Maternity
- 20 state-of-the-art labor, delivery, and recovery private birthing rooms with showers, television, glider rockers and sleep sofas
- One operating room suite
- Kitchen and snack pantry

The Family Place Team
- Anesthesiologists
- Family medicine physicians
- Lactation consultants
- Nurse midwives
- Obstetricians
- Pediatric hospitalists
- Registered nurses
- Social workers
- Support staff

The Family Place also provides maternity services to an expanded population of patients in the Lakes Region.

Innovative Approach to Care for Babies with Neonatal Abstinence Syndrome
Neonatal abstinence syndrome (NAS) happens when babies are exposed to drugs in the womb before birth. Most babies exhibit symptoms of drug withdrawal within their first two to five days of life outside the womb. Babies born with the effects of drugs often have difficulty eating and sleeping, and cry a lot.

The Family Place team is highly trained in the Eat, Sleep, Console approach to treating babies with neonatal abstinence syndrome, which centers on keeping Moms and babies together, so the baby can feed on demand and benefit from your soothing touch. The Eat, Sleep, Console approach involves assessing a drug-exposed newborn’s ability to effectively eat, sleep and be consoled within ten minutes of crying. The approach is used to guide treatment decisions around whether to treat a baby's symptoms using a pharmacologic treatment such as morphine or nonpharmacologic practices such as skin-to-skin contact, cuddling and on-demand feeding. Research shows that the Eat, Sleep, Console approach is effective at limiting pharmacologic treatment and may lead to substantial reductions in hospital length of stay.

Therapeutic Arts and Holistic Services for Newborns Who Need TLC
Reiki is a form of energy therapy that uses very gentle touch to help a person feel calm and relaxed. At Concord Hospital, Reiki is often used to help manage discomfort, anxiety and other distress. Babies may receive Reiki in a rocker or bassinette or while held in the arms of a caring adult.
Therapeutic musicians play live music to help calm babies and their families by gently playing soothing rhythms and melodies in response to their comfort needs in the moment.

**Special Care Nursery (Level II)**
The Special Care Nursery in The Family Place is designed to treat newborns who need extra medical attention, without separating them from their moms. It’s equipped with the latest technology and is staffed by highly skilled neonatal nurses. It’s equipped with the Bubble Continuous Positive Airway Pressure (CPAP) system — which helps some infants breathe easier within minutes while prompting their lungs to secrete a natural fluid to develop the lungs and help them breathe on their own.

When babies need special care, they stay in the nursery where quiet muted colors help reduce over stimulation and help create a healing environment. In the event a mother is discharged before her baby can go home, rooming in with the baby in the nursery is available. In addition to the three rooms for parents and newborns, the Special Care Nursery includes three acute care bays for babies who need monitors and a secure nursery for infants whose parents must go home or need a short break while in the Hospital.

**Pediatrics**
The Family Place Pediatrics Unit incorporates the family-centered care philosophy and uses child life services to reduce emotional and physical stress children sometimes experience during a stay. The unit features family-friendly rooms with sleep-in capability allowing parents to stay with their child overnight, as well as a dedicated treatment room, a family room, a cheerful playroom and a mobile aquarium.

The Family Place’s multidisciplinary team of pediatricians, pediatric hospitalists, pediatric nurses, social workers and dietitians, as well as a pediatric pharmacist and child life specialist have the experience, knowledge and resources to provide high quality care, close to home.

**Child Life Specialist**
- Prepares patients for procedures by using gentle language, play, and education.
- Uses therapeutic medical play to increase a child’s understanding and comfort during hospitalization.
- Helps parent and child cope during procedures by using techniques such as deep breathing, guided imagery and distraction.
- Helps explain a child’s hospitalization in a way that siblings, classmates and other children will understand.
- Serves as a resource for information on child development, parenting and car seat safety.
- Helps connect parents with other resources in the community.
- Assists parents and children in preparation for transitioning home.
- Engages child in age-appropriate play including arts and crafts and pretend play.
Funding for NAS Program at Concord Hospital
The following local granting organizations were instrumental in providing funding for the Neonatal Abstinence Syndrome (NAS) Program at Concord Hospital. Initial gifts supported the development of wrap-around programs and services designed to better care for moms and babies after delivery including therapeutic and consoling treatments. Our program has further developed and now includes effective ways to address NAS through continuum care programs that engage community resources and include the antepartum, intrapartum and postpartum phase of care.

