COVID-19 – Ensuring safe breastfeeding and newborn care: Lessons from Countries

PMNCH + ECDAN Tuesday, July 7th 2020

Colombia

Adaptation of Kangaroo Mother Care Programs in the context of COVID-19

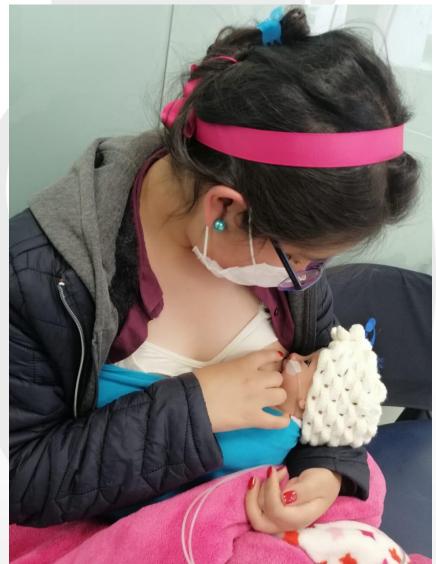
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Pediatrician

Director of the Kangaroo Foundation

On behalf of the team of the KMCPs (PMCI)

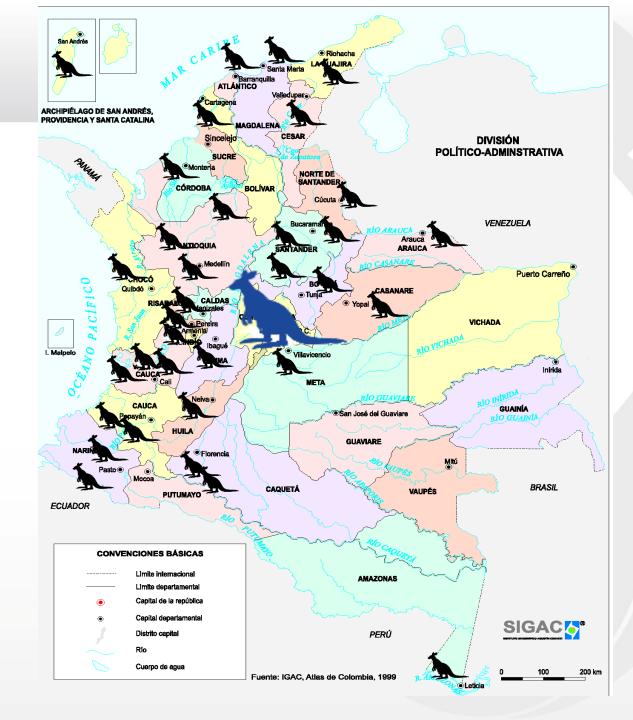




June 2020: Joint consensus between the Ministry of Health, the Colombian Neonatology Society (ASCON) and the Kangaroo Foundation for the management of the kangaroo babies

- Material available: English translation of the recommendations of April-May and update of June 2020.
- The Ministry of Health participated in the joint consensus and published its own technical guides for the management of pregnancy, delivery and newborn care during the COVID pandemic with a special chapter for breastfeeding and the Kangaroo Mother Care programs.





Mapping of the 53 KMC programs in Colombia

50 millions of inhabitants, 12% of premature or LBW deliveries



June 30, 2020

- 98.1% read the document and 90.6% are following the recommendations
- Which recommendation is the most difficult to implement?
- 1. Social distancing
- 2. Coming to the hospital (parents)
- 3. Only one person can come with the baby, grandmother and siblings cannot come
- 4. Implementation of telemedecine
- 5. Personal Protective Equipment (PPE) for all the staff
- 6. Support for Transportation from rural areas
- 7. Others: Mask and correct use from parents, rooming in for the mother and the baby suspected or confirmed COVID, 24h phone access for parents, first appointment in 48h post discharge, not doing all the follow-up between 40 week and 1 year, surface disinfection between each patient, managing big volume of patients, evaluation by retinologist, closed NCU and NCIU with regular breastfeeding at discharge

- Which recommendation you were not able to implement?
- 1. All recomendations were implemented >50%
- 2. Informed consent for telemedecine
- 3. Follow-up with all the rules described in the KMC technical guide of the Ministry of Health
- 4. Correct use of the PPE by the health staff
- 5. Kangaroo adaptation with position and breastfeeding in the NCU
- 6. Others: Social distancing, screening for ROP, rotating staff, telemedecine for the follow-up between 40 weeks and 1 year, vaccination, first appointement in 48 h post discharge, follow-up of parents by phone, transportation from outside the city



