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Facing challenging times in neonatal nursing

Children's and neonatal nurses, like everyone in the nursing team, are facing the dual pressures of efficiency savings and structural reform, often alongside organisational cultures prioritising financial targets over patient care.

In his recent report, Sir Bruce Keogh recommended that NHS employers should make efforts to ensure staff are happy and engaged. For too long, nursing staff have been unsupported. Robert Francis recognised some of the most significant pressures preventing nurses from delivering the standard of care they would like.

Now, however, the recent string of high profile reports and inquiries, revealing the pressures facing nurses and evidencing the need for nurses to be given the time and tools to do the job, present new opportunities.

Recently, a study from the Florence Nightingale School of Nursing and Midwifery hit the headlines, revealing the vast numbers of nurses having to 'ration' the care they provide because they simply haven't got the time to deliver it. Eighty-six per cent of nurses had not been able to complete at least one of the 13 care activities they consider necessary for patient care on their last shift. Significantly, the research found this issue to be more prevalent where nurses were caring for high numbers of patients and where they experienced practice environments they perceived to be worse.

One of the major findings of Robert Francis' report was the importance of safe staffing levels in preventing failings in care. This is a critical issue across all specialisms, not least in community services and neonatal nursing, which have older age profiles of nursing staff. Efficient workforce planning is therefore all the more important in this area, as in neonatal nursing which continues to have too few experienced staff. It is vital that employers consider neonatal nursing in their training plans, as the Centre for Workforce Intelligence has recently advised.

Recruiting the right numbers of nurses, with the right skills, is essential if we are to deliver high quality patient care for infants. The RCN continues to call for mandatory staffing levels, enshrined in law, and we have recently published guidance that clearly sets out the minimum nurse staffing levels for providing health services for babies, children and young people.

Where nurses don't have the tools or the skills to

do the job, they must be empowered to speak out. For too long, we have seen a closed, pervasive culture in the NHS.

Shockingly, the RCN's recent survey found that a quarter of nurses have been discouraged or warned off raising concerns about patient care, despite the high profile inquiry into Mid Staffordshire. Furthermore, just under half of those who raised concerns said their employer took no action.

Together, we need to ensure nurses are empowered, not punished, when they want to speak up, and that nurses take responsibility to report unsafe staffing levels and speak out when they believe they do not have the right knowledge, skills or competence to do the job.

With children's health, there is a strong recognition of the importance of the partnership between infants, families and those delivering care. Nurses have a major role to play in this.

In developing a model of family-centred care for neonates, the RCN Research Institute found that for parents, their primary needs were communication, support and information. A named key nurse responsible for coordinating care, as recommended by Francis, is a welcome move across settings, and the value of this role in children's nursing is well recognised.

A key nurse ensures parents and carers know who is in charge of and coordinating their child's care, allowing an expectation of regular and predictable contact between patient and nurse.

Looking to the future, nurses need to come together and make the most of the evidence of what already works. In children's nursing we know the importance of taking ownership of patient care, effective communication and safe staffing levels. We know these things work for children and families and we know they work for nurses who feel engaged and empowered to deliver high quality care.

The Francis report presents a watershed moment in the NHS and a real chance to do things differently. The RCN is working hard to ensure the Government, as well as NHS and independent sector organisations, implement the most important of Francis' recommendations to empower neonatal nurses to deliver the standard of care they came into this remarkable profession to provide.