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Grand Total $1,088,250

Recognitions

Baby-Friendly Designated Birth Facility
As a Baby-Friendly designated birth facility, The Family Place is committed to a family-centered, educational approach to pregnancy and delivery. Providing the optimal level of care for infant feeding and mother/baby bonding is at the core of our Baby-Friendly Birth Facility recognition.

Center of Excellence in Education and Training for Infants and Families Impacted by Neonatal Abstinence Syndrome
The Family Place is recognized by Vermont Oxford Network as a leader in training its staff to handle the dangerous increase in the number of babies born with opioid drug dependency. This designation is awarded to centers that train at least 85 percent of their designated care team in a specialized program involving 17 critical learning lessons.

**Blue Distinction**
The Family Place is recognized by Blue Cross Blue Shield for expertise in delivering maternity care.

**Family Favorite Award**
The Family Place is a 2019 ‘Family Favorite’ award recipient for Greater Concord Favorite Birthing Center/Hospital. The Family Favorite award program recognizes family-friendly businesses, services, and places in almost 50 categories — as chosen by the readers of Parenting New Hampshire magazine.

Concord Hospital’s ‘cuddlers’ care for babies born exposed to drugs

Volunteer Judy Buckley holds a two-week-old infant close at The Family Place at Concord Hospital on Friday, October 25, 2019. GEOFF FORESTER—Monitor staff

By LEAH WILLINGHAM
Monitor staff
Published: 11/30/2019 9:00:18 PM
Judy Buckley held the tiny infant, just two-weeks old, close to her chest.

Swaddled in a pink-striped blanket, the baby girl let out a high-pitched cry. Buckley began to sing.
“We’re off to see the wizard,” Buckley cooed, as the baby whimpered. “The wonderful wizard of Oz.”

“She’s so sweet,” she said, patting the little girl softly on the back. “You’re being so good,” she told her.

As a volunteer “cuddler,” Buckley’s job is to soothe some of Concord Hospital’s smallest, most vulnerable patients. The retired teacher spends hours holding and comforting babies, most of whom have neonatal abstinence syndrome, meaning they were born exposed to drugs in the womb.

Babies with NAS are essentially born in withdrawal – they suffer tremors, rashes, sleep deprivation and seizures, among other symptoms. Many of the symptoms mimic normal newborn behaviors: babies are fussy at times, they want to eat or be held. The difference is, with NAS babies, those symptoms don’t stop even after needs are met.

These babies need to be held for hours at times before they are able to rest.

As the opioid crisis has raged through the state, doctors have grappled with how to treat these tiny patients. Erin Collins, director of Concord Hospital’s The Family Place, said for a while the primary method used to treat babies with NAS was morphine.

However, in the last two years, Concord Hospital has turned to other methods of care: live music, reiki and human touch.

In May 2018, the hospital implemented its cuddlers program. Instead of medicating babies, volunteers swaddle the babies to calm them, and teach parents to do the same. The swaddle position mimics the comfort babies feel in the womb.

“I think we were all a little skeptical at first. How can we be in a health care society when everything is high technology, high acuity, and yet we’ve got almost the most simple of simplest care models that says, ‘Just hold them?’ ” Collins said. “How can that possibly work?

“But we’ve seen the clinical benefit – and it is more powerful than I can articulate.”

In the last 10 months, Concord Hospital has administered just a single dose of morphine to one baby out of the 61 infants born exposed to substances at The Family Place during that time period. Before the change in care model, one baby could receive 25 to 32 doses of morphine during their stay.

A new care model
Up until the last decade, neonatal abstinence syndrome was not a term many medical professionals were familiar with.

Even 10 years ago, if doctors noticed a newborn crying erratically, they might have concluded that the baby’s mother smoked cigarettes during pregnancy, or took another prescription medication, like antidepressants.
Drugs like heroin and methamphetamines were not on newborn doctor radars – a drastic change from today, when each year in New Hampshire almost 500 babies are born having been exposed to opioids and other hard drugs.

Collins said clinicians were quicker at that time to administer morphine to babies if they knew they had been exposed to drugs in the womb – even if their symptoms weren’t severe.

Now, doctors ask simple questions before they decide how to proceed with the treatment of any baby, whether they were substance exposed or not: how well is the baby eating and sleeping and can he or she be consoled?

