



POLICY AND PROCEDURE	
SUBJECT/TITLE:	Post-Partum / Newborn Home Visits
APPLICABILITY:	Nursing
CONTACT PERSON & DIVISION:	Diane Thompson, RN, MSN - Nursing
ORIGINAL DATE ADOPTED:	4/21/2017
LATEST EFFECTIVE DATE:	6/22/2017
REVIEW FREQUENCY:	Every five years and as needed
BOARD APPROVAL DATE:	N/A
REFERENCE NUMBER:	200-002-P

A. PURPOSE

Periodic postpartum/newborn nurse (PP/NB) home visits are made to assess the health status of new mothers and infants in their home environment, enhance knowledge, provide support and make referrals as needed. This will allow for early intervention and timely referrals of problems, counseling and teaching to reduce infant mortality/morbidity and potential maternal postpartum complications. In addition, it will ensure post-partum/family planning follow up care for those patients that received no prenatal care thus promoting Women’s Health and decreasing unplanned and or unwanted pregnancies. The nurse home visitation program for newborns provides a safety net for families in order to prevent infant mortality, child abuse, and neglect.

B. POLICY

The Postpartum Newborn Nurse home visit as part of the preventive healthcare system includes the following:

- Assessment of health of postpartum woman and newborn by a public health nurse (PHN);
- Contributes to a family’s sense of control and participation by meeting them in their home; also provides opportunity for assessment of home environment;
- Provides education, information, support, anticipatory guidance, and enhances parenting skills;
- Makes referrals to other service providers as necessary and provide resource information;
- Promotes discussion of contraceptive needs or methods to enhance spacing of subsequent pregnancies and encourage women to complete her six-week postpartum visit;
- The home visit should be made on selected new mothers and newborn infants within two-three weeks after delivery;
- Participants for home visits will be made by referral from (200-002-02-F THRIVE Newborn Home Visit Referral Form):
 1. Women, Infant and Children (WIC) Program
 2. Hospital OB/GYN Clinics – Aultman and Mercy Hospital.
 3. Private physicians
 4. Self-referral or others

Visits may be made to the following:

1. High risk pregnancies
2. Multiple births (twins)
3. Teen pregnancies
4. First time mothers
5. Special situations/home problems
6. Single parents
7. Substance abusers

Form to be used:



- 200-002-01-A THRIVE Newborn Home Visit Assessment
- 200-002-02-F THRIVE Newborn Home Visit Referral Form

C. BACKGROUND

N/A.

D. GLOSSARY OF TERMS

N/A.

E. PROCEDURES & STANDARD OPERATING GUIDELINES

The Postpartum Newborn Nurse will:

- Review the referrals and prioritize (the ideal time to schedule a visit is 2-3 weeks postpartum);
- Visits are available during the first two months of the newborns life or for premature babies up to two months after they are released from NICU.
- Telephone patient, introduce self (PHN) and explain purpose of visit;
 1. If unable to make contact, mail letter introducing PHN and purpose of visit asking client to make contact; or
 2. Make cold call to home if all other attempts to contact client have failed
- Make Home Visit using the Postpartum Newborn Home Visit Protocols and THRIVE newborn home visit form – typical visit time is up to 2 hours.
- Obtain signed release from mom for individual/agency that referred the mom.
- Topics of discussion may include (but are not limited to) the following:
 1. Well baby care;
 2. Immunizations (including Tdap for mom, dad and caregivers);
 3. Ways to keep the baby safe at home, while sleeping, in the car, and at other places;
 4. Ways to keep the baby healthy;
 5. Taking care of baby's skin, mouth, umbilical cord, circumcision;
 6. How the baby's brain and body develop;
 7. Feeding the baby;
 8. Signs and symptoms of illness (mom and baby);
 9. Breast care;
 10. Postpartum hygiene;
 11. Postpartum activity;
 12. Sleep needs (mom and baby);
 13. Nutritional needs;
 14. Birth control methods;
 15. Prevention of sexually transmitted infections;
- Document home visit in records, make referrals, copy reports, etc. as needed. Documents will be retained for 3 years from last visit in a secured file cabinet.
- This program is designed for a single nurse visit; however, if the PHN identifies concerns/needs of the family that can be met with nurse involvement, subsequent visits can be made.

Miscellaneous Information:

- Review hospital discharge forms if parent has available and is willing to reinforce home-going instructions.
- Equipment to have available during visit:
 1. Blood pressure cuff and stethoscope
 2. Baby scale
 3. Hand wipes or antibiotic hand rinse



- 4. Required forms
- 5. Handouts

F. CITATIONS & REFERENCES

N/A.

G. CONTRIBUTORS

The following staff contributed to the authorship of this document:

- 1. Diane Thompson, RN, MSN
- 2. Dawn Miller
- 3. Marsha Miller, RN
- 4. Janet Copeland, RN

H. APPENDICES & ATTACHMENTS

200-002-01-A THRIVE Newborn Home Visit Assessment

I. REFERENCE FORMS

200-002-02-F THRIVE Newborn Home Visit Referral Form

J. REVISION & REVIEW HISTORY

Revision Date	Review Date	Author	Notes
6/22/2017		Diane Thompson, RN, MSN	Addition of consent signed for referral agency Added record retention of 3 years.

K. APPROVAL

This document has been approved in accordance with the “800-001-P Standards for Writing and Approving PPSOGFs” procedure as of the effective date listed above.