

**INFANT MASSAGE INSTRUCTION GOOD PRACTICE GUIDELINES**

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**Method**

Email ✓      Intranet ✓

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We are grateful to NHS Blackburn with Darwen for permission to use their Infant Massage Good Practice Guidance as a basis for this document and to Tammy McLellan, Principal Teacher, Scottish School of Child and Baby Massage. Also, Julia Nelson Health Development Officer Highland Council who wrote the first edition of this guidance.

The planning for fairness process has been applied to these guidelines to ensure that they consider and address equality and diversity.

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## Infant Massage Instruction: good practice guidelines

(‘Parents’ refers here to the infants/child’s parents or caregivers).

### 1. Introduction

1.1 The purpose of infant massage instruction is to promote nurturing touch and communication to parents as a practical way to assure their child that he or she is loved, valued and respected.

1.2 The demonstration of infant massage techniques is a means to empower parents by passing on a practical skill, which encourages early positive attachment and builds parents’ confidence in their ability to nurture and soothe their child. These guidelines set out the rationale for promoting the use of infant massage, together with basic standards to be followed when offering instruction to parents.

1.3 The core Scottish Government policies in Getting it Right for Every Child; The Early Years Framework, Equally Well and Achieving Our Potential recognise the importance of a positive start in the first months and years of life, in order to benefit children’s long-term growth and wellbeing. Parents’ attitudes and skills will affect their child’s mental, emotional and physical wellbeing: building parental confidence is therefore seen as a key element towards ensuring that children are able to flourish.

1.4 *Health for All Children: 4* guidance for implementation in Scotland (‘Hall 4’) sets out the child health programme and states that:

*Interventions in the early years are likely to be the most effective in preventing a child developing mental health problems. These include interventions to improve and enhance the wellbeing of the mother and the baby, which promote good early parent-child attachment and interaction, and which support parents’ problem-solving skills and recognise and support the role of fathers.*

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1.5 The Chief Medical Officer in his annual report (2006), emphasises the importance of secure attachment between an infant and its parents:

*In the early months and years it is crucial that each child has the opportunity for a warm reciprocal relationship with a small group of special adults who respond to the child's varying needs for stimulation or soothing, shape his or her later relationships and emotional self-regulation, and give the capacity to learn and develop empathy.*

## 2. Rationale

2.1 Centuries of traditions in many countries of massaging babies, together with more recent research, indicate that infant massage can offer benefits for an infant's physical and mental health development ease sleeping, crying, symptoms of wind and build parents' confidence in their ability to comfort their child. In 2012, a Cochrane Systematic Review (2012) stated that by developing understanding about the importance for infant development of warm, sensitive, attentive interactions, 'midrange' responsiveness on the part of the primary caregiver and body-based interactions, has resulted in an increased interest in the possible role of infant massage to support early sensitive parent-infant relationships, particularly where the mother may be experiencing difficulties such as postnatal depression.

2.2 The SIGN 127 guidance *Management of Perinatal Mood Disorders* evidences a pilot study where mothers attending an infant massage group showed a clinical reduction in EPDS scores over four weeks and had improved outcomes in comparison with mothers attending support groups.

Also a small randomised controlled study demonstrated that attending infant massage classes had a significant and positive effect on both mother-infant interaction and depressive symptoms in the mother.

2.3 Two NHS Health Scotland resources provided to new parents suggest baby massage as a practical skill for parents to practice. *Ready Steady Baby* notes massage as a way

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of soothing babies with skin to skin contact through gentle loving touch. The

play@home programme, currently funded in all areas of Scotland as a tool to help improve emotional ties and promoting a stimulating, nurturing environment, includes infant massage as an important method of loving communication

2.4 The play @ home programme originated in New Zealand and was adapted for use by NHS Fife by a group including Health Visitors and a paediatric physiotherapist; and is widely used in Scotland and is funded by the Scottish Government. The Baby Book lists the following benefits of baby massage:

- Loving touch and skin contact help your baby to thrive
- Helps new parents to gain confidence in handling their baby
- Promotes relaxation of both parents and baby
- Your baby is learning to enjoy the sensation of being handled and stroked.
- Touch is vital for your baby's physical and emotional well-being
- Develops body awareness
- Helps babies with colic by breaking the anxiety-pain cycle and improving digestion
- Improves sleep patterns and settling problems
- Especially helps the growth and development of premature and low birthweight babies
- Baby massage techniques are suitable for use in all growing children, e.g. circular stroking of the temples for soothing older children'

Play @ home Baby Book, NHS Health Scotland 2014

2.5 Evaluations in 2007 and 2010 of practitioners' experiences of delivering infant massage instruction in the Highlands found high reported levels of parental satisfaction. Parents said they felt they had learnt a practical skill which seemed to soothe the symptoms of colic and constipation and helped relax themselves and their baby; massage groups offered a chance to meet other new parents; practitioners found it

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enhanced their relationship with parents and enabled them to observe parent-child interaction (NHS Highland 2007, 2010).

