



Infant- & family-centred developmental care



Supportive sensory environment

The hospital **sensory environment** is adjusted to the infants' sensory expectancies and perceptual competences.



Family support services

The family receives care in an environment where their **socioeconomic, mental health and spiritual needs** are supported.



Management of the acoustic environment

A **managed acoustic environment** reduces stress and discomfort for infants.



Family access

Parents (and substitutes designated by the parents) have **continuous access** and are able to remain with the infant throughout the **24 hours**.



Support for parental-infant bonding

The fostering of early bonding between parents and their newborn infant is pursued through strategies which promote early contact for the parent-infant dyad.



Clinical consultation and supervision for healthcare professionals on supporting families

Healthcare professionals receive **counselling and regular clinical supervision** in **communicating** with and providing **emotional support for parents**.



Very early and continuous skin-to-skin contact

Skin-to-skin contact between mother or father and newborn infant is initiated as early as possible and maintained continuously.



Parental involvement

Parents are members of the caregiving team and, with individualised support, assume the **primary role in the provision of care of their infant**, and are active partners in decision-making processes.



Education and training for infant- and family-centred developmental care (IFCDC)

Infant- and family-centred developmental care (IFCDC) **competence** is ensured by providing **formal education and recurrent training** for hospital and unit leadership, healthcare professionals and other staff working or visiting the neonatal unit.



Case management and transition to home

An individual case management plan for each newborn infant is established, in collaboration with parents, to plan and coordinate needed investigations and procedures, ensure the acquisition of needed parental competences prior to discharge and to plan follow-up and continuing care.

