VISITING POLICY TO NEWBORN CARE CENTRE – ROYAL HOSPITAL FOR WOMEN				
DATE	DATE	DATE FOR	<b>RISK RATING</b>	WRITTEN BY
DEVELOPED	REVISED	REVIEW	Low	H Dando
19/05/2015	N/A	19/05/2020		
DATE EFFECTIVE	REVISED BY			
01/06/2015				
APPLICABLE TO	Newborn Care Centre Staff – Nursing & Medical			
IMPLICATIONS	To be included in induction training of all new nursing /medical staff.			
APPROVED BY				
Newborn Care Centre Quality Committee on 1 <sup>st</sup> June 2015				
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### 1. AIM:

 To provide an extended, supportive visiting policy within the constraints of a Neonatal Intensive Care Unit (NICU) environment

## 2. BACKGROUND:

document outside NCC.

- Parental presence during hospitalization of their infants in the NICU cannot be overemphasized.
- Research has demonstrated attachment difficulties during the first days of life, and infrequent visitation during hospitalization is associated with an increased risk of poor outcome.<sup>1,2</sup>
- Increased presence of, and care by the caregivers in the NICU had improved quality of movement, less stress and less excitability by term equivalent. This early improved adaptive behaviour supports the need for early parenting in the NICU.<sup>3</sup>
- However, visitation policy should take the following into consideration:
  - o Confidentiality and privacy of infants and their families are to be respected
    - These infants are vulnerable to various infection risks and need to be protected from communicable diseases.

# 3. PATIENTS:

• All neonates admitted to Newborn Care Centre (NCC).

### 4. VISITING:

- Parents are able to visit NCC at all times
  - Parents are encouraged to be present for medical handover commencing at 8.30 am daily. However, parents are to participate in their individual handover only.
  - Parents will be able to nominate **4 primary visitors** to visit when they are not present, but only 2 visitors including parents are to be allowed at the bedside at any one time. Bathing or weighing will not occur during handover.
- Nominated primary visitors will be identified on babies notes and provided with an authorisation to visit.

They will generally not be given patient information

They will be asked to leave for rounds / procedures

They cannot bring in other visitors

They must be able to present their authorisation if requested

They must remain by the bedside when visiting

- Quiet Time
  - This occurs between 1 3pm to provide rest time for infants.
  - This time is limited to **one parent only** for Kangaroo Care or just sitting quietly by the bedside.

### 5. **RESTRICTIONS:**

- If visitors including parents and siblings have coughs, colds, flu symptoms, diarrhoea or vomiting, they are to promptly inform the staff and not to visit the NCC until the symptoms resolve and as advised by the NCC staff.
- Children other than siblings are not to visit during the hospitalisation of the infant.
- 2 visitors are only allowed at the bedside
- All nominated visitors should be over 18 years of age.
- Parents/visitors to remain with their infant only.
- No food or hot drinks are to be kept at the bedside
- All drinks must have lids and are not to be drunk while holding the infant.

#### 6. HANDWASHING:

- All visitors are encouraged to remove jackets/jumpers and roll up sleeves
- All visitors must wash their hands thoroughly at wash sink as they enter NCC

References

- 1. Fanaroff AA, Kennell JH, Klaus MH. Follow-up of low birth weight infants: the predictive value of maternal visiting patterns. Pediatrics 1972; 49: 287–290.
- Aucott S, Donohue PK, Atkins E, Allen MC. Neurodevelopmental care in the NICU. Mental Retard Dev Disabil Res 2002; 8(4): 298–308.
- Reynolds LC, Duncan MM, Smith GC, Marthur A, Neil J, Inder T, Pineda RG. Parental presence and holding in the neonatal intensive care unit and associations with early neurobehavior. J Perinatol. 2013;33(8):636-641.