1.0 OBJECTIVES

1.1 The purpose of this policy is to define the process for the safe use of infant soothers, in consultation with the infant/child's family.

2.0 BACKGROUND

2.1 Sucking behaviors are noted early in fetal life. Non-nutritive sucking (NNS) has been noted as early as 4 ½ months gestation and may be considered part of the normal growth and development of infant/children by providing comfort and oromotor development. Although more research is needed to further delineate the benefits of NNS, there is no research suggesting that this is a harmful practice. Given the long history of the use of NNS to console infants, appropriate soothers will be made available and offered to patients, at the discretion of the family (see NICU Policies and Procedures, Psychosocial: Soothers).

3.0 DEFINITIONS

3.1 Non-nutritive sucking: a natural reflex of a fetus or newborn usually resulting in sucking of hands and/or fingers.

4.0 POLICY

4.1 The use of a soother shall be made in collaboration with the infant/child's family. Their decision is to be honored and a notation shall be made on the care plan to reflect their wishes.

4.2 Soothers approved for use at St. Mary's Hospital (SMH) shall meet requirements under the Hazardous Products (Pacifiers) Regulations C.R.C., C.930. Current standards are listed below:

4.2.1 The design and construction shall protect the user, under reasonably foreseeable conditions, from obstruction of the pharyngeal orifice, strangulation, ingestion or aspiration of the soother or any part or component.

4.2.2 The nipple is attached to a guard or shield and no part or component is separated or broken free from the product.

4.2.3 Any ring or handle is hinged, collapsible or flexible. Ensure the nipple, and any ring or handle remain firmly attached if it is pulled upon forcefully.

4.3 The following are NOT acceptable for use as soothers in any patient care situations:

4.3.1 The use of any disposable nipple adapted for use as a soother.

4.3.2 Any soother that is visibly cracked or damaged in any way.

4.3.3 Purchased soothers that have been modified (e.g. longer or homemade cord, missing guard, cut nipple).
4.4 If the soother is damaged or does not meet the safety requirements outlined in policy statement # 4.2, the family may choose to purchase a new one or use one from ward stock.

4.5 To minimize entanglement risk and reduce the potential risk of strangulation, soothers are not to be hung around the infant/child’s neck. Commercially purchased clips may be used and must be less than 14 inches in circumference.

4.6 Soothers will be used by one infant only and shall be sent home with the family or discarded when the infant is discharged from the hospital.

4.7 Soothers will be cleaned by washing it with hot water and with mild soap and rinsing well when visibly dirty or when dropped onto or placed on a contaminated surface.

5.0 REFERENCES


6.0 RELATED DIRECTIVES

*Stollery Children’s Hospital, NICU Policies and Procedures*

Psychosocial: *Soothers*
DEFINITIONS APPENDIX

Health Care: Activities made to maintain or restore health by a staff member who is either a regulated or non-regulated health care worker (HCW). The regulated or non-regulated HCW has either been educated or trained to provide the health care.

Health Service: Per Health Professions Act (HPA), a service provided to people to:
- Protect, promote or maintain their health.
- Prevent illness.
- Diagnose, treat to rehabilitate.
- Take care of the health needs of the ill, disabled, injured or dying.

Non-Regulated Health Care Workers: Non-regulated Health Care Workers include all staff members who provide health services to a patient but are not self-regulated health care professionals and do not belong to an established college that provides governance in accordance with the HPA. Examples include health care aides and physiotherapist assistants.

Non-regulated HCW may follow the applicable policy/procedure/guideline to provide health services as assigned on an individual patient basis. A regulated health care professional (HCP) (e.g., Registered Nurse, Occupational Therapist):
- Will assign the activity to the non-regulated HCW. Each HCP college has specific restricted activities that may be assigned to a non-regulated HCW.
- Must determine the non-regulated HCW has the competency (knowledge, skills, attitudes, judgment) to perform the activity in relation to the patient’s acuity level.

For example, in accordance with their respective regulations under the HPA, the regulated nursing professions (Registered Nurses, Registered Psychiatric Nurses and Licensed Practice Nurses) are authorized to supervise the non-regulated HCW for the following restricted activities: “to insert or remove instruments, devices, fingers or hands beyond the labia majora or beyond the anal verge”. Further Nursing Regulated HCP information may be found at http://www.gp.alberta.ca/574.cfm?page=2005_232.cfm&leg_type=Regs&isbncln=0779741986.

Other Workers: Staff members or consultants that are not regulated nor are non-regulated HCWs. Examples include support staff such as security officers, unit clerks, registration clerks, or switchboard operators.

Regulated Health Care Professional: Self-regulating staff that provide health services to a patient and belong to an established professional college that provides governance in accordance with the Health Professions Act or other legislation. Examples of regulated HCP include Registered Nurses, Licensed Practical Nurses, and Occupational Therapists. (Full list of regulated professions is found at http://www.inranet2.capitalhealth.ca/healthprofessions/Professions%20%Under%20HPA/professions_under_hpa.htm). Regulated HCP may be directed employees of Alberta Health Services or are contracted by Alberta Health Services (e.g., physicians, dentists).