Infection Prevention within Sick Newborn Units

Small and Sick Newborn Buzz Session
August 11, 2020
Dr. Robert Dreibelbis and Steve Sara
Objectives

1. Discuss challenges and generate solutions on selected themes for implementing family centered care.

2. Share experiences and discuss pragmatic actions that countries can take to implement, sustain and scale solutions.

Photo credit: Karen Kasmauski/CHSP
Discussion Logistics

• 40 minute discussion
• We have a note-taker for the session and the co-facilitator will report back to the wider group on the key points from our discussion
• Raise hand and the co-facilitator will call on you to share your input
• Please provide other participants with opportunities to contribute before raising multiple points
• When speaking, introduce yourself and your organization
• If we don’t get to your comment or question, please type it in the chat box so that we have it captured and can refer back to it through the website or another forum
Infections are a serious risk to small and sick newborns

- Around one-third of the world's 2.8 million neonatal deaths are caused by infection, with preterm and low birth weight babies at increased risk (Moxon, S. et al 2015)

- Among hospital-born babies, infections are responsible for 4% to 56% of all causes of death in the neonatal period (3/4 in South-East Asia and sub-Saharan Africa). (Allengranzi et al, 2011)

- Rates of healthcare-acquired infections (HAI) in newborns are 20 times higher in resource-limited settings compared to developed country context, with inadequate environmental hygiene and low adherence to infection prevention and control cited as potential explanations (Allengranzi et al, 2011)
Access to basic WASH services in healthcare facilities is low

- **Water**: 26% of HCFs globally lack access to basic water services
- **Sanitation**: 21% of HCFs globally had no sanitation service
- **Hygiene**: 33% of HCFs globally had no hygiene service
- **Waste Management**: 73% of HCFs in least developed countries lacked basic waste management services
- **Environmental Cleaning**: Insufficient data available to provide global or regional estimates
Even when WASH services are available, they are not frequently used.

Hand hygiene compliance in hospitals in Bangladesh (National Hygiene Baseline Survey, 2014) (%)

Hospital workers do not always practise hand hygiene at the five key moments:

- Before touching patients: 9% washed hands with water only, 2% with soap and water, 1% used alcohol-based hand rub.
- Before clean/aseptic procedures: 13% washed hands with water only, 1% with soap and water, 6% used alcohol-based hand rub.
- After bodily fluid exposure or using the toilet: 46% washed hands with water only, 8% with soap and water, 5% used alcohol-based hand rub.
- After touching patients or wounds: 17% washed hands with water only, 8% with soap and water, 5% used alcohol-based hand rub.
- After touching patients’ surroundings: 21% washed hands with water only, 9% with soap and water, 2% used alcohol-based hand rub.
Discussion Question #1

What are the challenges faced to improving and sustaining infection prevention for small and sick newborns?
Discussion Question #2

What are some experiences pragmatic actions that countries can take to implement, sustain and scale solutions?