



Bliss Family Friendly Accreditation Scheme

*Bringing consistent high quality care and practice onto
the neonatal unit*

Bliss

for babies born too soon,
too small, too sick



Outline of talk

- Why accreditation?
- Launch of BFFAS
- What is it?
- What it means for you?

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Why Accreditation?

Bliss believes:

- Babies should have the same rights as anyone else
- The voices of babies and families must be heard
- Driving quality and innovation in the NHS that will deliver improved care for premature and sick babies and their families
- We achieve more by working together with individuals and organisations
- We must always be able to demonstrate the difference we make to the lives of babies and their families

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Why Accreditation

- To help you to help families
- Deliver consistent care
- To empower health professionals
- Enable you to make changes
- Better relationships with parents

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What is it?



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What is Accreditation?

Registration

Completion of Audit

Working towards accreditation

Assessment

Accreditation

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What is accreditation?

Audit

- Self assessment
- Setting action plans

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What is accreditation?

Working towards accreditation

- Lay assessor visit
- Records and data
- Principle by Principle
- Time for change
- (Bliss Quality Improvement Programme)



What is accreditation?

Assessment

- 90% green in each Principle
- Request an assessors visit

Accreditation

- Three years
- Logo and plaque



Resources

- Criteria Booklet
- Best Practice Bank
- Posters
- Audit Tool
- Support in working with parents

Bliss Baby Charter Principle 1
Every baby should be treated as an individual and with dignity, respecting their social, developmental and emotional needs as well as their medical and surgical needs.

Objectives

- All parents are able to have regular private time with their baby.
- Care provision is designed to minimise the stress of the NICU environment.

Outcomes

- Babies' long-term developmental outcomes are enhanced.
- There is a strong attachment between the baby and their family which is actively supported by staff on the unit.

Green (G) - Unit fully meets criteria	Amber (A) - Unit partially meets criteria, more work needs to be done	Red (R) - Unit does not currently meet any aspect of the criteria	Outcome of current practice and / or requirements for ACTION PLAN		
ref	Summary of criteria	ref	G	A	R
Standard 11 - Dignity and privacy					
11A	All babies are referred to by their given name	NPS 211			
11B	All parents have unrestricted access to their baby, unless individual restrictions can be justified in the baby's best interest	NCS 16, 247 TAS 13 JAPN 61			
11C	Parents are offered privacy when feeding their baby, during skin-to-skin care and when clinical procedures are taking place				
11E	Parents have the opportunity for private time with their baby in a separate room or cot side with screens, on their baby's condition allows				

Bliss 2015 - Baby Charter Audit Tool 9



What this means to you?

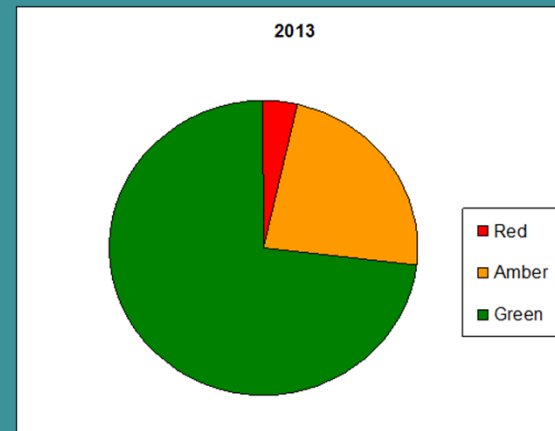
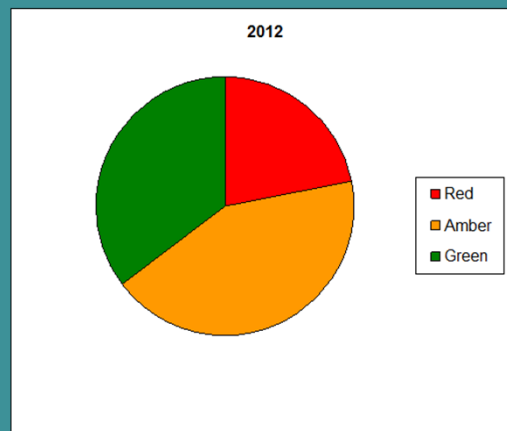
- Culture of Improvement
- Health professionals can make a difference
- Parents can make a difference
- Philosophy of Improvement
- Positive attitude

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What difference does it make?

- Leeds - 35% green in 2012 to 77% green in 2013





"I am so grateful that Bliss provided the means by which we could objectively assess our service and improve it. The re-audit clearly proves that it works and i am really proud of all the hard work everyone in Leeds has put into making our service SO much more baby-centred!"

Liz Mckechnie, Consultant Neonatologist,
Leeds General Infirmary

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