

Evidence Brief: Neonatal Nursing

Contents

Key publications – the big picture	2
Case Studies.....	3
The Star for workforce redesign.....	3
Statistics.....	4
National Data Programme.....	4
Published Peer Reviewed Research.....	4
Staff experiences.....	4
Competencies and capabilities.....	5
Supply	6
Training and education.....	9
Retention and Attrition	17
Advanced Practice	19
Workforce	20
Burnout and resilience.....	23
In the news.....	27
Competency Frameworks	28
*Help accessing articles or papers.....	29

Produced by the Knowledge Management team Evidence Briefs offer an overview of the published reports, research, and evidence on a workforce-related topic.

Date of publication: June 2024

Please acknowledge this work in any resulting paper or presentation as:
Evidence Brief: Neonatal Nursing. Katie Nicholas and Katy Greenfield. (June 2024). UK:
Workforce, Training and Education Knowledge Management Team

There may have been an update to this Evidence Brief - to check you are reading the most current version please see the links below:

- [Complete Evidence Brief list – link for Workforce, Training and Education staff](#)
- [Complete Evidence Brief list – link for External staff](#)

Key publications – the big picture

[Neonatal services for the future: a manifesto](#)

Source: Bliss

Publication date: November 2023

Our manifesto at a glance

- 1) Create a neonatal workforce for the future
 - 2) Address inequalities to give every baby the best chance in life
 - 3) Support parents to stay at their baby's side
 - 4) Help families overcome financial barriers to being involved in care
 - 5) Provide equal employment support
- See 1) *Create a neonatal workforce for the future*

[NHS Long Term Workforce Plan](#)

Source: NHS England

Publication date: June 2023

The first comprehensive workforce plan for the NHS, putting staffing on a sustainable footing and improving patient care. It focuses on retaining existing talent and making the best use of new technology alongside the biggest recruitment drive in health service history.

[Three year delivery plan for maternity and neonatal services](#)

Source: NHS England

Publication date: April 2023

See *Theme 2: Growing, retaining and supporting our workforce*

2.1 The ambition of safer, more personalised, and more equitable maternity and neonatal services in this plan can only be delivered by skilled teams with sufficient capacity and capability. However, despite significant investment leading to increases in the midwifery, obstetric, and neonatal establishment, NHS maternity and neonatal services do not currently have the number of midwives, neonatal nurses, doctors, and other healthcare professionals they need. This

means existing staff are often under significant pressure to provide the standard of care that they want to. We need to change that. The plan is informed by the best available evidence, including the [QMNC framework](#) which underpins the [NMC midwifery standards](#). This theme sets out three areas of action for maternity and neonatal staffing: continuing to grow our workforce; valuing and retaining our workforce; and investing in skills.

[Neonatology: GIRFT Programme National Speciality Report](#) Free registration to FutureNHS Platform required to join the workspace and view the report

Author(s): Adams et al.

Source: NHS Getting It Right First Time (GIRFT)

Publication date: April 2022

The GIRFT neonatology review follows NHS England's Neonatal Critical Care Transformation Review (NCCR), which published an action plan in December 2019 focused on aligning and investing in capacity, developing the expert neonatal workforce and improving the experience for families. The GIRFT review provides more granular detail on progress in these areas (see also GIRFT's Neonatology Workforce Report), as well as exploring new areas for improving clinical care and patient safety.

See also ["Neonatology supplementary workforce report"](#)

[RCOG Workforce Report 2022](#)

Source: Royal College of Obstetricians and Gynaecologists

Publication date: February 2022

Since the last RCOG workforce report in 2018, the O&G profession has faced many challenges. Although the birth rate is falling nationally, there are rising levels of clinical complexity, budget cuts and staffing shortages of doctors, midwives, nurses and other allied professionals. Whilst demand for services in some areas is declining, there are increased requirements in

other areas due to demographic shifts, an aging population and rising levels of obesity. All of this has been magnified and compounded by the Covid-19 pandemic which has required health professionals to work differently and adapt services to continue to provide care to women.

[A snapshot of neonatal services and workforce in the UK](#)

Source: Royal College of Paediatrics and Child Health

Publication date: September 2020

The current study was conducted on a weekday and weekend day in September 2019, and surveyed 191 neonatal services. Results from this snapshot were reported back to neonatal services in January 2020 through individual benchmarking reports produced by the GIRFT team. This report summarises the findings at a national level.

[Safe, sustainable and productive staffing: an improvement resource for neonatal care](#)

Source: National Quality Board

Publication date: June 2018

This improvement resource is designed to be used by those involved in clinical establishment setting for nurses working in neonatal care, from the ward manager/sister/charge nurse to the board of directors. NHS provider boards hold individual and collective responsibility for making judgements about staffing and the delivery of safe, effective, compassionate and responsive care within available resources (NQB 2016).

Case Studies

[Using the NNAP measure for neonatal nurse staffing to support benchmarking, oversight of safe staffing and quality improvement](#)

Source: Royal College of Paediatrics and Child Health

Publication date: October 2023

This QI project reviewed nurse staffing data to drive forward improvements in: shift leadership, QIS nursing ratios and skill mixing for safer staffing and inform recruitment, workforce planning and investment via budget setting in each Trust.

[Increasing neonatal palliative care support](#)

Source: NHS England

Publication date: July 2018

A Children's Nurse at Rainbows Hospice has created a new service to help and support families across the East Midlands region who experience the death of a baby before, during or shortly after birth – forging links across services and raising the awareness of the end-of-life-care services available from Rainbows.

Following a successful pilot project, a Children's Nurse at Rainbow's Children's Hospice, developed the Neonatal Link Nurse role – which has already received 40 referrals in the first 12 months (to December 2017) across the East Midlands. Close collaboration has been established with several of the hospitals across the East Midlands, including University Hospitals of Leicester NHS Trust.

The Star for workforce redesign

More resources and tools are available in the “neonatal” section of [the Star](#)

Statistics

You can find relevant statistics on the [Health and Care Statistics Landscape](#) under “**Health and Care**” and use the “**Child and Maternal health**” filter

[Maternity and Neonatal Data Hub](#)

Source: NHS England – Digital This data hub is designed to signpost to a variety of resources containing maternity and neonatal data and information, and contains links from a wide range of public, private, and third sector organisations.

National Data Programme

Workforce, Training and Education staff can look at the [National Data Warehouse \(NDL\)](#) SharePoint site to find out more about datasets and Tableau products.

Published Peer Reviewed Research

Staff experiences

[Qualitative Study of Nurses' Experiences as They Learned to Provide Neonatal Palliative Care](#) Abstract only*

Authors: St Louis, Julia; Raffin-Bouchal, Shelley; Benzies, Karen and Sinclair, Shane

Publication Date: May 2024

Journal: JOGNN - Journal of Obstetric, Gynecologic, & Neonatal Nursing 53(3), pp. 264-271

OBJECTIVE: To describe the experiences of nurses as they

learned to provide palliative care in the NICU. DESIGN: Interpretive description. SETTING: Four NICUs in three Canadian provinces, including one rural center and three tertiary centers. PARTICIPANTS: Nine NICU nurses with 3 to 21 years of experience who provided neonatal palliative care. METHODS: We collected data using online interviews that we recorded and transcribed. We analyzed data using immersion, inductive coding, reflective memoing, and thematic analysis. RESULTS: Participants received little or no formal education in neonatal palliative care and instead learned to provide this care through observation and experience. Participants said it was important to find meaning in their work, which contributed to their motivation to learn to provide high-quality neonatal palliative care. Participants described challenges, including unit cultures in which early palliative care was not embraced. We identified three overarching themes that represented the participants' experiences: Meaning-Making in Neonatal Palliative Care, Challenges in Providing Neonatal Palliative Care, and Ill-Prepared to Provide Neonatal Palliative Care. CONCLUSION: Standardized education may improve the quality of care and nurses' experiences with neonatal palliative care. We recommend designing and evaluating a standardized curriculum on neonatal palliative care.

[Level 1 neonatal nursing staff perceptions of their role: A qualitative Framework Analysis study investigating the complex and diverse workload undertaken by nurses in special care baby units.](#)

Authors: Gibbs, D.; Odeh, N.; Theron, M. and Harding, C.

Publication Date: 2021

Journal: Journal of Neonatal Nursing 27(4), pp. 244-250

This study investigated Level 1 Special Care Bay Unit (SCBU) nurses' perceptions of the skills required for their role. Eight nurses from a UK inner city Level 1 neonatal unit participated in

qualitative interviews about their role. Analyses were based on data collected from semi -structured interviews supported by open -ended questions and use of a topic guide. The SRQR (Standards for Reporting Qualitative Research) checklist was used as a framework to support the qualitative analytical methods undertaken. Level 1 neonatal nurses reported use of a wide range of skills with a high level of parent - infant engagement. Analysis of the participant interviews revealed six themes: a) balancing nursing workload and demands; b) delivering nursing care in a Level 1 SCBU; c) managing clinical risk and emergencies; d) function and sustainability of a SCBU neonatal team; e) delivering family-centered care; and f) external perceptions of Level 1 nursing care. Work on a Level 1 unit consists of a broad range of skills, possibly greater in scope in comparison with skills used by neonatal nurses on Level 2 and Level 3 units. Further in - depth analysis of this role would be useful for the development of practice skills and for recruitment and retention.

Competencies and capabilities

[Integrating a skills checklist into the COINN neonatal nurse competencies.](#) Abstract only*

Authors: Prullage, G. S.;Walker, K.;Kenne, C. and Jones, T.

Publication Date: 2022

Journal: Journal of Neonatal Nursing 28(3), pp. 200-202

In 2019, the Council of International [Neonatal Nurses](#), Inc. (COINN) developed and published a competency framework to assist in standardizing [neonatal nursing](#) clinical practice and education in low resourced countries. A companion Skills Checklist that provides the metrics by which to measure the neonatal nurse competencies has now been developed related to the World Health Organization's (WHO) three levels of [neonatal care](#).

[A paradigm shift from competence to capability in neonatal nursing](#)

Author(s): Bromley

Source: Journal of Neonatal Nursing 25(6) pp. 268-271

Publication date: December 2019

A literature review by Bromley (2014) focussing on competence in nursing identified ambiguity and inconsistencies in the assessment or evaluation competence on nurses' clinical practice (Bromley, 2014; Watson et al., 2002). Flinkman et al. (2017, p. 1036) agree that "there continues to be no consensus on the definition of competence" and that it is a "highly abstract phenomenon ... complicated to assess and measure".

