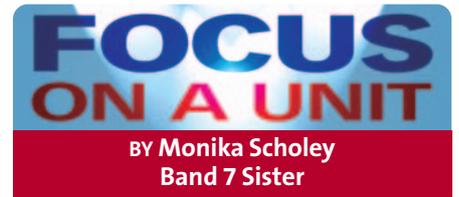


Satisfied staff are at the heart of a growing unit



The new NICU for the North Trent region opened in the Jessop Wing of the Royal Hallamshire Hospital, Sheffield, in 2001. This development required the merging of two units – the North Trent sub-regional intensive care unit in the Jessop Hospital for Women and the Northern General Hospital Baby Unit. This in itself was a challenge, but only the start of a period of great change. The last decade has seen rapid evolution in the provision of neonatal care and bigger challenges have been faced.

In England in 2004 the NHS Neonatal Taskforce was created and to review provision of neonatal care across the country. This Taskforce provided a framework to develop minimum standards for neonatal care and to address nurse shortages through the development of recruitment and retention strategies.

In July 2008 in our own region, the Yorkshire and Humber Specialised Commissioning Group (SCG) agreed a standardised commissioning policy for neonatal service provision across the whole of the North Trent Neonatal Network. It was decided that the regional tertiary centre at the Jessop Wing should receive transfers of all deliveries expected before 26 weeks' gestation and there is a significant chance that this will increase to before 27 weeks' gestation in the near future.

The policy had a phased introduction over two years, rising from less than 24 weeks' gestation in October 2008. These changes meant that an estimated six additional cots were required with the first two additional ICU cots opening in June 2009, a further two opening in October 2009 and a final two cots scheduled to



Band 6 Sister Jenny Lee being assisted by 405 student nurse Liz Platts.

open in 2010, if commissioners agree to it.

Essential building work was required but the most important factor was the ability to recruit sufficient numbers of nursing staff to support the neonatal network and to provide a workforce with the right skills, in the right numbers and in the right place to deliver the high standards of neonatal care required.

During this period, the main focus was recruitment and retention of staff. This was facilitated by comprehensive education and training, made possible through strong leadership and support combined with effective clinical supervision and reflection.

In addition to the recruitment of new staff, it was necessary to nurture and develop the staff already in post. Opportunities were created for staff to develop their careers through promotion and by the development of new roles such as ICU, HDU and SCBU co-ordinators. Further opportunities became available through the decision to set up and run a network-wide neonatal transport team, based in the tertiary centre.

New staff were recruited at open days and a recruitment drive was supported through national advertising and also by working closely with local universities. These methods stimulated much interest and proved successful in bringing in new staff, particularly newly-qualified nurses at the beginning of their careers.

Recruitment of staff brought new challenges of education and training. The designated (and supernumerary)

Education Team provided structured induction training with a clearly designated clinical career pathway and skills escalator with opportunities to work in all three areas of the neonatal unit. Effective induction remains essential for new staff if they are to develop an understanding of the expectations of their role while feeling supported, and also allows them to become a part of the multidisciplinary team that is an essential foundation for the efficient running of a busy NICU.

Staff retention is strongly influenced by working conditions and by the opportunities provided for development. These opportunities are met at the Jessop Wing by a number of different mechanisms including:

- Effective mentorship and preceptorship
- Initial supernumerary status
- Allocated study time and budget
- Supportive educational input to allow for individual development
- Flexible working and an ability to balance work and home life (the implementation of the Improving Working Life Standards supports this)
- Opportunities for role expansion

A change to the provision of neonatal care across the neonatal network was inevitable if the Taskforce and Department of Health guidelines and recommendations were to be met. The Jessop Wing has risen to this challenge and a token of its success has been the recent award of "Neonatal Unit of the Year" through Mother and Baby magazine, endorsed by Bliss.

Implementation of these changes on such a big scale has not been an easy process but the NICU has readily embraced this challenge. The learning curve has been great for all parties involved. Strong leadership and mutual support through regular ward meetings, effective communication, feedback and reflection have helped achieve the desired goals.

Tell us about your unit

Why not contribute to Focus on a Unit?
Contact kate@infantgrapevine.co.uk



Janice Frieslick and Rachel Catt with Child Branch student Jemma Shaw.