If they find a baby is in need of extra care, they will try reiki, live music of different kinds and cuddling before they resort to morphine, which they administer rarely, in small doses.

This has shortened hospital stays significantly, Collins said. Once a patient is started on morphine, they have to slowly be weaned off, which can take weeks.

In addition, evaluating each baby in the hospital by the same standards normalizes the process for the patient and doctors. Any baby who displays a need can have access to a cuddler, not just NAS babies.

“By presenting the program the way they do, it takes the bias out of it by making it available to all. It takes the stigma away from it for families who are already facing a lot of stigma,” said Joyce Johnson, a cuddler volunteer who also works at Concord Hospital in the Transport department.

The cuddlers program
Members of the Concord community expressed immediate interest in volunteering in the cuddlers program, said Annie Roy, a nurse at The Family Place who spearheaded the program.

“The response was just overwhelming,” she said.

Concord Hospital hosted a forum with the community to answer questions about the program and NAS and started an application process.

Staff soon had a waiting list for people who are interested. There is still a waiting list to become a cuddler at Concord Hospital.

Once accepted into the program, cuddlers go through a three-part orientation that helps them become familiar with the hospital, NAS and strategies of consoling babies.

Jessica Bailey, program manager for volunteer services at the hospital, said almost all of the cuddlers are women.

“They are women who have had children that know what it is like to take care of a child. Some of them don’t have their own children, but have worked in childcare. Some of them have worked in substance use, so they have a connection that way,” Bailey said.

“Really, we’re just looking for a person that is compassionate, but also able to be non-judgmental,” Bailey added. “That’s always one of the big things that I talk with them about to
make sure that they can come into the situation without judgment, and know that they’re there for the baby and that’s their primary role.”

Cuddlers sign up using an online spreadsheet to be on call at some point 24 hours a day. Six volunteers can sign up for each slot, and they’ll be called as needed.

There are usually between one and five NAS babies at the hospital at one time.

Staff members have to find volunteers who are able to handle the demands of the job. Volunteers must be able to stay calm in high-stress situations.

“The babies can cause stress for people who are not used to caring for them,” Roy said. “They look disorganized to me. There’s this look in their face of fear. They can’t even be soothed enough to suck on their pacifier.”

“That’s something we evaluate in the volunteers. What’s their ability to really self-soothe?” Collins said. “When there’s a baby crying at a high pitched cry, that gets anyone’s heart rate and blood pressure up. It takes a special someone and I think we’re fortunate in our program to have a lot of special someones.”

**A rewarding experience**

Buckley said she’s developed her own system over time for calming the babies she works with. There’s nothing more rewarding than watching a baby settle in your arms, Buckley said.

“There’s just a peacefulness that falls over them,” she said. “You can see the heart rate come down and they’ll look at you with their big eyes and yawn, and you know you’ve had a difference.”

“It’s powerful when you can see the heart rate come down right before your eyes,” she added. When a baby is close to another person, it calms them by normalizing the respiratory rate, regulating the heart rate, and having a source of heat, said Buckley, who has three kids and three grandkids of her own.

Buckey and Johnson said families are incredibly grateful for the work of the cuddlers.

“We get thanked by people every day. I had mom thanking me just last week, saying, ‘I just really needed to sleep. Thank you so much,’ ” Johnson said. “It’s a way to help the family, who are already going through a lot.”

Buckley said one day a baby’s grandfather sat next to her while she was cuddling a baby.

“The grandfather came in and he said, ‘You’re a cuddler and that’s wonderful. You are a huge help.’ ” she said. “Right before he left, he just said, ‘thank you.’ ”

Collins said no one imagined that the cuddlers program would be as effective as it has been in its infancy.

“It’s really the power of healing in so many ways. For clinicians to resonate with a healing modality and not a high-tech approach can be hard,” she said. “Part of our role is to share the
results with families, other organizations. There are still plenty of hospitals in New Hampshire, and the U.S., I’m sure, that haven’t quite made the shift to this care model.

