

A Provider Education Model for Supporting Caregivers and Vulnerable Infants During the 4th Trimester

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Background: Infants and their families who transition from NICU to their communities are typically followed by early intervention and/or public health nurses. Medical complications, invasive procedures and many unknowns during hospitalization for both infants and their families result in physical, mental and behavioral health issues that require appropriately informed mental health supports. Currently there is little mental health information and/or approaches in basic educational programs for providers that address the developmental and mental health issues of newborns and young infants. The BABIES and PreSTEPS model has been developed to provide providers in the community with appropriate education to address mental, physical and developmental health issues of this vulnerable population and their families.

Content:

Data will be provided from surveys of providers in four states (AK, CO, IN and AZ) indicating a lack of specific training for physical, developmental and mental health assessment and intervention for fragile newborns and their families. Description of the BABIES (Biophysiologic, Arousal and Sleep, Body Movement, Interaction with others, Eating and Soothing) and PreSTEPS (Predictability and continuity, Sleep and arousal supports, Timing and pacing, Environmental modification and Soothing strategies) model will be presented to include assessment and intervention guidance for supporting fragile newborns and their parents in the fourth trimester. Infant Mental health Diversity Tenets and Reflective Practice best practices are used in the year long learning collaborative. Descriptions of state wide provider practice outcomes as a result of engaging in the educational program will be provided.

Lessons learned: A mental health informed practice including reflective opportunities are essential to best support fragile newborns and young infants and their families in the fourth trimester. Although essential to the recovery of infants and parents after hospitalization, providers do not have the educational background to incorporate mental health approaches into their currently utilized intervention strategies. Parents are the best supporters of regulation in the fourth trimester, an essential developmental task of newborns. Support for both providers and families during this vulnerable time is essential.