A continued review of the literature has identified the theories of capability in higher education and capable graduates. This follow up review will explore the origins of competence and clinical competence as it relates to the nursing profession and compare this with Capability as a means of developing Capable Neonatal Intensive Care (NIC) nursing graduates.

[Capability: How is it recognised in student nurses undertaking postgraduate studies in neonatal intensive care?](#) Abstract only*

Authors: Bromley, Patricia

Publication Date: 2018

Journal: Journal of Neonatal Nursing 24(3), pp. 142-147

Historically, nursing practice has been evaluated by assessing competence. While competence is a necessary component of clinical practice it does not provide an holistic picture of performance in practice; Capability is more comprehensive. This paper presents the findings from research, using the iterative principles of grounded theory to gather qualitative data to elicit nuances implying Capability in neonatal nurses. Semi-structured interviews with experienced mentors of students enrolled in any

Postgraduate Certificate in Neonatal Intensive Care (PG Cert NIC) in Australia were undertaken to clarify what it is that students demonstrate, which provides evidence of being Capable in practice. The implications drawn from these interviews is that Capability is evaluated through various verbal and non-verbal behavioural cues. Although this research focuses on registered nurses in Australia undertaking PG Cert NIC, ideally these findings could be applied internationally, to any post-registration qualification in the specialty area of neonatal intensive care nursing.

[Leader Competency in Neonatal Nursing](#). Abstract only*

Authors: Jaeger, C. B. and AcreeHamann, C. M.

Publication Date: 2016

Journal: Newborn and Infant Nursing Reviews 16(3), pp. 99-101

Health care, the workforce, and health systems are undergoing necessary change. In 2001, the report of the Institute of Medicine (IOM),¹Crossing the Quality Chasm, introduced the tenets for health care transformation, to include: (a) family-centered, (b) timely, (c) efficient, (d) effective, (e) equitable, and (f) safe. Health care is evolving through evidence-based practice, advancing technology, and the availability of technologic devices to enhance the accessibility of knowledge and information to individuals globally. The transparency of quality, cost, and health outcome is an accountability of high-reliability organizations.² As a result, consumers are informed, and in collaboration with the interprofessional health care team, they are assuming decisionmaking responsibility for their personal health over their lifespan. The health goals of the consumer are simple – wellness, quality of life, confidence in the health care provider/team, and affordable care for the lifespan.

[Advanced Practice Nursing Simulation for Neonatal Skill Competency: A Pilot Study for Successful Continuing Education](#)

Authors: Stephenson, Evelyn;Salih, Zeynep and Cullen, Deborah L.

Publication Date: 2015

Journal: Journal of Continuing Education in Nursing 46(7), pp. 322-325

Background: Skill readiness remains a challenge for all health care professionals who are involved in direct patient care. Researchers suggest that skill retention may decrease within 6 months of an educational session. The purpose of this study was to explore competency retention for high-risk, low-frequency procedures, specifically, managing a difficult airway and placing a laryngeal mask airway, using a web-based content refresher. Method: The pilot study was conducted in two sessions. Session one established clinical skill competency. Six months later, the advanced practice RNs were randomized into two groups. Group 1 reviewed didactic content and participated in a complex airway management simulation. Group 2 participated only in a complex airway management simulation. Results: This study showed a positive trend in maintaining competency for a low-frequency procedure for which complex airway management was given, using web-based content review. It is feasible to maintain competency for low-frequency procedures using web-based content refreshers. Conclusion: This pilot study benefited advanced practice nurses by providing them with the potential to maintain competency in this high-risk, low-frequency procedure. Continuing education is an important consideration for health care organizations. J Contin Educ Nurs. 2015;46(7):322-325.

Supply

[Breaking the Cycle of Nursing Chaos: The Need to Address the Nursing Shortage](#)

Authors: Bagwell, Gail A.;Cesario, Sandra K.;Fraser, Debbie;Kenner, Carole and Walker, Karen

Publication Date: Dec 2023

Journal: Nursing for Women's Health 27(6), pp. e1-e5

Across the globe the nursing workforce is in crisis mode leaving nurses and nursing in chaos. Numerous countries are reporting acute shortages of nurses resulting, in part, from dissatisfaction and burnout resulting in high turnover. This is not a local or national problem, it is a global crisis, even more pronounced in low- and middle-income countries, vulnerable settings, and rural and remote locations. Globally, the World Health Organization predicts that there will be a shortfall of 10 million healthcare workers by 2030. In the United States, the Health Resources and Services Administration is projecting a shortage of 78,610 full-time equivalent registered nurses in 2025.

While it is difficult to break down the nursing shortage by specialty areas, reports around the world suggest that neonatal nursing shortages are similar to those in other areas. For example, data from the 2019 National Neonatal Audit Program in the UK found that only 69% of neonatal nursing shifts were staffed at the level recommended by national guidelines and that only 44% of shifts met the requirements for specialist nurse staffing. The accompanying article from the Nursing Times goes on to suggest that the UK is “desperately short of nurses in the right numbers and expertise to meet national guidelines” and that the UK requires at least 605 additional nurses to meet the staffing standards. In Australia, The Sydney Morning Herald in 2022, reported “More staff needed for our smallest, sickest babies on neonatal wards.”

[Is nurse staffing associated with critical deterioration events on acute and critical care pediatric wards? A literature review](#)

Abstract only*

Authors: Genna C., Thekkan K.R., Raymakers-Janssen P.A.M.A., Gawronski O.

Publication Date: April 2023

Journal: European Journal of Pediatrics. 182(4) (pp 1755-1770), 2023.

Pediatric and neonatal patients admitted to acute and critical care wards may experience critical deterioration events that may lead to unexpected deaths if unrecognized and untreated promptly. Adequate levels and skill-mix of nurse staffing are essential for the quality of patient monitoring and response to deteriorating patients. Insufficient staffing may have an impact on the occurrence of missed care and consequently on critical deterioration events, increasing the risk of mortality and failure-to-rescue. To review the literature to explore the association between nurse staffing levels or skill-mix and pediatric and neonatal critical deterioration events, such as mortality, pediatric intensive care unit (PICU)/neonatal intensive care unit (NICU) unplanned admissions, cardiac arrests, and failure-to-rescue. A structured narrative literature review was performed. Pubmed, Cinhal, and Web of Science were searched from January 2010 to September 2022. Four independent reviewers conducted the study screening and data extraction. The quality of the studies included was evaluated using the Joanna Briggs Institute critical appraisal tools. Out of a total of 2319 studies, 15 met the inclusion criteria. A total of seven studies were performed in PICU, six in NICU, and two in general pediatric wards. Nurse staffing measures and outcomes definitions used were heterogeneous. Most studies suggested nursing skill-mix, increased working experience, or higher nursing degrees were associated with increased survival in PICU. Decreased nursing staffing levels were associated with increased mortality in NICU and mechanically ventilated patients in PICU.

Conclusion: Evidence on the association of nurse staffing and critical deterioration events in PICU and NICU is limited, while there is no evidence reported for pediatric wards. Future research is needed to determine adequate levels of nurse/patient

ratios and proportion of registered nurses in the skill-mix for pediatric acute and critical care nursing to improve outcomes on in-patient wards.

[Addressing NNP Shortages in a Level IV NICU: A Solution in Your Own Backyard](#) Abstract only*

Authors: Ehrhardt, Elizabeth

Publication Date: Mar 2021

Journal: Neonatal Network 40(2), pp. 113-116

NICUs have evolved in the last 20 years. Patients are being rescued at earlier gestation, and with this comes potential sequelae and complex issues throughout the hospitalization. As a result, there is an increased need for experienced, well-rounded neonatal nurse practitioners (NNPs) to care for these patients. Staff ratios are slow to catch up to the needs of the patients; NNPs are often caring for 15–30 patients at a time. This can leave the provider with a sense of not providing good enough care, burnout, and disillusionment with the reasons they entered school to become an NNP. This article provides a unique alternative to improve staffing ratios of students who are already familiar with not only the NICU, but your NICU: Relationships have been established and engagement of the unit is already present in the candidates.

[How do we respond to the crisis in neonatal nursing?: The RCN's career guidance on neonatal nursing must address changes in the profession](#) Abstract only*

Authors: Crawford, Doreen

Publication Date: 2019

Journal: Nursing Children & Young People 31(5), pp. 11

Neonatal nursing is in crisis. It's a long story and the result of a number of factors. There has been difficulty in recruiting into the specialty, poor staff retention and high turnover. Work in a

neonatal unit is highly pressurised and emotionally draining, and so does not suit everyone.

[Journey to Becoming a Neonatal Nurse Practitioner: Making the Decision to Enter Graduate School.](#) Abstract only*

Authors: Brand, M. Colleen; Cesario, Sandra K.; Symes, Lene and Montgomery, Diane

Publication Date: Apr 2016

Journal: Advances in Neonatal Care 16(2), pp. 3

BACKGROUND: Neonatal nurse practitioners (NNPs) play an important role in caring for premature and ill infants. Currently, there is a shortage of NNPs to fill open positions. Understanding how nurses decide to become NNPs will help practicing nurse practitioners, managers, and faculty encourage and support nurses in considering the NNP role as a career choice.

PURPOSE: To describe how nurses decide to enter graduate school to become nurse practitioners. **METHODS:** A qualitative study using semistructured interviews to explore how 11 neonatal intensive care unit nurses decided to enter graduate school to become NNPs. **RESULTS:** Key elements of specialization, discovery, career decision, and readiness were identified. Conditions leading to choosing the NNP role include working in a neonatal intensive care unit and deciding to stay in the neonatal area, discovering the NNP role, deciding to become an NNP, and readiness to enter graduate school. Important aspects of readiness are developing professional self-confidence and managing home, work, and financial obligations and selecting the NNP program. **IMPLICATIONS FOR PRACTICE:** Neonatal nurse practitioners are both positive role models and mentors to nurses considering the role. Unit managers are obligated to provide nurses with opportunities to obtain leadership skills. Faculty of NNP programs must be aware of the impact NNP students and graduates have on choices of career and schools. **IMPLICATIONS FOR RESEARCH:** Exploring the

decision to become an NNP in more geographically diverse populations will enhance understanding how neonatal intensive care unit nurses decide to become NNPs.

