



The ACoRN Programme: Establishing a Neonatal Developmental Inpatient Ward Round at the National Maternity Hospital

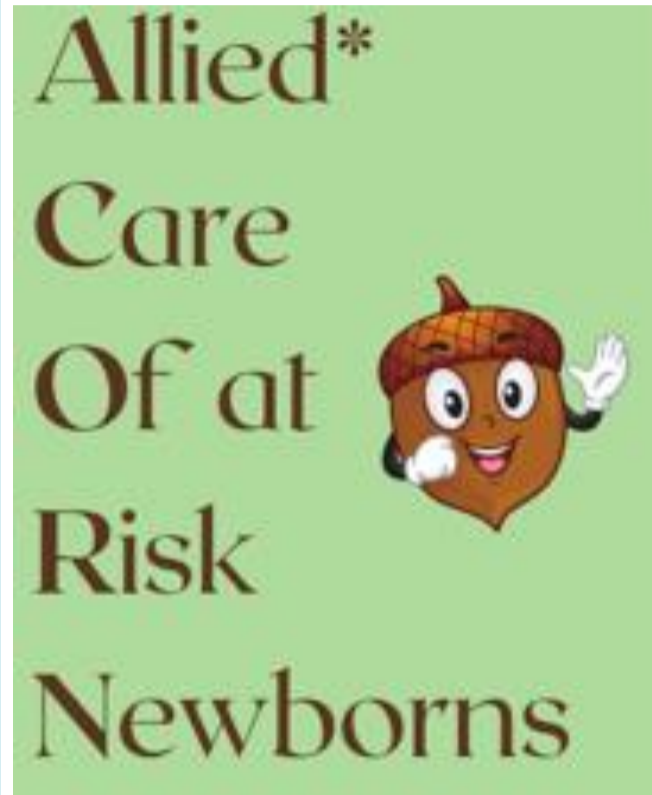


Jo Egan¹, Zelda Greene², Roisin Gowan³, Roberta McCarthy³, Montse Corderroua⁴, Ciara Buggy⁵, Eithne Lennon¹, Marie Slevin⁶
¹ Physiotherapy, ² Speech and Language Therapy, ³ Nutrition and Dietetics, ⁴ Pharmacy, ⁵ Medical Social Work ⁶ Developmental Psychology

BACKGROUND

Babies born at early gestation and/or low birthweights are at increased risk for developmental delays at age 2 and beyond. Using developmental supports in NICU can reduce the impact of this, improving longer term outcomes.

In 2022 the neonatal allied health team structured an approach to developmental assessment and management in the NICU called ACoRN: **Allied Care of at Risk Newborns**. Developmental progress and outcomes will be tracked for these babies for comparison at age 2 with pre 2022 age-matched cohorts.



The National Maternity Hospital
Vita Gloriosa Vita ~ Life Glorious Life



Welcome to the ACoRN Team
(Allied Care Of at Risk Newborns)

Supporting your Baby's Development
'Growing Together'

Growing Together

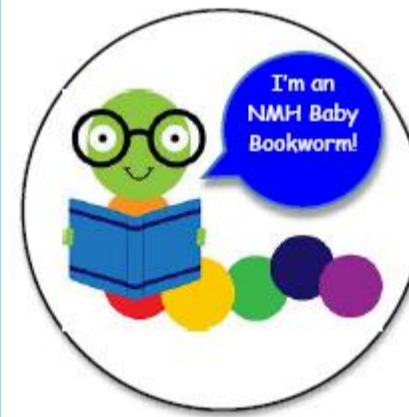
RESULTS

From 17 Feb To 20 Dec 2022

- 35 developmental ward rounds took place.
- 44 high-risk babies were included, 18 were reviewed more than once.
- Ward round attendance varied depending on staff availability with Speech & Language Therapist, Physiotherapist, Pharmacist and Dietitian attending most rounds.
- Standardised assessments included Brazelton NBO, GMA, LAPI, IPAT, MSK, NOMAS, NEOEAT, general communication observations, growth and nutrition assessments.
- Bespoke leaflets on kangaroo care were well received by parents.
- Staff reported improved confidence and earlier signposting of developmental concerns.

AIMS

1. To establish a weekly inpatient ward round focusing solely on development for the at-risk infants in the neonatal unit.
2. To capture activity and attendance at the ward round.
3. To establish a structured inpatient assessment protocol for these infants.
4. To develop a supportive information pack for parents.



METHODS

All stable infants in the NICU born < 30 weeks and/or weighing <1500 g at birth were eligible.

A range of standardised assessments were used for motor skills, feeding, communication and nutrition.

Educational supports were developed with the wider neonatal team and the NMH Foundation supported a number of initiatives.



CONCLUSION

This initiative has progressed team building and co-working on the neonatal unit at NMH.

At-risk infants are identified earlier and engage with the allied health developmental therapy team earlier. Standardised care is being developed within the team.

NICU staff have been supportive of the initiative. Informal feedback from parents is positive. Structured parental feedback will be sought to drive further service development.

Staffing and the administrative burden is challenging on overstretched services.

Longer term 2 year neurodevelopmental (Bayley) outcomes for this initial cohort will be compared with age-matched cohorts pre 2022 to assess impact.