P 10. A COMPARISON OF NURSE AND MOTHER ATTITUDES REGARDING MATERNAL SKIN-TO-SKIN CARE AS A PAIN RELIEVING STRATEGY DURING HEEL LANCE FOR PRETERM NEONATES

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Background: Maternal skin-to-skin care during heelstick reduces infant
pain response; however its use as a pain relieving strategy in the NICU is rarely implemented.
Aim: The purpose of this study was to compare mothers and nurses
attitudes about providing skin-to-skin care during a routine heel lance in the NICU.
Methods: Mothers of preterm infants participating in a multicentered randomized cross-over trial of skin-to-skin care to reduce pain during heel lance were interviewed and neonatal nurses from the same NICUs were
asked to complete a questionnaire related to their attitudes of instituting skin-to skin care (SSC) as a routine pain relieving strategy. Both interview and questionnaire focused on three issues: how they felt about SSC during heelstick, would they do it again, and would they recommend it to others.
Results: All of the mothers (n=173) completed the interview. 80% of the mothers reported positive feelings about providing maternal SSC during heelstick, 99% said they would do it again and recommend it to others. 73 of the 172 nurses approached (43%) completed the questionnaire. 86% felt that SSC during heelstick was beneficial for the neonate. 74% reported that they would be willing to help mothers to use this intervention, and 38% would recommend its use to others. Nurses identified maternal stress and possible maternal reluctance to provide SSC as a barrier to implementing SSC as part of their care. 34% felt that SSC was stressful to mothers. 14 % were unsure if they would routinely assist mothers with SSC and 29% would not routinely recommend its use due to potential maternal stress.
Conclusion: Nurses concern regarding maternal stress and reluctance to provide SSC during heelstick appear to be unwarranted.