[Staff shortage puts neonatal services under strain.](#) Abstract only*

Authors: Triggie, Nick

Publication Date: Nov 2015

Journal: Nursing Children and Young People 27(9), pp. 7

A 'SEVERE shortage' of neonatal nurses and doctors in England is leaving services 'over-stretched and under incredible pressure', a survey suggests.

Training and education

[Development and evaluation of a neonatal nurse practitioner mentoring workshop](#) Abstract only*

Authors: Moss, Colleen Reilly

Publication Date: 2024

Journal: Journal of the American Association of Nurse Practitioners

New graduate neonatal nurse practitioners (NNPs) need more than an orientation; they need mentoring to facilitate successful role transition and enhance job satisfaction. A gap exists in the literature about mentoring participant training and launching of successful programs for NNPs. This article provides an overview of the development and evaluation of a nurse practitioner (NP) mentoring workshop before the start of a formalized mentoring program. Workshop participants attended a half-day education event with an emphasis on mentoring program expectations, mentor and mentee roles, and effective communication. After the workshop, participants completed an electronic survey to evaluate satisfaction with the teaching and areas for improvement. From January 2022 through January 2023, newly

hired NPs paired with experienced NP mentors participated in this structured workshop. Twenty-eight participants in two cohorts evaluated the workshop to identify meaningful aspects of the presentations and areas for improvement. Participants reported high levels of satisfaction with the interactive components of the 4-hr workshop. An interactive mentoring workshop helps participants establish realistic expectations and mutual goals. Further study is needed to identify time- and cost-efficient strategies in the preparation of effective mentoring participants to enhance the quality of mentoring programs. Copyright © 2024 American Association of Nurse Practitioners.

[Sustained Effect of Simulation-Based Resuscitation Education on Knowledge, Self-Confidence, and Performance Ability of Neonatal Intensive Care Unit Nurses](#)

Authors: Lim, Cho Yeon and Song, Mi Ryeong

Publication Date: Feb 2024

Journal: Journal of Continuing Education in Nursing 55(2), pp. 79-86

BACKGROUND: Simulation education is essential for the development of nurses' practical skills. This study evaluated the impact and duration of simulation-based neonatal resuscitation education on the knowledge, self-confidence, and performance ability of neonatal intensive care unit (NICU) nurses. **METHOD:** This quasi-experimental study was conducted in South Korea and included 35 NICU nurses working in tertiary hospitals between August and October 2021. Simulation-based neonatal resuscitation education (NRE) was provided for 80 minutes, and its effectiveness was measured in terms of nurses' knowledge, self-confidence, and performance ability. Data collection was conducted before, 1 week after, 3 weeks after, and 5 weeks after the training, and the collected data were calculated and analyzed using a t test and repeated measures analysis of

variance. RESULTS: Simulation-based NRE improved knowledge, self-confidence, and performance in neonatal resuscitation. Performance ability showed greater improvement than knowledge or self-confidence, and all three areas showed significant differences in score changes over time. CONCLUSION: The duration of the training effect should be considered an important factor.

[Development and Implementation of a Game-Based Neonatal Resuscitation Refresher Training: Effect on Registered Nurse Knowledge, Skills, Motivation, Engagement](#)

Abstract only*

Authors: Billner-Garcia R.M., Spilker A.

Publication Date: January 2024

Journal: Journal for Nurses in Professional Development. 40 (1) (pp 24-28), 2024.

Game-based learning theory and Google Docs Editors suite were used to develop an online, self-directed neonatal resuscitation refresher training for registered nurses to improve their resuscitation knowledge and skills and enhance their learning motivation and engagement. Results indicated that a self-directed, online game-based refresher training was motivating, engaging, and improved nurses' resuscitation knowledge and skill performance. Nurse professional development practitioners can use similar game-based online materials to enhance learning.

[Describing Nurses' Work and Educational Needs in Providing Neonatal Palliative Care: A Narrative Review](#) Abstract only*

Authors: St Louis, Julia;Benzies, Karen;Raffin-Bouchal, Shelley and Sinclair, Shane

Publication Date: Jan 01 ,2024

Journal: Neonatal Network - Journal of Neonatal Nursing 43(1), pp. 35-49

Nurses in NICUs report insufficient education as a persistent barrier to providing quality neonatal palliative care (NPC). Since existing literature on educational interventions in NPC is limited, this review aimed to identify and narratively synthesize literature both about nurses' attitudes toward NPC and the NPC education received by nurses. We conducted a nonsystematic narrative literature review. Four themes were identified from the 28 articles included in this review. These were as follows: (a) nursing work in NPC, (b) NICU nurses' experiences and perceptions of NPC, (c) facilitators and barriers to nursing work in NPC, and (d) educational interventions in NPC. This literature review identified studies about NICU nurses' experiences and education in providing NPC. NICU nurses both desired and lacked education in NPC. This literature review identifies the importance of developing and evaluating NPC education for nurses.

[Preceptors and the New Neonatal Nurse Practitioner Educational World](#) Abstract only*

Authors: Moss CR, Savin M' Sharpe E, Wallman C

Publication Date: November 2023

Journal: Neonatal Network; NN, 01 Nov 2023, 42(6):329-335

The need for neonatal nurse practitioner (NNP) preceptors has never been greater. Precepting is a professional responsibility with both rewards and challenges. The recent pandemic has brought about new challenges, not the least of which is burnout from clinical, learner, and environmental demands. A new educational model from the American Association of Colleges of Nursing and the National Task Force outlines educational and preceptor requirements aimed at improving the advanced practice educational experience for students and preceptors. Available research provides evidence of what preceptors value and how to develop best practices with academic institutions to advocate for their students. This article will discuss new nursing

educational models and the role of the NNP preceptor and analyze current best practices in preceptor recruitment and retention while discussing national trends impacting personal and professional NNP practices.

[Benefits of an Integrated Nurse Residency Program in the Neonatal Intensive Care Unit](#) Abstract only*

Authors: Waggoner JK, Waskosky A

Publication Date: June 2023

Journal: Journal of Perinatal & Neonatal Nursing

Background: The neonatal intensive care unit is a specialized unit where nurses, physicians, and other providers take care of the smallest patients in healthcare. Because neonatal intensive care units are highly specialized, many nursing students graduate from undergraduate programs with little experience or knowledge related to the care of neonatal patients.

Results: Nursing residency programs with hands-on simulation training have been shown to provide significant benefits to new and novice nurses as they enter the workforce, particularly in areas where the patient population requires highly specialized treatment. The myriad of benefits provided by nurse residency programs and simulation training exercises have been shown to result in improved nurse retention, job satisfaction, nursing skill, and patient outcomes.

Conclusion: Because of the proven benefits, integrated nurse residency programs and simulation training should be the standard for training new and novice nurses in the neonatal intensive care unit environment.

[Evaluation of the Effectiveness of Digital Game-Based Learning Given to Nursing Students for the Developmental Care of Infants in Neonatal Intensive Care Unit](#) Abstract only*

Authors: Erdogan, Cigdem and Turan, Turkan

Publication Date: May 01 ,2023

Journal: CIN: Computers, Informatics, Nursing 41(5), pp. 300-308

Although simulation laboratories are widely used in today's nursing education programs, it is becoming more and more difficult to find adequate physical space, equipment, and instructors for laboratory practices in schools. With increasing access to quality technology, schools prefer Web-based education or virtual games as another way of learning through simulation laboratories. This study was carried out to evaluate the effect of digital game-supported teaching activity given to nursing students for the developmental care of infants in neonatal ICU on learning. This study is a quasi-experimental study with a control group. Within the scope of the study, the researchers, together with the technical team, developed a digital game in accordance with the purpose of the study. The study was conducted in a health sciences faculty, nursing department, between September 2019 and March 2020. Sixty-two students were included in the study, which were divided into two groups, with 31 students in the experimental group and 31 students in the control group. The study data were collected using a personal information tool and a developmental care information tool. Whereas the digital game learning method was used for the students in the experimental group, the traditional teaching method was used for the students in the control group. No significant difference has been found between the pretest knowledge scores of the students in the experimental and control groups ($P > .05$). A statistically significant difference has been found in the rates of giving correct answers between the groups in the posttest and retention test ($P < .05$). The students in the experimental group gave more correct answers in the posttest and retention test than the students in the control group. In line with these results, the learning method with digital games is effective in increasing the knowledge level of nursing

undergraduate students. Therefore, it is recommended to integrate digital games into education.

[Neonatal palliative care: Assessing the nurses educational needs for terminally ill patients](#)

Authors: Khraisat, Omar M.;Al-Bashaireh, Ahmad M.;Khafajeh, Raed and Alqudah, Ola

Publication Date: 2023

Journal: PLoS ONE [Electronic Resource] 18(1), pp. e0280081

BACKGROUND: For terminally sick neonates and their families, it's crucial to provide holistic nursing care that incorporates both curative and palliative care as much as feasible. It is well known that the biggest obstacle to delivering palliative care for neonatal children is a lack of training for nurses. **Aim:** The aim of this research is to investigate the experiences of nurses who provide care for neonates who are terminally ill as well as their educational requirements for neonatal palliative care. **METHOD:** A cross-sectional descriptive study was conducted among 200 nurses working in a tertiary center providing care for terminally ill neonates in Saudi Arabia. Data was collected from using Neonatal Palliative Care Questionnaire (QNPC) from January 2021 to March 2021. **RESULTS:** Two hundred nurses were surveyed (the response rate was 79%). The mean age of the 158 participants was 35.67 (standard deviation (SD): 7.43), and the majority were female (151; 95.6%). The majority were bachelor's holders (119; 75.3%), with more than 5 years of experience in providing care for neonates (100; 63.3%). Most of the participants reported not receiving any education about palliative care (115; 72.8%). Nurses reported a moderate level of experience in all areas of neonatal palliative care. The total mean score of palliative care experiences of neonates was 3.42 (SD: 1.35). However, the majority of nurses reported little experience discussing the transition period to palliative care for neonates 2.95 (SD: 1.93), the discussion of code status (DNR)

during terminal illness of neonates 3.11 (SD: 1.54) and spiritual support 2.90 (SD: 1.55). **CONCLUSION:** The assessment of the fundamental skills of neonatal palliative care by nurses was insufficient. To enhance the quality of care, it is crucial to incorporate education on neonatal palliative care into programs for nursing staff development.

