

## Background

**Background** At a NICU staff meeting, we discovered that our parent satisfaction scores were low, largely due to our strict visitation policy. Although the current visitation policy was established to prevent infection in our incredibly vulnerable population, we decided to review literature to discover whether or not our policies were based on evidence.

**Purpose** The purpose of this project is to examine whether or not allowing more visitors in the NICU is associated with an increased infection rate in patients. After examining the evidence, we educated NICU staff on our findings.



## NICU Visitation

"Parents are important partners in the neonatal intensive care unit, collaborating with staff in caregiving and decision making for their infants."



Studies have found that an increase in healthy visitors to the NICU is *not* associated with higher infection rates in NICU patients.



Evidence shows that the *best* way to prevent infections is proper hand hygiene.

An Open Unit visitation policy has been shown to decrease length of stay, improve parent satisfaction, and decrease parental anxiety.

"An increase in visitors does (provide) families a chance to be complete rather than a divided family."

Inova Fairfax NICU is implementing a new visitation policy starting February 18<sup>th</sup>, 2019. Education coming soon!



### Visitation Guidelines coming February 18<sup>th</sup> 2019:

All visitor guidelines are subject to the discretion of the medical team. There are times that these rules do not apply to your baby in order to provide the best care to your infant. We ask during those times that you understand that these decisions are always made in the best interest of your baby.

1. Anyone over the age of 18 may visit as long as they visit with a white-banded parent
2. Three people can be at the bedside at any given time, but one person must always be a white banded parent
3. Visitors may touch the infant at the discretion of the parents
4. Visitors may hold infant over 35 weeks of age, with no central lines and not on a ventilator, at the discretion of the parents and medical team
5. For infants over 1 month of age, parents may designate 2 people (18 years old and over) who may visit without a parent. They must watch the infection control orientation video or attend the infection class before they can start visiting without the parent. They cannot get medical updates, make medical decisions, or bring other visitors. They may participate in cares but may not feed the infant. The 2 individuals designated by the parents must remain the same for the remainder of the infant's hospital stay

### Additional Visitor Guidelines coming end of flu season 2019:

6. Sibling visits – all sibling visits must start with an initial consultation with a Child Life Specialist and evidence of current immunizations.
  - a. Siblings over 13 years old may visit with just a parent after pre-approval. Visits will be limited to a maximum of 30 minutes.
  - b. Siblings under 13 years old must have an appointment to be escorted by a Child Life Specialist
  - c. Siblings can do hand/feet hugs with approval of a Child Life Specialist
  - d. Siblings can hold infants over 35 weeks, with no central line and not incubated, at the discretion of the parents
  - e. Siblings can all visit together at the discretion of a Child Life Specialist

## Findings

Evidence shows that increase in visitors to the NICU is not associated with an increase in infection rates, provided that the visitors are free of cold or flu-like symptoms. An increased number in visitors has been correlated with shorter NICU stays and allows the parents to be supported during this stressful time. Evidence further shows that handwashing, wiping down cell phones with antibacterial wipes, and cleansing skin before kangaroo care, are effective strategies for infection prevention in the NICU.

## Implications for Practice

Towards the completion of our project, we were contacted by more senior nurses who had been working towards changing our visitation policy. Our findings correlated exactly with theirs. Visitation policy changes have now been approved which will take place in late February. Parents will be allowed to have more visitors at the bedside, and will no longer be restricted to a permanent list of 4 or less visitors for their child's entire stay. The flyer was placed throughout the NICU to educate staff on the fact that our policies will be changing and why. This will help educate staff before the changes take place so that nurses will be receptive to the new dynamics of visitation in our unit.

## References

- Griffin, T. (2006). Family-centered care in the NICU. *The Journal of perinatal & neonatal nursing*, 20(1), 98-102.
- Davidson, J. E., Savidan, K. A., Barker, N., Ekno, M., Warmuth, D., & Cort, A. D. (2014). Using Evidence to Overcome Obstacles to Family Presence. *Critical Care Nursing Quarterly*, 37(4), 407-421. doi:10.1097/cnq.0000000000000041
- Voos, K. C., & Park, N. (2014). Implementing an open unit policy in a neonatal intensive care unit: nurses' and parents' perceptions. *The Journal of perinatal & neonatal nursing*, 28(4), 313-318.

## Project Contact

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