightening but this leaflet will tell you a little about what to expect from your baby at this age and, importantly how you can help their development.

It is not designed to replace information you will get from your baby's doctors, nurses and therapists. If you have concerns or questions about your baby's development please talk to the neonatal staff.

All babies are individuals and each one will develop at a slightly different rate. Your baby's development will be affected by gestation at birth, how much they weigh, and by how well they are. Each baby's genetic make up will also play a part in how they develop and mature. In the womb the baby will experience a variety of sensations- some pleasant, some not so pleasant. The baby will move around in the amniotic fluid and be able to get hands to mouth. They will hear their mother's voice and other sounds from outside. The baby will sleep and be active according to mother's daily pattern of activity.

The newborn preterm baby has to quickly accommodate their new surroundings. These surroundings affect their behaviour and development and it is important that we recognise how your baby reacts and how we can help their development to progress.

This is a time when your baby's brain is growing at a very rapid rate, it is important that we all do and how we do it, is as developmentally appropriate as possible.

Your baby is 30-32 weeks gestation (8-10 weeks early)

At this age your baby's senses are very immature. Because your baby is so small, care will be very specialised. Your baby needs gentle touch, dim lighting and as little noise as possible.

The neonatal Unit staff will help and support you to care for your baby. Your baby's nurse can advise you on how best to touch or handle them. Ask if you need help or you don't understand what is happening.

Touching and holding

You may see some smooth movements as your baby moves. Their legs will generally be flexed (bent) when resting. Your baby's skin is sensitive to touch.

What you can do to help

Speak softly to your baby before you touch them. Hold your baby still rather than rocking them. Try not to stroke, as very small babies do not like this. They may prefer a still touch as it is less stimulating. Keep your baby wrapped and close to your body as you move them in or out of the incubator. Kangaroo Care otherwise known as skin-to-skin is

recommended at this stage, staff will help you to have long periods of kangaroo care with your baby.

Feeding

You may start to notice your baby 'rooting' and waking up before a feed is due.

Sucking and swallowing will start to become co-ordinated. Your baby may be starting to lick or nuzzle at your breast, but will still have feeds through a tube. They will be ready to suck a dummy or your clean finger during tube feeds. Hold your baby while they are being tube-fed.

What you can do to help

Begin collecting your breast milk as soon as you can so that it is ready for your baby as soon as they need it. Providing breast milk is one of the best things you can do for your baby. You can ask your midwife or your baby's nurse for help on how to express. Being near to your baby may help you to express, you can do this beside the cot.

Having Kangaroo care as often, and for as long as possible, will help your milk supply.

Sleeping

It is quite difficult to tell whether your baby is awake or asleep. They will start to show brief 'alert' periods. Deep sleep develops at about 30 weeks and periods of quiet alertness at around 32 weeks.

What you can do to help

Let your baby have periods of undisturbed sleep. Try not to wake your baby if they appear to be sleeping. Protect your baby's eyes from the light and try to avoid loud noise. Your baby will like to hear your voice if you speak softly. Try to do cares and interact with your baby during these awake periods.

Positioning

Your baby's movements may be jerky, especially when they are moved quickly and they may have difficulty curling up. This is tiring and uses up energy needed for growing.

What you can do to help

Your baby needs to have their hands close to his face and their legs curled up- like they were in the womb. Move your baby slowly and avoid sudden movements. Your baby should have a nice deep boundary around them so that they can have something to snuggle into. This boundary may be a rolled blanket, a 'bumper' and/or a fabric 'nest'. Your baby will settle and rest better if they are well- positioned. When your baby is lying on their side, leave a gap in the boundary near to their face so that they can 'look' out.

Nappy changing/Cares

Nappy changing can be disturbing for babies of this gestation.

What you can do to help

Try to provide a boundary when you change your baby's nappy. Move your baby gently and slowly and do not lift their legs too high. Provide still touch and a quiet voice. Be prepared to stop if your baby looks stressed.

The nurses will show you how to gently wash your baby, and clean their mouth using breast milk, if available.

Social

Your baby may be ready for short periods of social interaction at this stage. They may begin to be briefly alert or be 'still' when they hear your voice. If their eyes are shaded from the light they may briefly 'look' at you.

What you can do to help

Allow your baby as much as peace and quiet as possible. Talk to your baby when they are awake. You may like to sing to them or to read from a book. Keep still if your baby is looking at you as they may find it difficult to follow a moving object.

Be patient and watch your baby when they are calm and when they appear to need rest. You will soon learn to recognise your baby's individual cues. Don't rely on the monitors- learn to understand your baby!

For more information, see the Bliss Baby Charity website at: -

www.bliss.org.uk

Email: hello@bliss.org.uk

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.