

**Standard Operating Procedures**

**Baby Steps**

June 2025

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**Version Control**

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| 07/07/21 | 1 | New SOP document |
| June 2025 | 2 | Dates, introduction, telephone numbers, equipment, referral process.  |
| July 2025 | 2.1 | Minor update to SOP 2 re sending task to Duty Health Visitor |
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# Introduction

Baby Steps is a free, friendly group programme that empowers parents-to-be, builds confidence, and helps individuals feel prepared for the arrival of their new baby.

It is an evidence-based perinatal education programme, developed by the NSPCC and delivered under licence by Family Nursing & Home Care (FNHC). Baby Steps is designed not only to prepare people for birth but also for the transition into parenthood. The programme explores both the joys and challenges of becoming a parent – from building stronger relationships to learning essential practical parenting skills.

Sessions are delivered by Midwives, Health Visitors, and specially trained Baby Steps Facilitators at three venues across the island.

The content is tailored to meet the needs of parents and covers the following areas:

* Baby development during the third trimester, including brain development and bonding
* Setting realistic expectations for new parents and their support networks
* Preparing for birth and meeting the baby, including a tour of the Maternity Unit
* Practical skills such as bathing, nappy changing, and safe sleeping
* Feeding the baby – FNHC is accredited at Baby Friendly Initiative Level Three

The Baby Steps team works closely with Health Visitors, Midwives, and other relevant agencies to help parents build a strong support network alongside other parents and their babies.

The programme is delivered as a series of group sessions, starting between 26–30 weeks of pregnancy. These sessions enable parents-to-be to meet others at a similar stage, with a follow-up postnatal meet-up session that includes footprint painting and a baby massage taster.

# SOP 1 Pathway for Referral Handling Within the Baby Steps Team.

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| ***Purpose:***  |

To ensure a smooth process from receipt of referral to initial client contact.

To confirm pregnancy viability prior to any contact with the client.

To create groups of up to ten women and their partners in a timely manner, based on estimated due date.

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| ***Scope:***  |

Applies to the Baby Steps Team

Covers the referral handling process from receipt to group allocation

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| ***Core Requirements/Procedure:*** |

1. **Referral Receipt**
* Community Midwife sends referral to the Baby Steps inbox following the booking appointment (8–10 weeks’ gestation).
* Acknowledge receipt of referral by emailing the referring Midwife.
1. **Referral Documentation**
* Print a hard copy of the referral.
* Staple the Referral Administration Checklist to the front of the hard copy.
	+ This checklist is stored electronically in the Baby Steps ‘L Drive’ under Standard Letters and Documents.
	+ Hard copies are also available in the secure tambour unit in the Coordinator’s office, labelled ‘Referral Checklist’.
1. **Initial Processing**
* Place the referral into a clear wallet labelled ‘Referrals to background check then add to 17-week folder’.
* The Baby Steps Coordinator will conduct a background check before moving the referral to the next stage.
1. **Post-Background Check**
* Following the background check, place the referral in a clear wallet labelled ‘Waiting for 17 weeks & Maxim check’, ensuring they are in due date order.
* This folder is reviewed regularly by the Coordinator.
1. **17-Week Review and Checks**
* For referrals where gestation is over 17 weeks:
	+ Conduct a Maxim system check to confirm pregnancy viability, estimated date of delivery, and any clinical or confidential record updates.
	+ Complete the relevant sections of the Referral Administration Checklist.
	+ Check whether clients with vulnerabilities or safeguarding concerns have been referred to the Maternity MDT.
		- If not, send a referral to Juliet Le Breuilly via email: J.LeBreuilly@health.gov.je.
1. **Client Invitation**
* Once the above steps are complete, pass the referral to the Facilitator.
* The Facilitator will generate and save the client invite letter on EMIS.
* Letters are printed and posted from the main reception desk at Le Bas Centre.
1. **Group Allocation**
* The Facilitator files each hard copy referral into a Future Group Folder based on the estimated due date.
* These folders are stored in the tambour, within the section labelled ‘Future Groups’.

# SOP 2 Group Preparation and Client Engagement

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| ***Purpose:***  |

To enable practitioners to effectively plan their allocated group.

To ensure that any risks are identified early and that appropriate referrals are made.

