

Camp Simcha Special Care Baby Project Criteria



We can offer parents who have had a very premature or seriously ill baby, the help and advice of a qualified Neonatal nurse with over 20 years' experience at UCLH.

Who can we help?

- Premature babies (born at 36 weeks or less) who require special or intensive care for more than just a few days
- Babies requiring Neonatal care for other reasons, including:
 - Babies who have been treated for asphyxia or Hypoxic-ischemic Encephalopathy
 - Babies with severe infections including congenital pneumonia, meningitis etc
 - Invasive or non-invasive respiratory support for over 2 days including ventilation (BiPAP / CPAP/ high flow). Including babies who have TTN or RDS
 - Babies with issues regarding nutrition such as requiring enteral feeds on discharge or NEC
 - Some congenital anomalies including chromosomal anomalies e.g. cystic fibrosis, Tay Sachs

Please note that this is not an exhaustive list and all babies will be considered on an individual basis.

Where necessary, Camp Simcha can provide its services on a temporary basis.

How do we help families with babies requiring Neonatal or Special care?

As well as the support of an experienced qualified Neonatal nurse our special care Baby service can also help families while they are in hospital with practical help, from providing breast milk pumps or parking vouchers to sibling support or a night nurse for when they get home. For most families this will be a short-term support service to get them through those first few weeks. However, having Camp Simcha on hand from the outset means we can be there for families going forward – with our full range of services – if their needs are more long-term.

“Every family will have different needs – some might want me to come in every week, some may still be tube-feeding their baby and need help to get confident with this, others may just need the reassurance of knowing I am at the other end of the phone.”

“The service, like so much Camp Simcha does, is tailor-made to each family and their needs. Most importantly I am there to bridge that gap when a family leaves hospital. Having a very premature baby is very different to a full-term new-born, in terms of feeding, sleeping, etc. This can be very isolating for new parents.”

Caroline Dux, Neonatal Nurse UCH.