[Genetics in the NICU: Nurses' Perceived Knowledge and Desired Education](#)

Authors: Shields, Kathleen;Czerwinski, Jennifer;Dauwe, Tracie;Hashmi, Syed;Hillman, Paul;Mowrey, Kate and Gunther, Kathryn

Publication Date: Jan ,2023

Journal: Journal of Continuing Education in Nursing 54(1), pp. 16-24

Abstract: Background Many infants admitted to the neonatal intensive care unit (NICU) have genetic conditions. Previous research has shown that gaps exist in the genetics knowledge of nurses and that they lack comfort applying genetics information to clinical practice. Studies assessing the knowledge or comfort of NICU nurses with genetics have not previously been completed. Method A total of 122 NICU nurses completed a survey assessing perceived knowledge of genetics, comfort with clinical scenarios involving genetics, and desired genetics education. Results Perceived knowledge and overall comfort were correlated with highest degree received, how prepared a nurse felt by the genetics education received in their training, and having a close relationship with someone with a genetic condition. Almost all respondents (96%, n = 117) desired additional genetics education. Conclusion Gaps exist in the genetics knowledge of neonatal nurses in our cohort, and their overall comfort working with clinical scenarios involving genetics was low. There is significant interest in additional genetics education.

[Developing newly qualified nurses' confidence within neonatal intensive care](#)

Authors: Beynon, Jessica M.
Publication Date: 2022
Journal: Infant 18(1), pp. 8-11

Newly-registered nurses can struggle with the transition from student to practitioner; achieving competence within a critical care area, such as neonatal care, can be particularly challenging. Education is pivotal for nurturing new registrants so that they stay in their specialist area. A neonatal competency framework for new neonatal nurses in their first year of practice was implemented in South Wales. This article discusses the importance of supporting new nurses to develop their knowledge, skills, confidence and competence in neonatal care and why this is important for staff retention.

[Best practices for educating NICU nurses about palliative care: A rapid review](#)

Authors: St Louis, Julia Renee;Pesut, Barbara and Zhao, Rachel
Publication Date: 2022
Journal: Journal of Neonatal Nursing 28(1), pp. 3-8

Nurses in neonatal intensive care units (NICUs) provide more direct care at the end-of-life than other health care providers, yet report feeling inadequately prepared for neonatal palliative care. The purpose of this review was to identify studies testing educational interventions for palliative care to NICU nurses. Rapid Review Four studies reported education interventions lasting 6–21 h with 30–142 participants. All used convenience samples and pre/posttest designs. A variety of outcome measures were used, including objective knowledge tests and structured clinical observations. The studies showed statistically significant improvements in at least one outcome, although these

results should be viewed cautiously because of less rigorous study designs. The small number of studies identified indicates a need to implement and evaluate further educational interventions. While the evidence from these studies suggested positive outcomes, additional studies using more rigorous research methods are needed.

[Preparing Neonatal Nurses for Improved Performance, Professional Development, and National Certification Through Simulation](#) Abstract only*

Authors: Zebreski, Laura;Bloodgood, Katherine and Wyble, Kimberlee
Publication Date: 2022
Journal: Advances in Neonatal Care (Lippincott Williams & Wilkins) 22(4), pp. E131-E136

Abstract: Background: Code and emergent situations require skilled nursing response wherever they occur. Nurse preparation for code response is an ongoing need in nursing education. The Neonatal Intensive Care Unit (NICU) at Parkland Health and Hospital System in Dallas, Texas, has a team of 3 nurse educators. These educators determined the need for increased nurse confidence, skill, and response in code and emergent situations within the NICU. The education team also recognized the need to increase nurse involvement in professional development activities and preparation for the national certification examination. Purpose: The purpose of this article is to describe how a NICU education team, in a level III NICU, trained nurses using simulated scenarios to improve nursing knowledge for national certification, skill, and confidence in code situations and to provide ongoing professional development opportunities within a controlled learning environment. Methods: The intervention designed to meet these specific goals for the NICU was the creation of a simulation team (called the "Drill Team") to facilitate simulated activities created by the NICU

education team. This simulation strategy was found to have multiple advantages for content delivery, as multiple learning styles can be incorporated into the simulated activities. Findings: Nurses demonstrated improved performance, knowledge acquisition, and knowledge retention after the Drill Team project. Nursing confidence in code performance also increased using this intervention. Implications For Practice: This educational intervention can be replicated and utilized in nursing education for all specialties. Implications For Research: Further research could be conducted to determine the effectiveness of simulated activities and national certification pass rates.

[Examining workplace-based education strategies for the 21st century neonatal nurse: Literature review](#)

Authors: Bromley, P.; Govindaswamy, P.; Walsh, A.; Michaels, A. and Parsons, J.

Publication Date: 2021

Journal: Journal of Neonatal Nursing 27(6), pp. 396-401

Delivering neonatal workplace education is increasingly challenging. Many [neonatal Nurse](#) Educators are required, not only to provide education specific to the specialty area, but to deliver and ensure organisation-wide mandatory education is maintained by all staff as well.

The aim of this research was to identify the challenges of workplace-based education for neonatal nurses in clinical practice. This paper, the first part of the whole study, draws from literature on current examples of workplace education to explore suitable models for the 21st century neonatal nurse.

Workplace-based education requires strategies which satisfy different learning needs, be easy to access at the point of care and is relatively quick and cheap to deliver. Mobile technology has potential to achieve this and complement other more costly and time-consuming workplace-based learning strategies.

[Workplace-based education for specialist neonatal nursing in Australia: Time for rethink perhaps](#)

Authors: Bromley, Patricia

Publication Date: Oct ,2021

Journal: Australian Nursing & Midwifery Journal 27(5), pp. 45

Abstract: The article reports on the identification of workplace-based (WPB) education strategies that are not suitable for 21st-century neonatal nurses in a study conducted by the Education Special Interest Group from the Australian College of Neonatal Nurse (ACNN) in 2021. Topics discussed include the inadequate number of nurses who will replace retiring workers in the next decade, the need to prevent the attrition of younger nurses in Australia, and challenges posed by WPB education to nurses.

[Effectiveness of neonatal emergency nursing education through simulation training: Flipped learning based on Tanner's Clinical Judgement Model.](#)

Authors: Yang, Sun-Yi

Publication Date: 2021

Journal: Nursing Open 8(3), pp. 1314-1324

Aim: To examine the effects of neonatal simulation-based practice by applying flipped learning based on Tanner's clinical judgement model to pre-simulation briefing for nursing students. Design: A quasi-experimental non-equivalent control group pre- and postintervention design. Methods: Using Tanner's clinical judgment model, flipped learning was developed and applied to the pre-simulation briefing curriculum prior to the neonatal nursing simulation exercise. Flipped learning was compared with a general pre-simulation briefing with 65 South Korean students. From September 7, 2019, to October 25, 2019. Results: The experimental group's critical thinking, self-confidence and clinical judgement ability increased, but knowledge, satisfaction and anxiety did not differ from that of the control group. Pre-

simulation briefing design focuses on improving students' environmental comfort and reducing anxiety rather than developing complex reasoning skills and clinical judgement abilities. Applying flipped learning based on Tanner's clinical judgement model to pre-simulation briefing increased critical thinking, self-confidence and clinical judgement ability.

[Exploring the impact of digital stories on empathic learning in neonatal nurse education.](#)

Authors: Petty, Julia;Jarvis, Joy and Thomas, Rebecca
Publication Date: Oct ,2020
Journal: Nurse Education in Practice 48, pp. 102853

Within [neonatal nurse](#) education, learning to understand the compelling emotional experiences of parents following the birth of their premature baby is essential to give person-centred empathic care. A collection of digital stories informed by parents' experiences was created to use as a pedagogical tool for students and staff within the neonatal speciality. This study reports on an exploration of the value of these digital stories for the enhancement of empathic learning. Using the principles of narrative inquiry, a mixed-methods design comprising 'point-of-view', reflective exercises, interviews and a questionnaire distributed to nursing students and practice staff ascertained views of three digital stories. The participants evaluated the digital stories positively overall and it was clear they were an effective and innovative way to learn about emotional experiences of parents. Powerful emotional messages from parents enhanced awareness, understanding and insight into their affective experience. Within the context of narrative-based neonatal education, there is a place for digital storytelling as a pedagogical strategy informed by parent narratives, to teach students and staff about the emotional impact of the [neonatal care](#) experience. In turn, this can potentially lead to more

empathic, person-centred care relating to the families of sick, vulnerable babies.

[A qualitative descriptive exploration of the educational and career plans of early career neonatal nurses and midwives: An Irish perspective.](#) Abstract only*

Authors: Coughlan, Linda Martina and Patton, Declan
Publication Date: Jan ,2018
Journal: Nurse Education in Practice 28, pp. 182-188

The scarcity of appropriately qualified nurses and midwives is a major obstacle in achieving an effective health system. Neonatal nurses and midwives require a high level of skill and education to fulfil their role. It is also an area that sees high staff turnover rates. For this study a descriptive qualitative approach was used to ascertain early career neonatal nurses' and midwives' experiences of further education, their future career plans, and their perceived facilitators and barriers to further education and career progression. After receiving ethical approval, twelve nurses and midwives were recruited across three tertiary level neonatal units in Ireland. Semi structured interviews were carried out and interview transcripts were subsequently analysed using Attride-Stirling's (2001) Thematic Networks to deduce themes from the data. Support and involvement, mentoring, and career progression and retention were the three main themes identified upon analysis of the data. The majority of participants identified definitive career plans but some felt their goals were unachievable in their current workplace. Consequently a large number of participants have plans to leave their employment in neonates and pursue a career in other areas of nursing. Staff appraisals and succession planning programmes may assist early career nurses and midwives in focusing on their individual career goals, leading to a greater uptake of further specialised education and improved retention of neonatal nurses and

midwives.

