

Using the Hugs[®] system for intensive care infants

The UCSF Children's Hospital, in San Francisco, California, has been using the Hugs system since 2000. Protection of newborns within its Intensive Care Nursery (ICN) has always been standard practice for the hospital.

This policy is a natural result of the UCSF Children's Hospital's focus on high risk pregnancies. The ICN is a mixed unit for both intensive care and intermediate care, and works very closely with Obstetrics. Infants pass back and forth frequently. "There needs to be a uniform standard between the two units," notes Michelle Cathcart, Patient Care Manager of the ICN.

At any one time, approximately 20 infants in the ICN are being protected by the Hugs system, representing half of the patient census. The hospital's policy is to band infants over 1000 grams who are not on an ventilator. Most at this stage still require continuous cardio-respiratory monitoring.

Infants requiring ventilator support are protected by two-way care, where there is an intensive care nurse for every two infants, and staff monitoring is continuous.

In addition to the added security, Ms. Cathcart believes that the Hugs system also helps with workflow. "The way our unit is set up, the unit service coordinators can't see the different rooms and where the patients are." The Hugs system provides a structure for managing patient movement, because it requires staff to sign infants out in order to transport them for procedures, and prompts them when the infant is expected back.

The hospital has often been lauded by auditors and regulatory bodies for its efforts to protect infants within the ICN. "I don't think you can have too much surveillance," Ms. Cathcart says.

Overview

More and more hospitals are choosing to extend the protection provided by the Hugs system to newborns requiring intensive care. The University of California at San Francisco (UCSF) Children's Hospital is one such facility.

