

# NTG position statement 24 April 2020 Cath Harrison, NTG chair

NTG are holding regular meetings for clinical leads to review activity and share learning points in response to the Covid 19 pandemic.

## Transfers

We continue to prioritise acute uplift in care transfers of babies in line with the established care pathways, and repatriations are being done to maintain patient flow and NICU capacity.

We are not moving babies with COVID unless there is another clinical reason to do so.

### Parents

No transport teams are taking parents with them on transfers except in exceptional circumstances such as palliative care or the baby is not expect to survive.

## **PPE / Infection Control**

There remains a wide variation on PPE requirements from unit to unit, which is challenging for transport services. Regional coordination of PPE requirements would be beneficial. Currently teams are being guided by their host trusts about the level of PPE to wear and the majority of teams are moving babies in incubators for added protection.

At referral, local teams are encouraged to provide details of the level of PPE being worn by their staff. However, transport teams will be referring to their own PPE guidelines as to which level to use.

Receiving teams are being asked to confirm access routes to their Units when transferring suspected / confirmed infectious patients if these are different to usual.

It is important for transport teams to be included in discussions about any changes in Covid status of patients who are being referred for transfer, or have recently been transferred.

## Stabilisation and transfer times

Due to PPE requirements and extra cleaning of equipment after transfers, teams may take longer than usual to arrive at referral hospitals due to longer turnaround times between transfers.

Referring units may need to continue stabilising and managing patients for longer than usual.

Stabilisation by the transport teams may also take longer due to constraints of wearing PPE. A local team member is required to stay with the transport team during stabilisation with a "clean" runner also available to obtain equipment/drugs/fluids etc as needed.

## Transport surge

A neonatal transport surge plan has been written which is with NHSE.

Teams are reviewing protocols, equipment and competencies to potentially transfer small paediatric patients that are out of their scope of normal care, to ease pressure on the paediatric transfer teams if activity/demand increases.