2.6 Massage techniques can be transmitted principally through parents observing and listening to the instructor. This simplicity means that it can be made easily accessible to parents with a wide range of learning abilities and styles and may be particularly helpful for more vulnerable parents.

2.7 For fathers, massage offers a means of gentle skin to skin contact with their baby, particularly if the baby is breastfed. Mothers in Highland who learnt the massage strokes have reported that they enjoyed having a practical skill to pass on to their partner/husband which helped them to feel involved with their baby.

2.8 The approach taken to introduce massage to parents and the setting for sessions are likely to have an impact on parents' response, especially those who are more vulnerable.

2.9 An evaluation by Underdown & Barlow (2011) examined the ways in which a sample of infant massage programmes operated. Through observations and parental evidence they assessed the impact of the invitation process, consistency of facilitator, settings, group size, facilitators' skills and personal qualities and the use of singing.

2.10 The report concluded that '*...inadequate attention (is) being paid to the way in which ... women, who have a range of needs, are invited to take part in such services and the ensuing quality of provision.*' Their findings suggest the need for awareness of '*...the mechanisms that are necessary to effectively support parent-infant interaction and to bring about change.*'

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### 3 **Scope**

3.4 These guidelines are ratified by NHS Highland and adherence to them should enable instructors safely to facilitate parent learning about infant massage techniques and benefits. The guidelines are intended for use by all NHS Highland practitioners offering infant massage instruction. It is recommended that these guidelines are adopted by local authority and voluntary sector organisations who offer infant massage instruction. Private providers are also encouraged to adopt these guidelines, as opportunities arise.

### 4 **Principle**

4.1 Infant massage is concerned with promoting child and family mental health, through massage, loving holds, recognising early communication cues, listening and responding and the promotion of physical well-being underpinned by early bonding and positive attachment.

4.2 Infant massage offers parents an opportunity to meet and talk with other parents in their local community which is important in terms of promoting positive mental health.

4.3 Massage sessions offer families a universal non stigmatizing way to connect with their infant.

### 5 **Good practice guidelines**

5.1 Practitioners who have satisfactorily completed training by Scottish School of Child and Baby Massage or achieved another accredited qualification in infant massage e.g. International Association of Infant Massage (IAIM), will offer instruction to parents.

5.2 Practitioners will maintain competence by regularly facilitating groups (minimum 1 annually), or 1:1 sessions (minimum 3 annually).

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5.3 Care should be taken in the manner in which infant massage is offered, both in approach and setting. The invitation to parents should clearly set out the venue, dates and time, the equipment that parents should bring with them, and contact name and details if parents want to find out more before attending. A sample letter is at Appendix A.

5.4 It is recommended that numbers per class should be a maximum of 8 – 9 parents in a group with their baby, for an hours class over 5 weeks with 1 trainer. That number would depend on having a room that is a suitable size to accommodate all. A group that is larger than this with 1 trainer, would lose the group dynamic and would make it difficult to give everyone individual attention.

5.5 If 2 people are running a group in a large enough room then a few more parents may be invited.

5.6 It is advised that the groups are run as closed groups (invite only) for the 5 weeks and **if** there is space or time to have another group that runs as a rolling programme that parents can move onto that could be negotiated locally within the Family Team.

5.7 Practitioners should consider if parents may require additional help in order to take part in the sessions and make the necessary arrangements e.g. a translation of the literature, an interpreter, signing or other assistance.

5.8 It is preferable for the same instructor to lead a series of sessions, to provide a consistent approach for parents and babies.

5.9 An infant massage session can incorporate the key messages about attachment and early language from the *Before Words* materials. Staff can demonstrate the key messages, and also point out to parents when they are doing this themselves as part of the massage process.

5.10 As part of integrating support for parents, offering baby massage instruction may

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also be used as an occasion to offer the *Bookbug* Baby Bag and the *Childsmile* toothbrush pack and drinking cup. Consideration should also be given to incorporating an extra session to introduce *play@home* activities and/or a *Bookbug* Session. The

*Before Words* materials provide useful practical links to *play@home* that help build attachment and early learning.

5.11 *Play@home Baby Book* recommends that six weeks old is a suitable age to start full baby massage.

