Splish Splash Swaddle Bath (Delayed Swaddle Immersion Bath)

PURPOSE

Determine if a delayed swaddle immersion versus sponge bathed newborns cry less, improve parent satisfaction, as well as decrease steps and time for staff.

Sponge Bath

Sponge bathing is a common practice for bathing newborns in hospitals. It is often conducted at the time of birth or within a few hours after birth. It is the act of bathing using a sponge or washcloth. This form of bathing is stressful for the newborn.

Delayed Swaddle Immersion Bath

A delayed swaddle immersion bath is bathing the baby after 24 hours while the baby is swaddled in a blanket. The baby swaddled in a blanket are immersed together into a tub of water. The water covers the baby and blanket up to the baby's shoulders. Each limb is then individually unswaddled, washed, rinsed, and reswaddled. The immersion in water and the swaddling of the baby during bathing reduces stress.

Benefits

- Offers an evidenced based approach of promoting an environment to decrease stress while facilitating a developmentally supportive care experience for the newborn and family
- Decreased incidence of hypoglycemia
- Reduced risk of infection, no differences in umbilical cord healing or further harmful bacteria colonization
- Vernix caseosa protects skin
- Resident flora strengthens the skin's first defense (acid mantle) by producing anti-bacterials which compete and prevent colonization with harmful bacteria
- Improved bonding and parent satisfaction
- Improved breastfeeding
- Improved temperature control
- Parents can enjoy bathing their baby
- Decreased weight loss
- Decreased jaundiced
- Decreased crying of the newborn





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METHOD-METRICS



The LEAN process was employed for evaluating the current state of the sponge bath and the target state of delayed swaddle immersion bath on the post-partum unit. The metrics of time, steps and crying were selected. Patient delighters were targeted to improve the patient experience by offering the swaddle immersion bath and the reduction of "crying" of newborns. To support the staff the LEAN process of a spaghetti diagram was selected for collecting staff "steps" as one of the baseline data points. The metric of "time" was also selected to evaluate the impact on staff time. Comparison of time in minutes of sponge and swaddle immersion baths provides a data point for staff regarding their time investment.

Results

The observations and results achieved during this project correlate with what other studies have established regarding the swaddle immersion bath. The data collection showed a reduction in crying which resulted in more contented babies and parents. Increased efficiency for staff and patients was achieved. The improved efficiency was demonstrated by the decrease in time and steps to conduct a bath.

The target state outcome for the delayed swaddle immersion bath resulted in a decrease of time, steps and crying in comparison to the sponge bath.

- Time: An average of 11.9 minutes per swaddle bath. A decrease of 3 minutes compared to the sponge bath.
- Steps: An average of 1.29 steps per swaddle bath. A decrease of 1.71 steps compared to the sponge bath.
- Crying: A decrease of 55% during a swaddle immersion bath compared to the sponge bath. During the swaddle immersion bath 38% of the newborns cried compared to 93% of newborns crying during their sponge bath.



This quality improvement illustrated the benefits of implementing an innovative evidenced based practice of the delayed swaddle immersion bath for the newborn. Swaddle immersion bathing is a delighter for parents, promotes bonding with their newborn, supports breastfeeding, improves newborn temperature stability and is calming for the newborn. It is recommended to implement in the clinical setting. The target audience is Maternal/Child care givers. Evidence shows there is a gap noted in knowledge skills and practice of these caregivers that validates the need for this learning activity. The observed benefits of the delayed swaddle immersion bath are motivating for staff to embrace the practice by offering this research based, developmentally supportive care for the term newborn patient population.

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IMPLICATIONS FOR PRACTICE

