



2009 winner of Draeger scholarship

Draeger Medical has announced that the winner of the 2009 Draeger Neonatal Scholarship is Julia Petty.

Julia is a lecturer in neonatal nursing at the School of Community and Health Sciences at City University in London. She plans to use her £2,000 prize to develop interactive education, CD-ROMS and web-based learning tools.

Submissions were judged anonymously by members of the Neonatal Nurses Association educational and clinical team.

Luke Bourdillon, Draeger Perinatal Sales Manager, said: "I am very pleased with the decision to award the prize to Julia. Her proposal to develop interactive educational tools is exactly what the scholarship intended; to benefit the whole neonatal community and not just one individual".

Women need choice about where to give birth, says NCT

Offering women choice of where to give birth can have a positive effect on birth outcomes, may improve their satisfaction with the birth and could also cut costs for maternity services. Over 95% of women in the UK are not able to choose where to give birth, a report by the National Childbirth Trust has found. The research highlights the benefits of choice and calls for governments and health professionals to act quickly to ensure women have these choices available to them.

NICE guidelines send wrong message, charity claims

Bereaved parents who wish to see and hold their dead baby could be denied the opportunity if NICE guidelines on antenatal and postnatal mental health are misinterpreted.

Sands, the stillbirth and neonatal death charity, believes that the guidelines lack consistency and make different statements about whether bereaved parents should or should not be offered the chance to hold their baby after he or she has died.

According to the charity, the Full Clinical Guideline states that 'women should not be encouraged to hold their dead baby if they do not wish to'. The quick reference guide states 'Do not routinely encourage mothers of infants who are stillborn or die soon after birth to see and hold the dead infant'.

Neal Long, Sands Chief Executive, says: "The lack of consistency in such influential guidance from NICE and the recommen-

dations that imply removing choice from parents is shocking and extremely unhelpful to parents and those caring for them. Not every parent may want to see and hold their baby but for many it is simply an act of parenting."

The charity wants to see all documentation from NICE, including information for parents, to carry the same information as that laid out in the original Full Clinical Guideline.

Continues Long: "Sands maintains that parents must continue to be offered choice about what is done when their baby dies, and that in order for choice to be real it must be informed. Parents have a fundamental right to see their own baby and no health professional, however well meaning, has the right to deny them this choice."

Online tool could help in the assessment of sick children

Paediatricians at the University of Leicester and the University Hospitals of Leicester NHS Trust have launched an online tool to improve the assessment of sick children.

Funded by the DH, the website www.spottingthesickchild.com is aimed at all front-line professionals in the field of child health and teaches the basic facts and relevant examination of the seven commonest presenting complaints in acutely ill children.

The website builds on the DVD of the same name which indicated that most healthcare practitioners lack training and confidence in acute paediatric illness and are highly motivated to learn these skills.

The intended audience includes foundation doctors, emergency department doctors, paediatric doctors in training, GPs, nursing staff, health visitors, paramedics and ambulance technicians and medical students.

The website was developed by Dr Monica Lakhanpaul of the University of Leicester; Dr Ffion Davies at the University Hospitals of Leicester; and Dr Nicholas Blackwell of OCB Media.

Alder Hey unveils dedicated paediatric MRI scanner

Alder Hey Children's Hospital in Liverpool has unveiled its new intra-operative 3T MRI facility. It is one of only two such facilities for children in the world.

This high-resolution magnetic imaging, supplied by Philips Healthcare, combined with an adjacent theatre featuring BrainLab image-guided navigation systems, will enable scans to be carried out in the operating theatre during surgery.

Funded by a £3 million donation from the Barclay Foundation, the scanner should allow greater precision during surgery, reduce operating times and minimise patients' exposure to radiation, particularly those children who need multiple scans during their care and treatment.