#### 5.12 **Infant massage is not appropriate if:**

- The infant does not give permission i.e. cries or is asleep. A spare doll should be available for parents to practice on if the child is sleeping (1 per group is usually sufficient)
- The infant has a skin rash/irritation (excluding dry skin conditions). If a baby has eczema, the eczema cream can be stroked onto the area affected. Infant massage may help with the application of the eczema cream as it can create a more pleasurable process for baby and parent.
- The infant is unwell
- The infant has had a vaccination within 72 hours
- The infant is suffering from a soft tissue injury or fracture of any kind
- The infant is undergoing specialist treatment – unless medical permission has been given
- Immediately after a feed (abdominal massage)

#### 5.13 **Environments for offering baby massage instruction**

- Sessions may include one-to-one home visits, drop-in or structured weekly group sessions.
- If working in the family's home refer to the organisation's lone working policy for safe practice.
- Practitioners will adhere to the health and safety regulations within each venue

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- A register should be taken at the beginning of each session in line with Fire and Safety regulations (see Appendix B).

## 6. Implementation

6.1 A suitable group setting should incorporate the following:

- An enclosed room that is warm and private ensuring that privacy and dignity is maintained.
- Adequate, clean floor space to carry out the sessions, with mats for the babies to lie on.
- Adequate seating for parents – cushions/bean bags and chairs available to sit on, to allow for their comfort and care, especially in cases of episiotomy/caesarian section and for comfort for breastfeeding.
- Care is taken to provide a relaxed atmosphere through the use of soothing music and low lighting. Bright strip lighting can cause babies to cry. It is better to have the room darker than too bright. Scenting the room with lavender or tea-tree oil can also help parents and babies to relax and can reduce unpleasant clinical smells. This is not essential.
- There is provision for parents / carers to clean their hands before and after the massage (sink or wipes).
- Aids such as photocopies of the strokes and movements may be offered to parents.
- Drinking water / refreshments offer a valuable opportunity for new parents to meet, make friends and help each other.
- If a parent seeks advice on another subject, the instructor is able to pass on the contact details of the Health Visiting team.
- The *play@ home Baby Book* and *Bookbug Baby Bag* are on display their value is highlighted to parents and they are encouraged to use the resources.

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## 6.2 Oils

- Recommended oils are Grapeseed, Sunflower and Coconut oil.
- Parents should be asked to bring their own oil with them, in a small bottle e.g. a travel bottle.
- Instructors could have a small stock of bottles and oil which a parent could borrow for the session if they have forgotten to bring their own.
- Bottles and oils should be obtained through the practitioner's usual route for ordering resources. In the case of voluntary sector partners, the costs should be incorporated into their funding arrangement.
- Adhere to the 'use by' date of oils
- Store oils in a cool dark place
- Essential oils will not be used on the skin. Only lavender or tea tree oil will be used as a room scent.
- Warm the oil in hands to room temperature before using.

## 6.3 After massaging an infant it is recommended that the following steps are taken:

- Ensure that the infant is not left out in the sun with oil on their body due to the increased risk of burning
- Allow the infant to rest, relax or sleep after the massage if they want to.
- Alert parents that their infant may be thirsty after a massage and may require a drink of milk or water.

## 6.4 Infant Massage Documentation:

- *An attendance register* (sample at Appendix B) will be completed and kept by the facilitator for the drop-in and structured sessions. The number of sessions the parent and child attended will be recorded.
- *Evaluation*: at the end of each course, parents / carers will be asked to complete a questionnaire (sample at Appendix C) about their experience of

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Instructors will retain the registers and the questionnaires in accordance with their data protection procedures, so that analysis can help to develop effective practice.

- *Marking the end of the course:* On completion of the course the parents / carers may be offered a certificate of achievement - see sample at Appendix D. If reduced to A5 format and hole-punched it will fit in the Personal Child Health Record - 'Red Book'.

### **6.5 Limits of Professional Expertise:**

All practitioners who carry out infant massage must:

- Teach the core curriculum as given in their training
- Not instruct, or advise outside their scope of expertise. Where appropriate the practitioner must encourage the client to seek advice.
- Not prescribe remedies, herbs, supplements or essential oils.

### **6.6. Maintaining instructor skills**

It is important that all practitioners who offer instruction in infant massage are aware of the implications of these good practice guidelines. The main issues will be communicated the following ways:

- Circulation of these guidelines
- Instructors regularly demonstrate techniques to parents and network with fellow instructors to maintain and develop their practice
- An infant massage instructor training course is available at intervals
- Where an instructor has not demonstrated techniques to parents for more than two years, their training should be repeated.