“We’re just going to try to keep sharing our story, so that if something resonates with someone else, they can make that happen in their organization,” she added.
THE POWER OF TOUCH

Transforming Care for Infants Exposed to Opioids during Pregnancy

Erin Collins, BSN, RN
Role: Director of The Family Place at Concord Hospital, Maternal Child Services
Education: Bachelor of Science in Nursing – Saint Anselm College

In July 2018, The Family Place implemented a new care model called Eat, Sleep, Console (ESC). ESC is a natural approach. It is a nursing practice that pays close attention to a baby’s eating, sleeping and consoling abilities during the period of potential withdrawal after birth. The goal within the first few hours to days of life is to optimize the newborn’s functions in order to lessen the impact of withdrawal symptoms. The primary focus is on soothing the infant by exclusively holding them using specific consoling techniques.

*Unequivocally, the power of touch has comforted these infants through withdrawal.*

Neonatal Abstinence Syndrome (NAS) refers to the withdrawal a newborn infant experiences when born to a mother with an opioid disorder or using/taking other substances. Over the past 10 years, Concord Hospital has seen a steady increase in the number of infants exposed to substances with a 42 percent increase from 2015. Approximately 75 percent of infants exposed to substances will experience withdrawal and typically these symptoms present within the first two to five days of life.

In an effort to continue supporting their families and improve care of the newborn, The Family Place transitioned away from the traditional symptom-based assessment. Previously, the nurses would assess the infants’ withdrawal symptoms using a scoring scale that triggered individual signs exposed infants may exhibit. Babies would experience high pitched cry, extreme irritability and tremors, sleep and wake disturbances, rigid muscle tone, difficulty eating and gaining weight with additional gastrointestinal symptoms like vomiting and loose stools. The infants’ total ‘score’ would drive the need to medically treat with morphine. This assessment would be completed every three hours and was the standard of care for over four decades. It is believed today that this traditional assessment model may have led to unnecessary opioid treatment of infants with NAS.

From January to June 2018 the Special Care Nursery (SCN), on The Family Place, cared for 48 infants who were born exposed to substances. Of those 48 infants, six of them had severe symptoms of withdrawal requiring a total of 164 doses of morphine. This is approximately 25-32 doses of morphine in the first few weeks of life for each infant. The infants had an average length of stay of 18.5 days and eventually weaned off the morphine, gained the ability to eat and gain weight, slept for an hour at a time, and consoled within 10-15 minutes.

About a year ago, new research was released from Yale New Haven Children’s Hospital in Connecticut, which validated the natural approach to ‘treating’ withdrawing infants. The ESC method of treating withdrawal is an effective method for proactive management of infants with NAS, which minimizes pharmacologic treatment, reduces length of stay and, most
Importantly, supports the normal newborn functions that are needed to support growth and development (eat, sleep and console). The new care model primarily focuses on infant-specific targeted counseling techniques, skin to skin bonding with the parents, eating on demand when the infant cues and maintaining calm, quiet environment to promote rest. The best treatment for the infant is their parents, not morphine.

In July 2018, The Family Place implemented the ESC model of care. The teams’ collective focus on reducing environment of care disruptions, providing alternative soothing therapies like music and Reiki as well as consistently delivering new evidence based practices has improved NAS newborn outcomes. The Family Place has coined the phrase ‘TLC Bundle’ to represent the combination of therapeutic and counseling treatments provided to newborns born exposed to substances. In addition to ESC care, they also implemented a volunteer cuddler program to assist nursing with comforting, holding and soothing infants. There are currently 45 volunteers trained in this program and their services are available day and night as needed. Unequivocally, the power of touch that our parents, nursing teams and cuddlers provide to these infants has comforted them through withdrawal.

From July to December 2018, after the ESC care model and cuddler program were implemented, the SCN cared for another 48 substance exposed infants. Ironically, of the 48 infants, six of them also had severe symptoms of withdrawal. Collectively, they received 15 doses of morphine, approximately only two to three doses per infant. This represents a 91 percent medication reduction in morphine doses given and all but one infant received a few PRN doses to help manage through the most significant symptoms exhibited. All the infants were able to eat and sustain weight gain, sleep for one to two hours at a time, and console within five to 10 mins. After six months of embedding the ESC care model into practice, the average length of stay for NAS newborns dropped to 11.3 days.

**A 91 percent medication reduction in morphine doses given to exposed infants was achieved.**

The results are clear. The ESC care model is effective, patient-family centered and supports the infant through the withdrawal phase with a high touch, low stimulation counseling approach that eases the potential symptoms and supports parental bonding. The Family Place continues to be a leader in this work, striving to continually improve care and outcomes for this vulnerable population. **Cuddle on!**

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**Substance Exposed Births at Concord Hospital (CY)**

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