



Transitional Care

Welcome to Transitional Care for your family.

This leaflet is designed to give you more information about what transitional care is and will hopefully answer some of the questions you may have. If you have further questions, please speak with any member of our team, and we will guide you to the person with the information you require.

What is Transitional Care?

Some babies are born “late pre-term” (at 34 - 36⁺⁶ weeks gestation), maybe with a low birth weight or requiring enhanced support after delivery. There are many reasons a baby may need a little extra support, such as help with feeding, keeping warm, or maintaining a normal blood glucose. They might require treatment for jaundice, be on antibiotics or they may have other reasons for needing us to give them a little extra support.

Some babies who were born before 34 weeks may have now returned to our hospital to spend some additional time receiving care from us before final discharge home.

Wherever possible, we always try to keep the family and baby together, and we aim to avoid unnecessary separation.

What are the benefits of Transitional Care?

- Optimises attachment and bonding with your baby.
- Encourages ongoing skin-to-skin contact with your baby.
- Helps you to be responsive to your baby’s needs and practice responsive feeding.
- Gives you direct access to feeding support when required and improves the prospects of you successfully breast feeding your baby if that is the feeding method you choose.
- Allows access to nursing/midwifery/medical support if required.
- Provides an environment for family-centred care.
- Reduces the overall time of your baby’s stay in hospital.
- Increases your confidence in caring for your baby.

What to expect from the people caring for you and your baby

We will:

- Support you with skin-to-skin contact and early feeding where possible.
- Support responsive feeding.
- Monitor your baby’s vital signs and blood glucose levels.

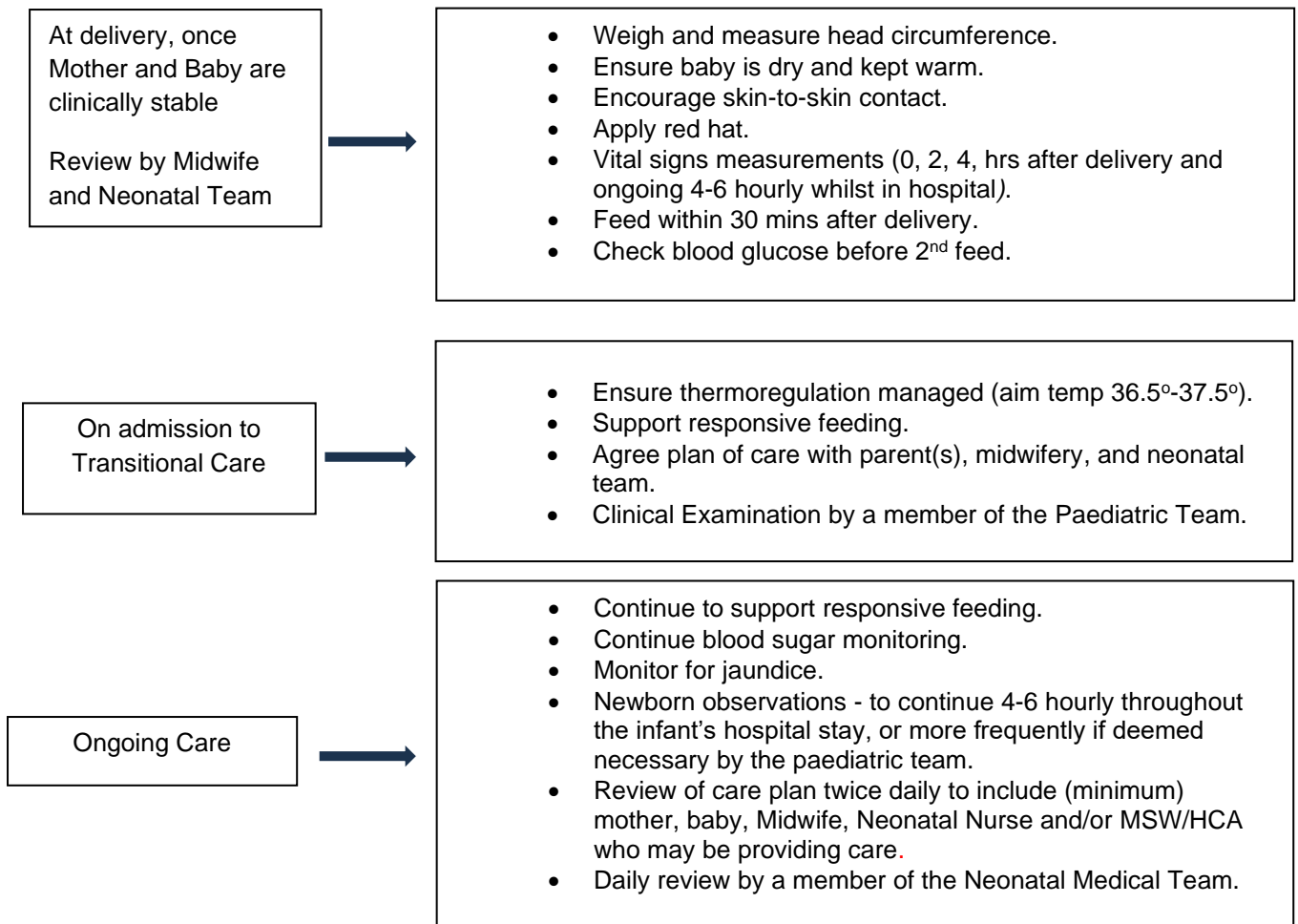
- Provide support and advice about how to make sure your baby maintains their temperature (thermoregulation).
- Respond kindly, compassionately, and professionally to the needs of you and your baby.
- Provide a daily care plan together with the midwifery and neonatal teams and yourself.
- Make you aware of who is caring for you and your baby from the midwifery, support worker and neonatal teams on a every shift.
- Provide at least one Consultant Paediatrician Review during your baby's stay.
- Listen to and be responsive to your concerns.
- Document all your baby's care on BadgerNet so you can read their notes.

