

## Essential Care in the NICU during the COVID-19 Pandemic

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### Significance

Today, neonatal intensive care unit (NICU) staff are challenged with ever-changing and extraordinary conditions while they navigate a global pandemic. **Evidence-based practice guidelines for the provision of care during a pandemic simply do not exist.** Instead, NICU staff and leaders must **balance the risks and benefits of specific policies**, such as visitation guidelines, with respect to the holistic needs of the family. **The National Association of Neonatal Nurses (NANN), the National Perinatal Association (NPA), and the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) continue to support and emphasize adoption of a shared decision-making model for family presence.**

**Staff of the NICU understand the concept of family-centered care** because of the known benefits for maternal, newborn, and family health outcomes. As the definition of family expands and becomes more inclusive, AWHONN, NANN and NPA adhere to **the definition of family as “any group of people related either biologically, emotionally, or legally.”**<sup>1</sup> Parents, regardless of genetics, are the individuals who are essential to and committed to the infant’s care and wellbeing.<sup>2</sup> **Protocols and procedures in the NICU should be thoughtfully developed to respect and honor families’ values, culture, and preferences to promote healing and enhance health outcomes.** The purpose of family-centered care and neonatal intensive parenting units (NIPU) is to transform usual NICU care into family-integrated model in which parents are intimately involved in all aspects of care while in the NICU<sup>3</sup> and are valued as **respected members of the care team.**<sup>4</sup> An important component of the NIPU is attention to evolving relationships between hospital staff and families through the use of better practices after careful reflection.

### Discussion

The phrase “essential worker” entered the common vernacular amidst the COVID-19 pandemic. This phrase is used to describe those who continue to provide vital or essential services in the community such as health care, emergency services, transportation, food, etc. **In an unpublished study of NICU parents during the early months of the COVID-19 pandemic, one parent stated, “Parents are essential caregivers too.”** This profound statement has resonated with NICU staff and leaders and emphasizes the continued importance of maintaining open communication with parents as essential caregivers for their infants. **When possible, supporting family presence can help mitigate feelings of isolation and fear - and support learning, confidence, and security among parents.**

Parents are the most appropriate decision-makers for their infants. Parents care for and protect their children - in and out of the hospital - and are essential to child health and development through sustained interactions and engagement. **These close relationships are essential to the physical, emotional, and social well-being of the family.**<sup>5</sup> NICU staff understand the importance of family presence during infant hospitalization because it encourages attachment,<sup>5,6</sup> improves well-being and confidence among parents,<sup>7</sup> and enhances management of illness and continuity of care.<sup>8,9</sup> If an infant or parent requires medically necessary care, efforts to encourage presence<sup>10</sup> and interaction of the family is substantially important.

## Recommendations

AWHONN, NAAN, and NPA recognize that the ideal scenario of open visiting policies is simply not feasible today - or in the coming months. NICU staff and leaders are met with difficult decisions about how to maintain safe environments for staff, patients, and families. **We respect concerns related to the risk of SARS-COV-2 transmission with increased traffic within healthcare settings.** Therefore, any policy should emphasize that parents be held to the same social, personal, and professional standards set forth for healthcare workers to decrease the transmission of SARS-COV-2 within the hospital setting. **Parent-provider communication, relational-based developmental care, and the use of shared decision-making are key elements of neonatal care.** When possible, the NICU team could consider practices that include the following:

- **Parents should be provided unrestricted access to their hospitalized infant** should they choose to visit separately or together - especially for parents living in the same home.
- **Parent representation in groups when developing or changing policies** that directly affect families and proactive and honest communication about policies that affect family visitation when alternative choices are unavailable;
- **Thoughtful discussion with families on the expectations of “essential care” to strictly adhere to local health directive measures.** This includes educating parents on all local and institutional standards regarding strict social distancing, masking, hygiene, and travel restrictions to minimize the risk of SARS-COV-2 within the hospital;
- **Visitation plans for cases of life-threatening conditions** in the parent or infant;
- **Provision of approved face shields or clear masks** for family members to encourage family-infant attachment;
- **Provision of rapid testing for parents** before NICU entry if resources are available; and
- **Integration of video conferencing** for times when in-person visitation is not possible.

Circumstances differ for every NICU; respect for the difficult responsibilities of NICU staff and leaders is of utmost importance. **As we look for timely, interdisciplinary responses and solutions, we advocate for maintaining an open dialogue** with our colleagues across the world that both respects our individuality and inspires innovation. **AWHONN, NAAN, and NPA recommend the incorporation of trauma-informed care for all interactions during the pandemic and for the recognition of parents as essential caregivers for their hospitalized newborns.**

## References

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