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| ***Scope:***  |

Applies to the pathway for preparing and engaging clients ahead of group sessions.

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| ***Core Requirements/Procedure:*** |

1. **Planning and Coordination**

Co-facilitators should meet prior to group preparation to coordinate planning and agree on workload distribution.

1. **Pregnancy Viability Check**

A health professional must confirm pregnancy viability via the Maxim system before any contact is made with the client.

1. **Initial Client Contact**
* Co-facilitators are to contact each client by telephone to determine their interest in joining the Baby Steps programme.
* If the client declines, they should be discharged from the Baby Steps caseload and the reason documented.
* If the client accepts, an Engagement Visit should be scheduled. Where possible, this visit should be face-to-face and attended by both a health professional and a facilitator.
1. **Engagement Visit**
* During the visit, the following information should be gathered and shared:
	+ The client’s email address and partner’s contact details
	+ Details of any other children in the family unit
	+ Dates, times, and venue of the upcoming sessions
* Any safeguarding concerns identified during the visit must be addressed in accordance with FNHC Safeguarding Policies and Procedures.
	+ Safeguarding is everyone’s responsibility.
1. **Post-Visit Administration**
* The Baby Steps Engagement Visit Template must be completed on EMIS.
* If further support is required, the Health Visitor Team Lead should be tasked with arranging an additional antenatal home visit.
* A record must be created for the partner on EMIS, including completion of a new referral template.
* Once all visits are completed, a hard copy of the group register should be created and added to the group file. These records must be securely stored in the locked tambour unit.
1. **First Group Session**
* The following paperwork must be completed by clients and returned during the first session:
	+ Consent Form
	+ EPDS (Edinburgh Postnatal Depression Scale)
	+ GAD-7 (Generalised Anxiety Disorder assessment)
* EPDS and GAD-7 scores should be entered into EMIS as soon as possible following Session 1.
* The scores must be reviewed by a health professional. If raised scores are identified, the client must be contacted and offered appropriate support
* Send task to Duty Heath Visitor advising of raised EPDS/GA7 scores or any safeguarding concerns.

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# SOP 3 Setting up and Delivering Baby Steps Group Sessions

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| ***Purpose:***  |

To outline the steps required for the effective setup and delivery of each Baby Steps group session

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| ***Scope:***  |

Applies to the operational pathway for commencing and delivering Baby Steps groups, including both antenatal and postnatal sessions

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| ***Core Requirements/Procedure:*** |

1. **Pre-Session Preparation**
* Create an EMIS register for the full five-week antenatal programme.
* Complete the register after each session.
* Ensure all required session equipment is available at the venue in advance (see table below).
* Set up the session, including seating arrangements, IT equipment, and refreshments

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| Weeks | Equipment Required |
| Weeks 1 & 2 (Combined) | Laptop, pens, card, envelopes, blood bottles, pelvis, placenta, baby model, quiz materials, score sheets, prizes, body pictures, belly bag, refreshments |
| Week 3 | Pens, paper, flip chart, *Coping with Crying* (presentation on laptop), refreshments |
| Week 4 | Maternity Unit Tour (no materials needed) |
| Week 5 | Infant feeding props, oranges, straws, pictures, laptop, *Mothers & Others* magazines, refreshments |
| Week 6 | Baths, towels, nappies, condiments, cotton pads, bowls, safe sleep basket, room thermometers, QR code for feedback, refreshments |

1. **Session Delivery**
* Deliver the face-to-face group session.
* Conduct informal supervision between co-facilitators following the session (note: this is not recorded).
	+ Any significant issues should be raised during formal supervision.
* Ensure all equipment is stored appropriately, and that the venue is left clean and tidy.
1. **During Session: Concerns**

If any concerns arise during the session, contact the On-Call Manager.

1. **Post-Session Tasks**
* Complete the EMIS register to mark attendance (attended/did not attend).
* Complete the relevant *Baby Steps Session Template* for each group member on EMIS.
* Ensure this is filed under the *Top Antenatal BABY STEPS session*.
* Email the relevant PDF document to each client for the session just completed.
* These documents are stored in the *Baby Steps* folder on Teams.