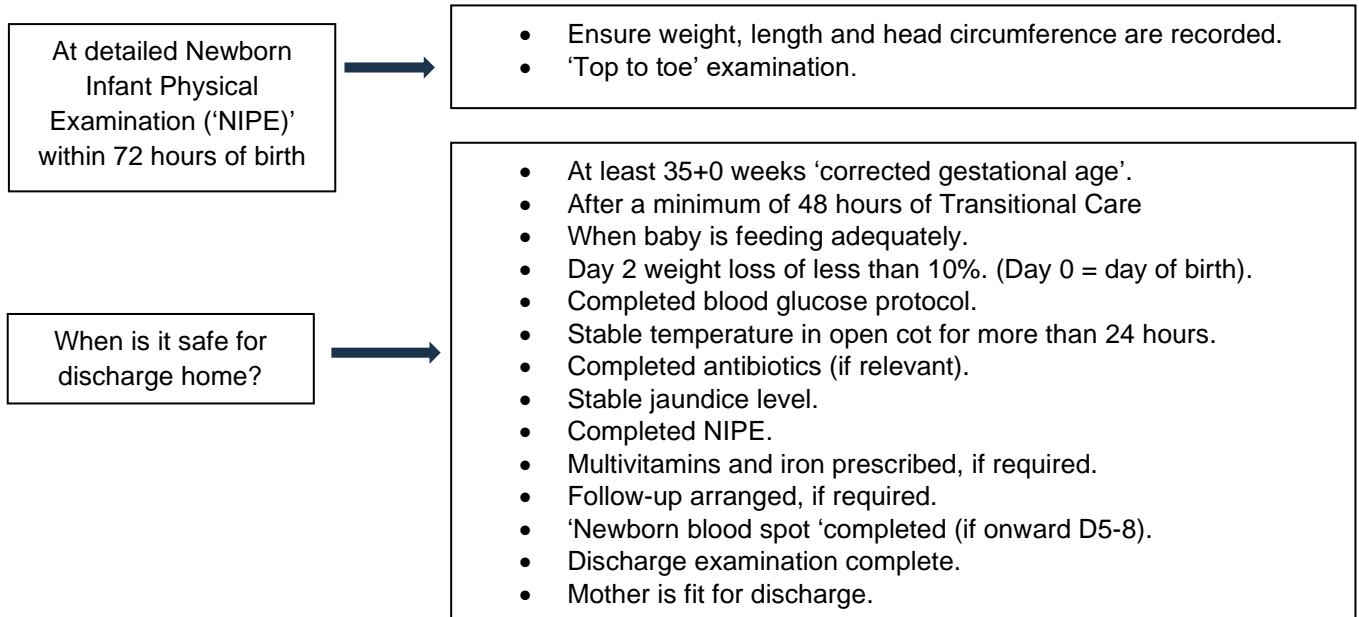
What help and support do we need from you?

Transitional care works best when you are present with your baby throughout their hospital stay, with the baby in your room. We ask that you are available to respond to your baby's needs, including keeping them warm (especially with skin-to-skin care), responsively feeding, meeting their hygiene, rest and sleep needs.

It is really important for you to be involved in decision making around your family's care. This includes being present on ward rounds and during the daily midwifery and neonatal care planning for your baby.

Below is an example of how your transitional care journey may look





Contact/Further information:

We hope that you have found this information useful. If you have any questions or are worried about anything, please speak to any of the Dorset County Hospital Staff, and they will be happy to arrange for the appropriate person to speak with you.

About this leaflet:

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If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email pals@dchft.nhs.uk



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