

Neonatal Intensive Care Unit (NICU)

STANDARDS

NICU.1 Qualified physician is responsible for managing the neonatal intensive care unit.

- NICU.1.1 The department head is a qualified Pediatrician with experience in neonatology (for level 1 and 2 NICU) and certified neonatologist (for level3 NICU).
- NICU.1.2 The department head takes the overall responsibility for the operation of the unit.

NICU.2 The neonatal intensive care unit nurse manager is a qualified registered nurse.

- NICU.2.1 The nurse manager is qualified by education, training, and experience in neonatal intensive care.
- NICU.2.2 The nurse manager develops and collaborates with NICU physicians and other departments as needed for developing policies and procedures for the unit (e.g., policies and practices related to infection control).

NICU.3 Medical and nursing staff working in the neonatal intensive care unit have the appropriate cardiac life support training.

- NICU.3.1 Medical staff working in neonatal intensive care unit are certified in Neonatal Resuscitation Program (NRP).
- NICU.3.2 Nursing staff working in the neonatal intensive care unit are certified in Neonatal Resuscitation Program (NRP).

NICU.4 The neonatal intensive care unit is covered by qualified physicians.

- NICU.4.1 The neonatal intensive care unit is covered twenty four hours a day, seven days a week by qualified neonatal intensive care physicians.
- NICU.4.2 For a Level 3 unit, there is certified neonatologist to cover the unit during the on call hours.

NICU.5 The neonatal intensive care unit has admission and discharge criteria.

- NICU.5.1 The neonatal intensive care unit identifies its own population based on age and diagnosis related groups.
- NICU.5.2 The admission and discharge criteria are defined in writing.
- NICU.5.3 Criteria for admission are based on physiological parameters.
- NICU.5.4 The criteria are developed collaboratively between relevant staff.

NICU.6 Patient care in the neonatal intensive care unit is coordinated.

- NICU.6.1 There is a documented evidence of handover between physicians at change of shift.
- NICU.6.2 There is a documented evidence of handover between nurses at change of shift.
- NICU.6.3 There is a documented evidence of handover between neonatal intensive care nurse and unit nurse at the time of transfer to a lower acuity of care.