[An exploratory intervention to expand the horizon for Japanese neonatal nurses: Acquisition and retention of knowledge and skills related to nursing practice](#) Abstract only*

Authors: Konishi, Miki;Yoshioka, Toshimasa;Okubo, Yumiko and Kusuda, Satoshi

Publication Date: 2017

Journal: Journal of Neonatal Nursing 23(5), pp. 228-233

The traditional role of the Japanese Neonatal Nurse differs in comparison to that of western colleagues'. However the Japanese philosophy of attention to care that epitomizes neonatal care reflects the exquisite and delicate nature of the Japanese culture. Japanese neonatal nurses who wish to expand their clinical roles, however, face a number of challenges. These challenges result from a combination of the non-existence of any relevant training to prepare a clinically advanced nurse in Japan, and the historic and legal background, which has led to the current scope of practice. The historic background is reported in depth elsewhere (Konishi 2016). An interventional study that includes both didactic and skills lab was designed to explore the feasibility of introducing an educational program and its effectiveness in a Japanese setting. The results demonstrated that a neonatal specific educational program offers the potential to prepare highly educated and motivated neonatal nurses with a capacity to perform in a role with an extended scope of practice. As a result of this interventional study, participants were found to experience changes in their role perceptions, as well as differences in their interactions with colleagues.

[High-Fidelity Simulation for Neonatal Nursing Education: An Integrative Review of the Literature](#) Abstract only*

Authors: Cooper, Allyson

Publication Date: 2015

Journal: Neonatal Network - Journal of Neonatal Nursing 34(6), pp. 345-354

The lack of safe avenues to develop neonatal nursing competencies using human subjects leads to the notion that simulation education for neonatal nurses might be an ideal form of education. This integrative literature review compares traditional, teacher-centered education with high-fidelity simulation education for neonatal nurses. It examines the theoretical frameworks used in neonatal nursing education and outlines the advantages of this type of training, including improving communication and teamwork; providing an innovative pedagogical approach; and aiding in skill acquisition, confidence, and participant satisfaction. The importance of debriefing is also examined. High-fidelity simulation is not without disadvantages, including its significant cost, the time associated with training, the need for very complex technical equipment, and increased faculty resource requirements. Innovative uses of high-fidelity simulation in neonatal nursing education are suggested. High-fidelity simulation has great potential but requires additional research to fully prove its efficacy.

[Distance education in neonatal nursing scenarios: A systematic review.](#)

Authors: Freire, L. M.;de Paula, M. A.;Duarte, E. D. and Bueno, M.

Publication Date: 2015

Journal: Revista Da Escola De Enfermagem 49(3), pp. 508-514

OBJECTIVE: Identify resources that support learning mediated by technology in the field of neonatal nursing. METHOD: Systematic review with searches conducted in MEDLINE, LILACS and SciELO. Titles and abstracts were independently evaluated by two experts. RESULTS: Of the 2,051 references,

203 full-text articles were analyzed, resulting in the inclusion of nine studies on semiotics and semiology, cardiopulmonary resuscitation, general aspects of neonatal care, diagnostic reasoning and assessment of pain. Only two articles addressed the development of educational strategies and seven papers described the assessment of these strategies by experts and/or users. CONCLUSION: Distance education is an important resource for education, and its improvement and updating, and it particularly adds advantages for neonatal nursing by approximating teaching and real-life situations and by minimizing the exposure of newborns for teaching purposes. The lack of educational initiatives mediated by technology suggests the need for the development, evaluation and dissemination of educational resources focused on nursing care of newborns and their families.

[The education of neonatal nurse practitioners-do we understand where we are going?](#) Abstract only*

Item Type: Journal Article

Authors: Kenner, C.;Corff, K.;McCann, D. and Sheldon, R. E.

Publication Date: 2015

Journal: NeoReviews 16(1), pp. e3-e8

With the passage of the Patient Protection and Affordable Care Act in 2010 came heightened recognition of the vital role that nurses play in health care. That same year the Institute of Medicine published a report on the future of nursing that called for nurses to practice to the full scope of their education and for nurses, along with other health care professionals, to redesign health care provision. In the neonatal intensive care unit, the role of the highly specialized advanced practice registered nurse, the neonatal nurse practitioner, is well established. Neonatal nurse practitioners provide a large portion of patient care in the neonatal intensive care unit nationwide and offer a proven model of interprofessional practice that works well in today's health care

environment. This article discusses the need for such interprofessional teamwork, nursing's role in the team, the evolution of distinctive advanced practice nursing education for neonatal advanced practice registered nurses, and concerns about continued success.

[The education of UK specialised neonatal nurses: reviewing the rationale for create a standard competency framework](#) Abstract only*

Author(s): Turrill

Source: Nurse Education in Practice 14(5) pp. 504-511

Publication date: September 2014

This paper examines the influences surrounding formal education provision for specialised neonatal nurses in the UK and presents a standardised clinical competency framework in response. National drivers for quality neonatal care define links to the numbers and ratios of specialised neonatal nurses in practice. Historical changes to professional nursing governance have led to diversity in supporting education programmes, making achievement of a standard level of clinical competence for this element of the nursing workforce difficult. In addition responsibility for funding specialised education and training has moved from central to local hospital level. Evaluating these key influences on education provision rationalised the development, by a UK professional consensus group, of a criteria based framework to be utilised by both formal education and service providers. The process identified clinical competency (in terms of unique knowledge and skills), evidence of achievement, and quality education principles.

Retention and Attrition

[Growing the Neonatal Nurse Practitioner Workforce Through Mentoring: A Scoping Review](#) Abstract only*

Authors: Baker LA, Moss C, Bordelon C, Savin MK
Publication Date: June 2024
Journal: Journal of Perinatal & Neonatal Nursing. 38(2):184-191, 2024 Apr-Jun 01

Objective: The purpose of this article is to highlight evidence specific to the neonatal nurse practitioner (NNP) workforce related to successful mentoring programs. Specifically, the authors of this article explored recent evidence of mentorship to improve job satisfaction and retention of the NNP workforce.
Conclusion: Mentoring is an invaluable component of professional nursing and counters incivility while advancing competency, job satisfaction, and retention. Additional research is needed regarding NNP-specific mentoring programs.

[Examining Job Satisfaction and Intent to Stay for Neonatal Nurse Practitioners: The Impact of Mentoring](#) Abstract only*

Authors: Moss, Colleen Reilly
Publication Date: 2022
Journal: Advances in Neonatal Care (Lippincott Williams & Wilkins) 22(4), pp. 341-351

Background: In 2017, the National Association of Neonatal Nurse Practitioners (NANNP) recommended that organizations implement formalized mentoring programs for neonatal nurse practitioners (NNPs). There is significant evidence to support that mentoring positively impacts nurse practitioners' job satisfaction and retention. However, there is a lack of evidence-based literature specific to NNP mentoring.
Purpose: Determine the impact of participation in the NANNP formalized mentoring program on job satisfaction and retention for novice and experienced NNPs in an academic medical center in Tennessee.
Methods: This quality improvement project utilized a secure online survey that included the Misener Nurse Practitioner Job Satisfaction Scale (MNPJSS) and 2 intent-to-

stay items prior to implementation of a 6-month mentoring program. Neonatal intensive care unit nurse practitioners completed the same electronic survey at 3 intervals after program implementation to determine the impact of the mentoring program on job satisfaction and intent to stay.
Results: Project results identified a significant difference in MNPJSS scores for participants in a 6-month formal mentoring program using the NANNP tool kit. The MNPJSS scores moderately correlated with intent to stay at 1 year and strongly correlated with intent to stay at 3 years.
Implications For Practice: The results of this project support the positive impact of a formalized mentoring program on job satisfaction for new graduate nurse practitioners. Recognizing the challenge to recruit and retain NNPs, organizations should explore creative solutions to develop and support formalized mentoring programs.
Implications For Research: Further research is warranted to validate use of the NANNP tool kit in the establishment and evaluation of a formalized mentoring program. Video abstract available

[Relationship Between Moral Distress and Intent to Leave a Position Among Neonatal Intensive Care Nurses](#) Abstract only*

Authors: Hally, Suzanne M.; Settle, Margaret and Nelson, Brett D.
Publication Date: 2021
Journal: Advances in Neonatal Care (Lippincott Williams & Wilkins) 17(8), pp. E191-E198

Background: The phenomenon of moral distress is prevalent in the literature, but little is known about the experiences of nurses working in the neonatal intensive care unit (NICU). In addition, a paucity of literature exists exploring the relationship between moral distress and intent to leave a position in NICU nurses.
Purpose: To explore the phenomenon of moral distress in NICU nurses using the Measure of Moral Distress for Health Care Professionals (MMD-HP) survey.
Methods: A cross-sectional, descriptive, correlational study was conducted

nationally via an electronic survey distributed to NICU nurses who are members of National Association of Neonatal Nurses (NANN). Participants were asked to electronically complete the MMD-HP survey between March 27 and April 8, 2020. Findings: A total of 75 NICU nurses completed the survey, and 65 surveys were included for data analysis. Five situations from the survey had a composite MMD-HP score of more than 400. Results indicated that 41.5% of the NICU nurses surveyed considered leaving a clinical position due to moral distress, and 23.1% of the nurses surveyed left a position due to moral distress. Implications: for Practice: NICU nurses experiencing high MMD-HP scores are more likely to leave a position. Further research is needed to develop strategies useful in mitigating moral distress in and prevent attrition of NICU nurses. Implications For Research: Many NICU nurses experiencing high levels of moral distress have left positions or are considering leaving a clinical position. Longitudinal interventional studies are vital to understand, prevent, and address the root causes of moral distress experienced by NICU nurses.

[Mentoring New Graduate Nurse Practitioners](#) Abstract only*

Authors: Moss, Colleen and Jackson, Joanie

Publication Date: May 01 ,2019

Journal: Neonatal Network - Journal of Neonatal Nursing 38(3), pp. 151-159

There is a critical shortage of neonatal nurse practitioners (NNPs) in the United States. The NNP shortage increases workload and negatively affects job satisfaction, which ultimately impacts patient safety. Therefore, it is imperative to identify strategies to improve job satisfaction and retention. Authors of current evidence supported the connection between mentoring and role transition, job satisfaction, and intent to stay. Mentorship is key to the success of new graduate nurse practitioners as they

develop confidence in the nurse practitioner (NP) role. The aim of this integrative review is to examine the existing evidence regarding mentoring of advanced practice nurses and the potential impact on the NNP workforce. © Copyright 2019 Springer Publishing Company, LLC.

