

Title: "The implementation of KMC at Groote Schuur Hospital: KMC ward "

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The KMC ward at GSH was established in 1996. This ward allows 10 mother-infant pairs to practice KMC 24hrs a day, under the supervision of a single nurse.

The KMC ward should have a homely rather than a hospital atmosphere. The infant may be transferred to the KMC ward with the if:

- The mother is trained in KMC position and nutrition.*
- The infant is out of the incubator.*
- The infant is growing satisfactorily*
- The infant is at least partially breastfed*
- The infant is well*
- The mother is motivated to do KMC on a 24hr basis.*

Infants are discharged at 1 800 and should be reviewed within 3 days of discharge for a weight check. A neonatologist sees the pre-term baby within 2 weeks of discharge Infants may be re-admitted.

The KMC ward nurse works a 12hr shift is responsible for the observation and training of mothers, and assists the mothers with decision-making about the discharge of her infant. The major role players in the effective management of the KMC ward are the nursing personnel. The KMC nurse liaises with the head nurse about all the problems encountered on a daily basis.

It is therefore imperative that these two role players have a good working relationship. The main problems encountered by the KMC nurse are staff, patient, visitors to the KMC ward and domestic related.

These problems are solved by education of staff and parents; interviews by the head nurse with the mothers; interviews by the head nurse with the KMC nurse; arranging of meetings between neonatal unit nurses and the KMC nurse.

The main problem encountered by the head nurse is to ensure that the KMC ward is staffed by nurses who has the correct personality, the ability to communicate well and the love to do the job.