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## References

Achieving Our Potential: A Framework to tackle poverty and income inequality in Scotland, Scottish Government, 2008 <http://www.scotland.gov.uk/Publications/2008/11/20103815/0>

Carpenter P, Richards K. Olive versus mineral oil. *Community Practitioner*, 2011; 84(2): 40-2

The Early Years Framework, Scottish Government, 2008  
<http://www.scotland.gov.uk/Publications/2009/01/13095148/0>

Equally Well, Scottish Government, 2008  
<http://www.scotland.gov.uk/Publications/2008/06/25104032/0>

Field T, Grizzle N, Scafidi F, Abrams S, Richardson S. Massage therapy for infants of depressed mothers. *Infant Behav Develop* 1996;19(1):107-12. SIGN 127

Health in Scotland 2006: Annual Report of the Chief Medical Officer  
<http://www.scotland.gov.uk/Publications/2007/11/15135302/0>

Health for all children 4: Guidance on implementation in Scotland, Scottish Executive, 2005  
<http://www.scotland.gov.uk/Publications/2005/04/15161325/13269>

NHS Health Scotland, 2008 (Sport Waikato, Hamilton, New Zealand 1990) play @ home Baby Book

NHS Highland, 2007 & 2010 Baby Massage Instructor Training: impact survey outcomes (unpublished)

O'Higgins M, St. James Roberts I, Glover V. Postnatal depression and mother and infant outcomes after infant massage. *J Affect Disord* 2008; 109 (1-2): 189-92. SIGN 127

Ready Steady Baby, NHS Health Scotland, 2016  
<http://www.readysteadybaby.org.uk/first-days-together/caring-for-your-baby/crying.aspx>

Underdown A, Barlow J, Chung V, Stewart-Brown S.  
Massage intervention for promoting mental and physical health in infants aged under six months. *Cochrane Database of Systematic Reviews* 2006, Issue 4. Art. No.: CD005038. DOI: 10.1002/14651858.CD005038.pub2 <http://www.cochrane.org/reviews/en/ab005038.html>

Underdown A, Barlow J. Interventions to support early relationships: mechanisms identified within infant massage programmes. *Community Practitioner*, 2011; 84(4): 21-6

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Onozawa K, Glover V, Adams D, Modi N, Channi Kumar R

Infant massage improves mother–infant interaction for mothers with postnatal depression.

Journal of Affective Disorders Volume 63, Issues 1-3, March 2001, Pages 201-207. SIGN 127

Further reading:

*The Vital Touch* Sharon Heller, Henry Holt & Co, 1997 ISBN: 0-8050-5354-9

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**Appendix A**

**SAMPLE INVITATION LETTER**

**Baby Massage Classes**

Dear

The first session of the infant massage class will be on **Thursday**..... from **10am until 11.30am** (Don't worry if you are slightly late or you have to leave a little earlier).

**The classes will run for 5 weeks in total, the other dates are:**

**2<sup>nd</sup> , 9<sup>th</sup> , 16<sup>th</sup> and 25<sup>th</sup> March**

**The baby massage classes will be held in.....which is.....**

Please wear loose, comfortable clothing and bring a large and a small towel, and spare nappies. Massage sometimes makes babies a little thirsty / hungry, so please expect to feed your baby milk or water.

We will be using oil on the babies – please bring a small bottle containing **grapeseed, sunflower or coconut oil**. A travel bottle with a dispensing spout is easy to use, but any small plastic bottle will do.

Both parents and babies really enjoy the classes and massage can help with colic, constipation, feeding and sleeping. Drinking water will be available for you, after the massage session, so that you can relax while enjoying a chat with the other parents. The massage sessions are free of charge.

I look forward to seeing **you and your baby on** ....., please feel free to **contact me on** ..... if you would like any other information, directions, or are unable to make it on the first day.

Kind regards

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**INFANT MESSAGE: REGISTER**

**Appendix B**

**SESSIONS HELD AT** \_\_\_\_\_

Parent/Carer	Baby	Baby DOB	Telephone number	Attended on				

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## Appendix C

Please take a few minutes to let us know how you feel about these baby massage sessions. Your comments will help improve our courses.

### PLEASE TICK THE APPROPRIATE BOX

	☺	☹	☹
Did the instructor explain clearly what was going to happen?			
Was the instructor prepared for each session?			
Did the instructor demonstrate the massage strokes clearly?			
Was the location of the course suitable?			
Have you enjoyed the course?			
Has it helped you to feel closer to your baby?			
Would you recommend Infant Massage to other parents?			

If there is anything else you would like to tell us about the course, please write it in the space below:

**Thank you for your comments.**

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# ***CERTIFICATE OF ACHIEVEMENT***

and Baby

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have taken part in the baby massage sessions

Signed \_\_\_\_\_ Role \_\_\_\_\_ Date \_\_\_\_\_

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