**Postnatal Phase (Sessions 7–9)**

**Monitoring Births (Post-Session 6)**

* Facilitators should monitor births via Maxim.
* When each baby is born:
	+ Send a congratulatory text to the family.
	+ Send the Session 7 PDF.
	+ Record the session using the Session 7 *Postnatal Template* on EMIS.

**Booking Final Sessions**

Once the final baby in the group is born:

* Book Session 8 (telephone call) into the Health Professional’s diary for each client.
* Book Session 9 (postnatal in-person session) and add it to the relevant EMIS diaries.

**Equipment required for Session 9:**

* Massage mats, changing mats, paint, card, massage dolls
* Parents are asked to provide oil or lotion for baby massage
* *Imagining Baby* envelopes and refreshments
* Record attendance on the *Postnatal Session Template* on EMIS.

**Final Steps**

Following completion of all nine sessions:

* Disengage mothers and partners from the Baby Steps caseload on EMIS.
* File the register in the Old Registers Folder within the tambour unit.

# SOP 4 Supervision Requirements in Line with NSPCC Licence

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| ***Purpose:***  |

To ensure that all Baby Steps staff meet supervision requirements in accordance with the NSPCC licence agreement

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| ***Scope:***  |

Applies to the supervision pathway for clients engaged in the Baby Steps programme. To be completed by Baby Steps Co-Facilitators, Coordinator, Trained Baby Steps Supervisor, and FNHC Safeguarding Lead.

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| ***Core Requirements/Procedures*** |

1. **Booking Supervision Sessions**
* Co-facilitators must prioritise the booking of supervision sessions into their diaries.
* These sessions are a requirement under the terms of the NSPCC licence.
1. **Session 3 Supervision**
* Supervision is to be completed only for vulnerable or targeted clients following Session 3.
* This must be conducted by the Coordinator or a trained Baby Steps Supervisor.
* A record of the supervision must be completed using the Supervision Template on EMIS.
1. **Session 6 Supervision**
* Supervision must be completed for every client who attends Session 6.
* This must be conducted by the Coordinator or a trained Baby Steps Supervisor.
* Records are to be completed using the Supervision Template on EMIS.
1. **Group Safeguarding Supervision**
* Quarterly group safeguarding supervision must be held for clients identified as vulnerable.
* This is facilitated by the FNHC Safeguarding Lead and must follow the FNHC Safeguarding Policy.

# References

National Society for Prevention of Cruelty to Children NSPCC (2018) Implementation evaluation of Baby Steps scale-up: impact and evidence briefing: [Online report] Johnson, Robyn and Anderson. Available at <https://learning.nspcc.org.uk>

# Appendix 1 – Baby Steps Process Flowchart

Midwife refers client following booking appointment via Baby Steps email.

Client receives invite letter from Baby Steps between 17 and 18 weeks.

To opt out client can contact Baby Steps team and will then be disengaged.

Client is contacted by Baby Steps team at approximately 26 weeks gestation and is offered a face-to-face visit.

Home visit takes place. Client will be given a Baby Steps pack containing a consent form, EPDS and GAD 7, session dates and times and other relevant information.

Client contacted if any high EPDS and GAD 7 scores received with an offer of support or referral.

Client attends 5 weekly Baby Steps sessions.

Client added to group WhatsApp if consents.

Client to receive Baby Steps weekly email following each session.

Client asked to complete feedback form via QR code.

Once baby born, client receives congratulations text and PDF via email.

Client contacted by Baby Steps midwife via telephone and invited to final session with Baby.

Final session completed.

Client discharged from Baby Steps.

# Appendix 2 – Purchase Order Request Form

The form can be accessed within FNHC by clicking on the following link: [PurchaseOrderRequestForm2025.docx](https://fnhcje.sharepoint.com/%3Aw%3A/r/sites/FNHC/Shared%20Documents/General/Order-Request%20Forms/PurchaseOrderRequestForm2025.docx?d=wee44a3ce29974b05a12d60613af9e0cb&csf=1&web=1&e=tu81dK)

# Appendix 3 – Baby Steps Referral Form

The form can be accessed within FNHC by clicking on the following link:

[Baby Steps Referral Form](https://fnhcje.sharepoint.com/%3Aw%3A/s/FNHC/Ebw0apJtDexFjBQ-JUCMR-cBt_YpnrttOBvEi-QngOWyoA?e=HpSW7L)