[Increasing staff retention by facilitating neonatal nurse development to an enhanced level](#)

Authors: Jones, Tracey and Ramsbottom, Hannah

Publication Date: 2017

Journal: Infant 13(4), pp. 159-161

Many factors influence why a nurse makes the decision to leave an NHS post and in a time of both financial constraints and nurse shortages, retaining staff numbers is of significant importance. This paper will explore how empowering nurses through continuing professional development might aid nurse retention specifically in the area of neonatal intensive care.

Advanced Practice

[The important primary care role of neonatal nurse practitioners in the neonatal intensive care unit](#) Abstract only*

Authors: Etten, Kristen; Hoffman, Jacqui; Wallman, Carol and Bellflower, Bobby

Publication Date: Dec 01 ,2022

Journal: Journal of the American Association of Nurse Practitioners 34(12), pp. 1258-1262

Neonatal nurse practitioners (NNPs) are recognized as acute care providers but are actually both acute and primary care providers via education and practice. Neonatal nurse practitioners provide primary care such as anticipatory guidance, care and follow-up of technologically dependent infants, and discharge planning. Numerous interventions and care in the

neonatal intensive care unit (NICU) fall under the umbrella of health promotion, an aspect of primary care. In addition, NNPs must also be able to recognize, diagnose, and manage myriad common pediatric illnesses. There is a paucity of data to evaluate how NNP programs are meeting the National Association of Neonatal Nurses educational standards on this topic. A REDCap survey was sent to 31 NNP program directors, with a 100% response rate. All programs provide content addressing primary care management in their curriculum. National recognition of the primary care role, in addition to the acute care role that NNPs practice, should increase opportunities for clinical placement sites, employment opportunities, and grant funding. This article aims to demonstrate both the educational preparation and the delivery of primary care that NNPs provide in the NICU and other areas of practice.

[Supporting Role Knowledge and Role Transition in Neonatal APRN Students](#) Abstract only*

Authors: Carley, Annette and Garrett, Regina
Publication Date: May ,2022
Journal: Neonatal Network 41(3), pp. 168-171

Abstract: Advanced practice registered nurses (APRNs) play a critical role in alleviating provider shortages and expanding access to health care services for medically underserved populations. To meet these shortages, the APRN workforce is growing faster than the average for all occupations. This creates a critical need for effective transitioning from the role of student to APRN provider. Unfortunately, transitioning to the APRN role is not seamless and role confusion or challenges in role exposition can contribute to job stress and even role exodus. A recent quality improvement project supported student understanding of APRN roles and anticipation of role transition challenges for neonatal students preparing for roles as nurse practitioner and clinical nurse specialist. This strategy has the

potential to contribute to successful role transition of neonatal nurse practitioner and neonatal clinical nurse specialist students.

[The Future of Neonatal Advanced Practice Registered Nurse Practice: White Paper.](#) Abstract only*

Authors: Staebler, Suzanne;Meier, Susan R.;Bagwell, Gail and Conway-Orgel, Margaret
Publication Date: Feb ,2016
Journal: Advances in Neonatal Care 16(1), pp. 8-14

In recent years, the National Association of Neonatal Nurses and the National Association of Neonatal Nurse Practitioners have been monitoring aspects of neonatal advanced practice nursing and providing leadership and advocacy to address concerns related to workforce, education, competency, fatigue, safety, and scope of practice. This white paper discusses current barriers within neonatal advanced practice registered nurse practice as well as strategies to promote the longevity of the neonatal advanced practice registered nurse roles. The National Association of Neonatal Nurses (NANN) and the National Association of Neonatal Nurse Practitioners (NANNP) define advanced practice nursing and the advanced practice registered nurse (APRN) in accordance with the APRN Consensus Model for APRN Regulation definitions.1–3 The neonatal community is served by 2 neonatal APRN roles—the neonatal nurse practitioner (NNP) and the neonatal clinical nurse specialist (NCNS).4

Workforce

[The potential of patient-based nurse staffing - a queuing theory application in the neonatal intensive care setting](#)

Authors: Sulz S, Fugener A, Becker-Peth M, Roth B
Publication Date: January 2024
Journal: Health Care Management Science. 2024 Jan 30

Faced by a severe shortage of nurses and increasing demand for care, hospitals need to optimally determine their staffing levels. Ideally, nurses should be staffed to those shifts where they generate the highest positive value for the quality of healthcare. This paper develops an approach that identifies the incremental benefit of staffing an additional nurse depending on the patient mix. Based on the reasoning that timely fulfillment of care demand is essential for the healthcare process and its quality in the critical care setting, we propose to measure the incremental benefit of staffing an additional nurse through reductions in time until care arrives (TUCA). We determine TUCA by relying on queuing theory and parametrize the model with real data collected through an observational study. The study indicates that using the TUCA concept and applying queuing theory at the care event level has the potential to improve quality of care for a given nurse capacity by efficiently trading situations of high versus low workload.

[Neonatal nursing workforce survey – What does the landscape look like in England?](#) Abstract only*

Authors: Patterson, Lynne; O'Mara, Claire and Hunn, Linda

Publication Date: 2020

Journal: Journal of Neonatal Nursing 26(1), pp. 3-16

Abstract: The aim of this survey was to identify an in-depth analysis of the staffing in all the neonatal units in the Operational Delivery Networks in England. A survey tool was constructed by the lead nurses from the ODN's in conjunction with a data analyst. This was then sent to all of the managers in every unit in England to complete. Questions were asked around nursing staff vacancies, how these were being managed, how registered and unregistered staff were being educated, if link nurses were employed, if community outreach teams were utilised and how this was all being funded. Managers were asked to provide free

text comments so that some qualitative data would help illuminate the current difficulties that they were dealing with together with some insights into what had helped. The survey showed that almost all units had vacancies and that these were more prevalent in the south of England, with the biggest reason for these being retirement. Managers reported that in some areas it was relatively easy to recruit and conversely in others it was extremely challenging. It was especially difficult to recruit staff with experience. There were challenges in managing staff education and in particular enabling staff to achieve the QIS qualification, or in the case of nonregistered staff, NVQ or foundation degree qualifications. There are variations among units in availability of link roles and also the provision of community outreach teams and funding for these roles is unclear and disparate. Whilst this has provided a snapshot across England it has also pointed to further, more detailed work that needs to be done to ensure that units are staffed appropriately and in line with current standards.

[Role of the Neonatal Nurse Practitioner in the Community Hospital](#) Abstract only*

Authors: Snapp, Barbara; Reyna, Barbara and Samra, Haifa A.

Publication Date: 2019

Journal: Advances in Neonatal Care (Lippincott Williams & Wilkins) 19(5), pp. 402-408

Abstract: Background: The role of the neonatal nurse practitioner (NNP) is well established in the neonatal intensive care unit. The level IV NNP is traditionally supported by large multidisciplinary teams while the level I to III NNP may be the sole in-house provider with limited resources. Purpose: The purpose of this research project is to identify the NNP role, responsibilities, and barriers to practice in the level I, II, and III newborn care settings. Methods: This study used a descriptive, exploratory design to examine NNP roles and responsibilities in level I, II,

and III care centers via an online survey. Results: Of the respondents (171), the majority (71.3%) work 24-hour shifts, 51.5% being the single NNP during the day with 67.8% being alone at night. Nearly 27% have limited or are without ancillary support while 29.8% cannot meet some standards of care due to inadequate resources. Almost 22% lack written protocols and procedural opportunities are limited or a concern for 15.8% of the NNPs. Implications For Practice: A better understanding of the responsibilities of the level I to III NNP will assist with developing staffing guidelines, influence practice models, and guide recruitment and retention of the NNP. Implications For Research: A systematic literature review yielded articles on the value of nurse practitioners and their ability to deliver safe, effective and cost-conscious care but not on what the role entails on a daily basis. Further studies are needed to specifically compare the role of the level IV NNP to the level I, II, and III NNP to further delineate NNP functionality according to level of care.

[Exploring the landscape of the ANNP workforce: results of a UK-wide survey.](#)

Authors: Webster, K.; Couper, J.; Hodson, J.; Carpenter, M.; Jones, T.; Keeling, D.; Preston, W.; Lewis, L.; Mayes, A. and Dinwiddy, K.
Publication Date: 2019
Journal: *Infant* 15(4), pp. 151-154

Abstract: This article discusses a UK-wide survey to gather information related to the advanced neonatal nurse practitioner (ANNP) workforce. The cohort of ANNPs that responded to the questionnaire provided detailed information on various aspects of their role and a positive response to the proposal for a career framework. The data gathered will be used to influence the design and production of a career development framework for ANNPs. Copyright © 2019 SNL All rights reserved.

[Strategic modeling of the neonatal nurse practitioner workforce](#)

Abstract only*

Authors: Schell, Gregory J.; Lavieri, Mariel S.; Jankovic, Filip; Li, Xiang; Toriello, Alejandro; Martyn, Kristy K. and Freed, Gary L.
Publication Date: Jul ,2016
Journal: *Nursing Outlook* 64(4), pp. 385-394

Abstract: Background Neonatal nurse practitioners (NNPs) play a vital role in the medical care of newborns and infants. There is expected to be a shortage of NNPs in the near future. Purpose To assess the present NNP workforce and study the impact of potential policy changes to alleviate forecasted shortages. Methods We modeled the education and workforce system for NNPs. Forecasting models were combined with optimal decision-making to derive best-case scenario admission levels for graduate and undergraduate programs. Discussion Under the best-case scenario for the current system, the shortage of NNPs is expected to last 10 years. We analyzed the impact of improving the certification examination passing rate, increasing the annual growth rate of master's programs, and reducing the workforce annual attrition rate. We found that policy changes may reduce the forecasted shortage to 4 years. Conclusion Present forecasts of demand for NNPs indicate that the existing workforce and education system will be unable to satisfy the growing demand. Policy changes may reduce the expected shortage and potentially improve access to care for newborns and infants.

