

Infection Control

The neonatal immune system is much less efficient in a number of fundamental ways, predisposing the infant to infection. To date, the transport teams have transferred babies to or from 70+ different neonatal units. When transferring babies between hospitals, the team have a responsibility to ensure not only that the baby is protected from exposure to any infective agents, but also that there is no cross infection between the units that are served by the transport team. Cleaning is also necessary to maintain the appearance and integrity of the equipment.

Routine cleaning of incubator, equipment, and ambulance

At least once a week, the incubator must be taken to NICU, and thoroughly cleaned. All IV pumps should be taken off the top of the transport rig, and the incubator hood removed and dismantled. The mattress and tray can then be removed from the incubator, and all hard surfaces should be cleaned with hot soapy water, and then dried. A vital part of the cleaning process is drying, as this encourages the death of bacteria, especially Gram-negative bacilli.

Hand Hygiene

The term hand hygiene includes both hand washing with either plain or antibacterial soap and water, and use of alcohol based products containing emollient that do not require the use of water. For routine hand decontamination, in the absence of visible soiling of the hands, approved alcohol based products are preferred over antibacterial or plain soap and water because of their superior microbial activity, reduced drying of the skin, and convenience.

The following items are not permitted when providing direct patient contact: artificial nails or nail varnish; rings, other than one plain metal band; bracelets or bangles worn on the wrist; neck ties; long sleeved garments; wrist watches. Hand hygiene can not be guaranteed if any of these items are worn.

Single use gloves must be worn when there is potential or actual contact with body fluids, blood or other potentially infectious or hazardous materials.

On arrival at referring unit

All members of the team will wash and dry their hands using an appropriate cleaning agent provided by the unit, and then apply alcohol gel to their hands. In the absence of visible soiling of the hands, team members should disinfect their hands using the alcohol gel. If there is any doubt, hands should be washed and dried using soap, and then alcohol gel applied.

Whilst caring for the baby in the ambulance

Staff will not have access to running water, so gloves should be worn for most patient contact, and hands should then be disinfected using the alcohol gel as previously described.

On arrival at Receiving Unit

All members of the team will wash and dry their hands using an appropriate cleaning agent provided by the unit, and then apply alcohol gel to their hands. In the absence of visible soiling of the hands, team members should disinfect their hands using the alcohol gel. If there is any doubt, hands should be washed and dried using soap, and then alcohol gel applied.

After the baby has been moved from the incubator, all surfaces of the incubator will be sprayed with antibacterial spray and wiped clean. Any areas of visible soiling will be washed with soap and water and then dried. The monitor, IV pumps and leads will also be wiped clean. Any ventilator circuits used will either be disposable, or sent to CSSD for disinfecting between patients.

Babies with known infective agents

If a baby is transferred with a known infective agent, they will be barrier nursed with gloves and plastic apron. Once the baby has been moved from the incubator, it will be stripped down as described above and all hard surfaces cleaned with hot soapy water, dried and reassembled. This should be done in the accepting unit before departure.