- Which recommendation would you add?
- 1. Education of parents and staff on the importance of the telemedicine
- 2. Protocol of collaboration between health insurances and KMCP for transportation
- 3. Protocols on the necessity to have presential or virtual consultation of parents and patient
- 4. Strong support of the vaccination program
- 5. Protective mask for the babies to come to the KMCP
- 6. Domiciliary visit in specific cases



7. Others: Protocol for infant with oxygen-dependancy, pulsoximetry for all?, protocols for insurances on how to manage the baby with suspected or confirmed COVID, emotional management of parents and staff, standardization of the use of PPE: how many days for the masks.... screening of all the staff for COVID (PCR? Serology?), measurement of temperature at entry in the KMCP, workshop for parents on basic reanimation at home



June 30, 2020

- All the staff is feeling they are protecting breastfeeding, 98.1% believe they protect also the bonding and the attachment between the mother and baby and 100% believe they are protecting the mental health of all the family.
- 90.6% answered that all the protective measures for staff and parents are taken. During these 3 months, 3 members of the KMC staff were tested positive: 2 pediatricians working both in the KMCP and in the hospital and one administrative member with a family contact. One symptomatic.
- The staff of the KMCP believe that once hygiene measures are explained to parents they agree at 100% to carry their baby in kangaroo position and to breastfed him/her, only 88.7% agreed to come for the appointment and in 10% they had problems to convince parents to come for vaccination.



Successful experience in a third level neonatal unit of the San Ignacio University Hospital in Bogota





Skin-to-skin contact as soon as possible, for as long as possible

- If the baby is COVID suspected or confirmed, isolation and a healthy member of the family can become the care provider of the kangaroo position while the mother or the father become negative for RP-PCR
- One member of the staff will be dedicated to the care of the isolated infants with suspected or confirmed COVID.
- Direct breastfeeding or extracted breastmilk are the priority for all the newborns of the neonatal unit











Successful experience in the ambulatory KMC programs (PMCI) in Medellín and Bogota (3.000 premature or LBWI per year)



1. New organization of the space and of the working hours of the staff





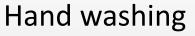


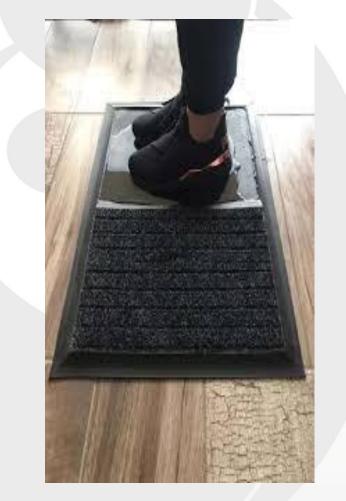
2. Implementation of the biosecurity protocol at entry to the KMC program



Measurement of the temperature







Shoes washing



Availability of hand sanitizer for staff and parents

3. Use of PPE for the staff











4. Protective measures for parents and babies





Pediatric evaluation



5. The ambulatory kangaroo consultation



Nursing evaluation

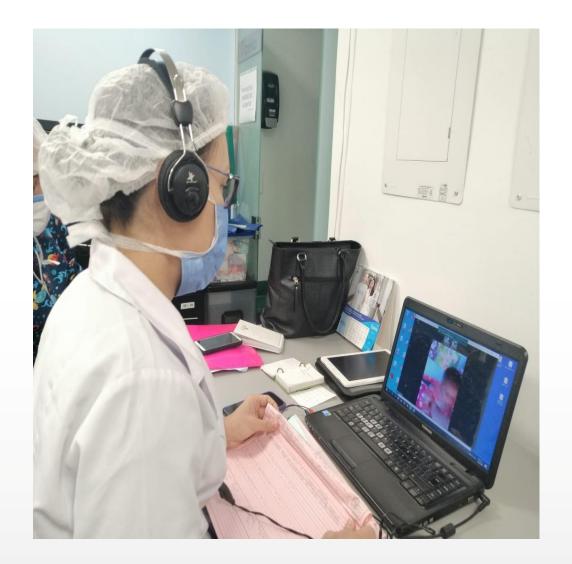
6. Lactation support, psychology and psychomotor evaluation, charity groceries for the poorest (Medellin)



7. Screening for ROP and audiology



8. Integration of telemedicine (Colombian Res.521/2020) to the KMCP follow-up





8. Strict protocols for disinfection













The new look of the Kangaroo staff in Medellin!



Thank you