[Capacity of, and Demand for, Neonatal Nurse Practitioner Educational Programs: A Missing Piece of the Workforce Puzzle](#)

Abstract only*

Authors: Freed, Gary L.; Moran, Lauren M.; Dunham, Kelly M.; Nantais-Smith, Leanne and Martyn, Kristy K.
Publication Date: 2015
Journal: *Journal of Professional Nursing* 31(4), pp. 318-322

Abstract: Studies have demonstrated a dramatic increase in the number of new nurse practitioners (NPs) overall completing NP education each year. However, NPs who provide specialized care to children have not experienced increases in their pipeline at all. This has resulted in shortages of neonatal nurse practitioners (NNPs). The aim of this study was to gain a greater understanding of the NNP pipeline and potential for increasing the number of new NNPs graduating each year. Telephone survey of all NNP educational programs. Approximately one fourth of all NNP education programs had closed over the past several years. This is despite a strong job market, planned increases in hiring NNPs, and a seemingly growing shortage of NNPs. Problems with the NNP pipeline are not due to a lack of capacity of existing programs, but rather to difficulties in increasing the enrollment demand. 21 references

[Neonatal Nursing Workforce: A Global Challenge and Opportunity](#). Abstract only*

Authors: Kenner, C.

Publication Date: 2015

Journal: Newborn and Infant Nursing Reviews 15(4), pp. 165-166

Abstract: As the United Nations Millennium Development Goals (MDGs) move to Sustainable Development Goals (SDGs) to ensure that progress continues and is sustainability, the quality and quantity of the workforce is being examined. The neonatal nursing workforce is an elusive concept as there are many challenges to accurately measuring the number of neonatal nurses working globally. Yet, the ability to describe the workforce-supply and demand is important as neonatal outcomes are directly linked to access to health professionals who are adequately trained. This article will describe the health

care workforce and the need to re-examine the changing healthcare needs globally.

Burnout and resilience

[Relationships of nursing stress and trait emotional intelligence with mental health in neonatal intensive care unit nurses: A cross-sectional correlational study](#) Abstract only*

Authors: Barr, Peter

Publication Date: Mar ,2024

Journal: Australian Critical Care 37(2), pp. 258-264

BACKGROUND: The neonatal intensive care unit (NICU) is a stressful and emotionally laden environment, but the relationships between nursing stress, emotional intelligence, and mental health have not been studied in NICU nurses. OBJECTIVES: The study aimed to determine (i) whether nursing stress and trait emotional intelligence controlled for the five-factor model of personality predict mental health in NICU nurses and (ii) whether trait emotional intelligence buffers the effect of nursing stress on mental health. METHODS: A cross-sectional correlational study in 123 (28%) of 440 eligible NICU nurses using self-report questionnaire measures of nursing stress (Nursing Stress Scale), trait emotional intelligence (Assessing Emotions Scale), and psychological distress and emotional well-being (Mental Health Inventory). The data were analysed using hierarchical multiple regression and moderation analyses. RESULTS: The hierarchical multiple regressions showed nursing stress predicted psychological distress (DELTA R^2 = .11) and emotional well-being (DELTA R^2 = .10) at Step 1. The five-factor model of personality explained further variance in psychological distress (DELTA R^2 = .27) and emotional well-being (DELTA R^2 = .26) at Step 2. Finally, trait emotional intelligence predicted further increments in psychological distress (DELTA R^2 = .05) and emotional well-

being (DELTAR2 = .08) at Step 3. The optimism (expecting good things to occur in one's life) and mood regulation (dampening, repairing and maintaining emotions) subdimension of trait emotional intelligence predicted psychological distress (beta = -.29) and emotional well-being (beta = .41) in the final models of the hierarchical multiple regressions. Trait emotional intelligence did not moderate the effect of nursing stress on psychological distress or emotional well-being. CONCLUSIONS: NICU managers and educators should seek to remedy controllable work-related stressors and support NICU nurses' emotional competence because these respective environmental and personal factors predict mental health in these nurses.

[Compassion fatigue and compassion satisfaction in pediatric and neonatal care nurses during the COVID-19 pandemic in Sweden](#)

Authors: Blixt, Cornelia;Johansson, Elin;Forsner, Maria and Angelhoff, Charlotte

Publication Date: 2023

Journal: Journal of Pediatric Nursing 73, pp. e646-e651

PURPOSE: Quality of care and the mental and physical health of nurses are interlinked. The COVID-19 pandemic has imposed an extremely high burden on health care. This study aimed to: 1) describe professional quality of life of registered nurses (RN) working in the pediatric and neonatal care units during the COVID-19 pandemic in Sweden, 2) compare professional quality of life between RNs with and without a Master's degree in specialist nursing pediatric care (MSc), and 3) compare differences in professional quality of life associated with the nursing experience (years). DESIGN AND METHODS: This study adopted a cross-sectional survey design. The PROQoL R-5-questionnaire was administered as a web survey to 160 RNs at four pediatric wards and two neonatal units of two hospitals in Sweden. RESULTS: Seventy-one RNs responded to the survey. Overall, they reported a sufficient professional quality of life. RNs

with an MSc suffered significantly lower secondary traumatic stress levels. Experienced RNs reported significantly higher compassion satisfaction and lower occupational burnout. CONCLUSION: Higher education and longer experience are beneficial for nurses' professional quality of life when working in pediatric care units. PRACTICAL IMPLICATIONS: Results from this study highlights the importance of offering RN education in pediatric care at master level and supporting novice nurses, to prevent negative professional well-being outcomes in pediatric care, because the health of nurses is of utter importance when crisis such as a pandemic hits the world. The findings also suggest that the conditions for professional quality of life could improve through activities such as self-care, time for reflection, better working hours, competence-adjusted salary, and educational opportunities.

[Neonatal nurse practitioner job satisfaction, workforce environment, and mental well-being](#) Abstract only*

Authors: Snapp B, McCutcheon EW, Moore TA, Teel D

Publication Date: September 2022

Journal: Journal of the American Association of Nurse Practitioners. 34(9):1058-1065, 2022 Sep 01.

Background: Increased demand for nurse practitioners emphasizes the importance of consistent and ongoing collection of data to provide a better understanding of the NNP workforce and to promote retention and recruitment of NNPs.

Purpose: To understand how work environment and work hours influence job or career satisfaction.

Methodology: The National Association of Neonatal Nurse Practitioners in collaboration with the National Certification Corporation emailed an online survey to all 6,558 certified neonatal nurse practitioners (NNPs) in 2020 with 845 (12.8%)

responding. Subjects included those with responsibilities in direct patient care, transport NPs, faculty/directors, and advanced practice registered nurse coordinators/managers/administrators. Results: Satisfaction with career choice as an NNP was reported as very satisfied by 58% (n = 493) and mostly satisfied by 37% (n = 310). Satisfaction with current job as an NNP was reported as very satisfied for 30% (n = 252), with 51% being mostly satisfied (n = 435). Age influenced satisfaction scores, with NNPs aged 61 years or older having a higher mean score than NNPs aged 31–40 years ($p = .041$). The majority of NNPs did not use all of their available paid time off (72%; n = 609) and respondents worked an additional 248 extra hours per year. NNPs experience bullying (58%) and/or lateral violence (32%). Seventeen percent have called in sick for mental health reasons (n = 147).

Conclusions: Neonatal nurse practitioners' satisfaction is multifactorial. Those who reported taking time off for self-prescribed mental health indicated less job satisfaction, more work hours, poor work/life balance, and a less-than-optimum work environment.

Implications: Overall, NNPs are satisfied with their career choice but are less satisfied with their job choice. Understanding factors that influence mental well-being and job satisfaction will improve recruitment and retention of nurse practitioners.

[Burnout and Turnover among NICU Nurses](#) Abstract only*

Authors: Thomas, Anisa O.;Bakas, Tamilyn;Miller, Elaine;Johnson, Kimberly and Cooley, Heather L. Tubbs

Publication Date: Jan ,2022

Journal: MCN: The American Journal of Maternal Child Nursing 47(1), pp. 33-39

Introduction: In 2019, the national average turnover rate of registered nurses in the United States was approximately 17.8%.

Each percentage increase in turnover costs a hospital, on average, \$270,800. Although burnout is a known contributor to nurses' turnover intention, few studies have examined the relationship between nurse burnout and turnover, and there is little data on this relationship in neonatal intensive care environments. The purpose of this study was to examine the relationship between nurse burnout and turnover among neonatal intensive care unit (NICU) nurses. Study Design: A secondary analysis of data collected from an observational study involving 136 nurses in a 52-bed NICU from 2013 to 2014. Methods: Multivariate logistic regression models were used to test for associations between measures of burnout and turnover. Results: 16.9% of nurses turned over during the 11 months of the original study. Most nurses reported high (46%) to moderate (37%) levels of emotional exhaustion. Final models did not indicate a relationship between burnout and turnover. Clinical Nursing Implications: Although burnout has been associated with turnover intent among nurses, we did not observe an association between burnout and turnover among NICU nurses. Despite no direct relationship between burnout and turnover in the NICU, burnout may have other negative consequences. Nurse leaders should continue to prioritize reducing burnout among nursing staff to improve the well-being of the NICU nurse workforce. Work-related burnout, characterized by emotional exhaustion, depersonalization, and personal accomplishment, has been associated with nurses' intent to leave their job. In this study of nurses in the neonatal intensive care unit, 16.9% of left their position over an 11-month period and a majority of reported moderate to high levels of emotional exhaustion. No association was found between any dimension of burnout and odds of turnover; however, burnout may have other negative consequences for both neonatal intensive care nurses and infants, and merits further exploration.

[Neonatal Nurses Book Club: A Novel Approach to Promote](#)

[Nursing Resilience](#). Abstract only*

Authors: Perino, Jeanne;Cavanah, Kylie and Havron, Erin

Publication Date: May 01 ,2021

Journal: Neonatal Network - Journal of Neonatal Nursing 40(3), pp. 155-160

The Neonatal Critical Care Unit Book Club began with a common passion for reading and a need for socialization. There was also the hope that the club would foster a positive work culture and increase staff morale and resilience. In addition, the book club provided a mechanism for obtaining continuing education. The purpose of this article is to describe how a group of nurses participating in a book club were able to find support and encouragement during a pandemic.

