



NICU design

Core principles of NICU design to promote family-centred care

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Statement of the standard

Neonatal care is optimised by utilising key design elements to promote the family as primary care givers throughout the stay.



For parents and family

- Parents and family are informed by healthcare professionals about NICU design and are part of the planning process for NICU design.
- Parents are educated by healthcare professionals about housekeeping rules, patient safety and hygiene, to facilitate their active role in the care of their infant.



For healthcare professionals and relevant stakeholders

- A unit guideline on the organisation of care in developmentally supportive adapted NICU design is adhered to by all responsible stakeholders.
- Training on the basic emotional, social and psychological needs of patients, parents and siblings, and of the principles of family-centred care is attended by all responsible healthcare professionals and stakeholders before they are involved in the planning process for a new unit.
- Healthcare professionals are part of the planning process for a NICU design.



For health service

- A national guideline for NICU design incorporating the principles of family-centred care is available and regularly updated.
- Parents and NICU healthcare professionals are involved in guideline development and planning processes.

Benefits

Short-term benefits:

- Facilitated implementation of family-centred and developmental care
- Improved parental presence, confidence and parent-infant interaction both pre- and post-discharge
- Reduced rate of late-onset neonatal sepsis

Long-term benefits: N/A



For neonatal unit and hospital

- A unit guideline on the organisation of care in developmentally supportive adapted NICU design is available and regularly updated.
- Training on the basic emotional, social and psychological needs of patients, parents and siblings, and of the principles of family-centred care for everyone participating in the planning process is ensured.
- Family-centred care supportive areas are included during the design process.
- Patient treatment area: each patient space has at least enough room for a comfortable chair and a hospital bed for parents next to the infant's cot (minimal space 18 m²) taking into account family integrity and privacy; additionally separate parent sleeping facilities including a toilet and shower are sited within the neonatal unit (minimal space 10 m²).
- Single occupancy areas: facilities for infants and caregivers are located in the same room (minimum space 24 m²), and designed to take into account family integrity and privacy.
- Clinical and monitoring working areas are located in close proximity to patient areas.
- Areas for eating and socialising for parents, private rooms for parent counselling, and staff rooms out of sight of parents are available on the ward.
- Bereavement space and space to stay with the infant after death is provided within the design.
- The unit is built to comply with patient safety standards.