[2020 Neonatal Nurse Practitioner Workforce Survey: An Executive Summary](#). Abstract only*

Authors: Snapp, Barbara;Moore, Tiffany A.;Wallman, Carol and Staebler, Suzanne

Publication Date: Jun 01 ,2021

Journal: Advances in Neonatal Care 21(3), pp. 242-246

BACKGROUND: The National Association of Neonatal Nurse Practitioners (NANNP) partnered with the National Certification Corporation (NCC) to invite all NCC-certified neonatal nurse practitioners (NNPs) to participate in a national survey on NNP compensation, workforce environment, and satisfaction measures. **PURPOSE:** To understand the current NNP compensation, benefits, and workforce environment. **METHODS:** An anonymous survey was sent to 6558 board-certified NNPs with 845 respondents. **RESULTS:** Most of the survey respondents (92%) are in direct patient care (n = 804) with 83% (n=703) working full time (35 hours or more). Those NNPs with less than 5 years' experience had a mean salary of \$119,000 per year while more experienced NNPs (30-plus years) earned a

mean salary of \$134,000 per year. Half of the NNPs (51%) report high satisfaction with their scope of practice and role in their organization. Distribution of NNPs throughout the workforce is suboptimal, with 67% of the administrators indicating they do not have enough NNPs. **IMPLICATIONS FOR PRACTICE AND RESEARCH:** The 2020 NANNP workforce survey collected information on NNP compensation, benefits, work environment, and experiences. It identified areas of satisfaction, such as compensation with bonuses and pay increases, and acknowledged areas needing improvement such as the lack of diversity within the profession. Utilizing the results of the survey will help create a more diverse, well-educated, and informed workforce to ensure culturally competent NNPs remain relevant within the healthcare system. Copyright © 2021 by The National Association of Neonatal Nurses.

[Impact of nurse staffing on reducing infant, neonatal and perinatal mortality rates: Evidence from panel data analysis in 35 OECD countries](#).

Authors: Amiri, A.;VehvilainenJulkunen, K.;SolankallioVahteri, T. and Tuomi, S.

Publication Date: 2020

Journal: International Journal of Nursing Sciences 7(2), pp. 161-169

Objectives: To investigate the magnitude of effect nurse staffing had on decreasing the newborn mortality rates in member countries of Organisation for Economic Co-operation and Development (OECD). **Method(s):** The statistical technique of panel data analysis was applied to explore the possibility of association between the number of nurses' density per 1,000 population and infant, neonatal and perinatal mortality rates (IMR, NMR and PMR) per 1000 births. The observations of 35 OECD countries were collected over the period of 2000 through 2016. **Result(s):** There were significant associations between

nurse staffing and IMR, NMR and PMR i.e. a 1% increase in nurse-staffing level reduced IMR, NMR and PMR by 0.98%, 0.97% and 0.96%, respectively. Furthermore, the role of nursing-related services in declining the average of newborn mortality rates were investigated at the highest level in Slovenia (-5.50), Sweden (-3.34), Iceland (-2.51), Czech Republic (-1.86), Japan (-1.64) and Finland (-1.64). Moreover, if the current relationship between nurse-staffing level and newborn mortality rates are disturbed with nursing shortage (e.g. in Slovak Republic and Israel), then it takes about 17 years for the mortality rates to reduce and restore back to the previous equilibrium.

Conclusion(s): A higher proportion of nurses' density per 1,000 population is associated with lower newborn mortality rates. In addition, the nursing-related services of Slovenia, Sweden, Iceland, Czech Republic, Japan and Finland with the highest impact on improving the health level of newborns would be good patterns for other developed countries in maternity and child health care.

[Compassion Fatigue, Burnout, and Neonatal Abstinence Syndrome.](#) Abstract only*

Authors: Sweigart, Erin

Publication Date: Jan 01 ,2017

Journal: Neonatal Network - Journal of Neonatal Nursing 36(1), pp. 7-11

NICU nurses have seen a dramatic increase in cases of neonatal abstinence syndrome (NAS). The care needs of infants with NAS are highly demanding and can lead to feelings of frustration and emotional exhaustion among NICU nurses. Although studies have examined the experiences of nurses caring for NAS patients, none have specifically addressed the risk for compassion fatigue and burnout. Nurses need practical strategies to reduce their risk for compassion fatigue and burnout when caring for these patients. Improved education and

implementation of self-care measures can help nurses more effectively manage stress and positively impact care of these infants and their families.

[Neonatal Nurse and Neonatal Nurse Practitioner Fatigue](#)

Abstract only*

Authors: Keels, Erin L.

Publication Date: 2016

Journal: Newborn and Infant Nursing Reviews 16(3), pp. 168-172

Current workforce shortages may cause some neonatal nurses and neonatal nurse practitioners (NNPs) to schedule and work more hours than their normal hours, leading to inadequate sleep and recovery. Sleep related fatigue of neonatal nurses, including NNPs, is a serious but common health issue that can lead to personal and patient safety problems if not effectively addressed. Elements contributing to sleep disturbances and related fatigue are multifactorial, and include personal, work group, organizational and administrative factors. Improving individual knowledge and accountability while working collaboratively with employers and regulatory bodies to address these issues can improve safety and quality of care for patients and improve the health and wellbeing of neonatal nurses and NNPs.

In the news

[Workforce and Supply Chain Issues Impacting Neonatal Nursing Care Globally](#)

Source: Journal of Perinatal and Neonatal Nursing

Publication date: December 2022

The International Council of Nurses (ICN), when celebrating International Nurses Day in May 2022, cited that "the greatest

threat to global health care is the workforce shortage."¹ This statement follows the ICN's Policy Brief The Global Nursing Shortage and Nurse Retention published in 2021.² An estimated 13 million nurses will be needed just to fill the existing gaps and not increase the number of nurses where there are already glaring holes.² This shortage is not limited to generalist nurses but trickles down to specialty areas like neonatal nursing. For instance, in the UK before the COVID-19 pandemic really started in January 2020, additional neonatal nurses were needed for adequate staffing.³

[Enniskillen: Neonatal unit costs ongoing due to nurse shortages](#)

Source: BBC News

Publication date: 6th June 2022

A shortage of neonatal nurses has led to a reduction in cots in a hospital unit providing special care for sick and premature babies. The South West Acute Hospital (SWAH) in Enniskillen, County Fermanagh, usually operates [six special care cots in its neonatal unit](#). But for the last six months only emergency care has been available via two "stabilisation cots" in the unit.

[Neonatal nurse 'crisis' warning as third of shifts understaffed](#)

Source: Nursing Times

Publication date: January 2020

Neonatal units in Britain need a boost of at least 605 additional nurses in order to meet safe staffing standards, experts have warned. Their caution comes as figures show baby care services across England, Scotland and Wales are desperately short of nurses in the right...

[Neonatal care is becoming a postcode lottery, RCN warns](#)

Abstract only*

Authors: Mckew, Matthew

Publication Date: 2017

Journal: Nursing Children & Young People 29(8), pp. 6

Abstract: The article reports the warning issued by the Royal College of Nursing (RCN) as of October 2017, stating that the shortage of neonatal nurses in Great Britain is contributing to variations in care for newborn infants.

Competency Frameworks

[Advanced Neonatal Nurse Practitioner Capabilities Framework](#)

Source: British Association of Perinatal Medicine

Publication date: 2021

The purpose of this framework is to give a career pathway to ANNPs working in any level or unit or within the transport setting. This model makes clear how ANNPs can progress outside the limitations of the clinical rota by setting out a variety of career development pathways using the four pillars of advanced practice: clinical practice, leadership and management, education and research.

[International Neonatal Nursing Competency Framework](#)

Author(s): Jones

Source: Journal of Neonatal Nursing 25 pp. 258-264

Publication date: 2019

Defining the scope of practice and role of a nurse globally is multifaceted, especially given the complex nature of neonatal nursing. UNICEF and the World Health Organization (WHO) recognise the uniqueness of the neonatal nursing and midwifery roles as being instrumental in influencing neonatal outcomes. Training and education are pivotal to achieve this. It has been highlighted on many global stages that there are too few nurses and midwives taking care of neonates and that there is a huge disparity in training and education. Therefore, a working group to define competencies was developed with representation from

countries around the world. It was a priority that the document development could be utilised globally, which required a collaborative approach and contribution. COINN gathered input from many collaborating organisations and practicing nurses across the globe and created COINN Neonatal Nursing Competencies. Information was gleaned from neonatal guidelines, educational standards and governmental directives from many countries to develop the document that would become a foundation for identifying competencies and defining the neonatal nursing role, especially for places where neonatal nursing and nurses' roles are not explicit. These competencies were launched at the COINN International Conference May 2019 in Auckland, New Zealand.

[Career, education and competence framework for neonatal nursing in the UK](#)

Source: Royal College of Nursing

Publication date: 2015

It is anticipated that this Royal College of Nursing (RCN) neonatal competency framework will be useful for all health care professionals working within neonatal nursing. The RCN and the working group would like to thank everyone involved with its development, particularly Fiona Smith, RCN Adviser in Children and Young People's Nursing, for her strategic vision.

[Matching Knowledge and Skills for Qualified in Specialty \(QIS\) Neonatal Nurses \(2012\)](#)

Source: British Association of Perinatal Medicine

Publication date: 2012

Uniformity of qualification and competence throughout the UK can only be achieved by providing clear expectations of a standard knowledge content that supports skills performance in practice. Initial discussion within the group identified 4 sections

to support standard qualification. These were, knowledge content (mapped to skills), transferable evidence of achievement, mentor guidance for assessment of knowledge transfer in practice, and identified aspects of quality inherent in education provision. It became clear early in the development of the document that the knowledge content for courses mirrored that expected of mentors in assessing students in practice. This document therefore sets out the following 3 sections:

- Essential core syllabus (knowledge) and skills content for QIS
- Criteria for evidencing achievement of knowledge and skills through the development of a transferable portfolio.
- Identified key measures of quality for education provision.

*Help accessing articles or papers

Where a report/ journal article or resource is freely available the link has been provided. If an NHS OpenAthens account is required this has been indicated. It has also been highlighted if only the abstract is available. If you do not have an OpenAthens account you can [self-register here](#).

If you need help accessing an article, or have any other questions, contact the Knowledge Management team for support KnowledgeManagement@hee.nhs.uk