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**Bliss**  
for babies born  
premature or sick

# Services for Wales's sickest infants under pressure: Bliss baby report for Wales 2016

Neonatal services in Wales are overstretched and under incredible pressure, putting the safety of infants at risk. Bliss' research findings, published in July in the *Bliss baby report 2016: time for change*,<sup>1</sup> reveal a severe shortage of neonatal nurses and doctors across Wales, meaning that neonatal units are not able to meet national standards<sup>2</sup> on safety and quality of care for premature and sick infants.

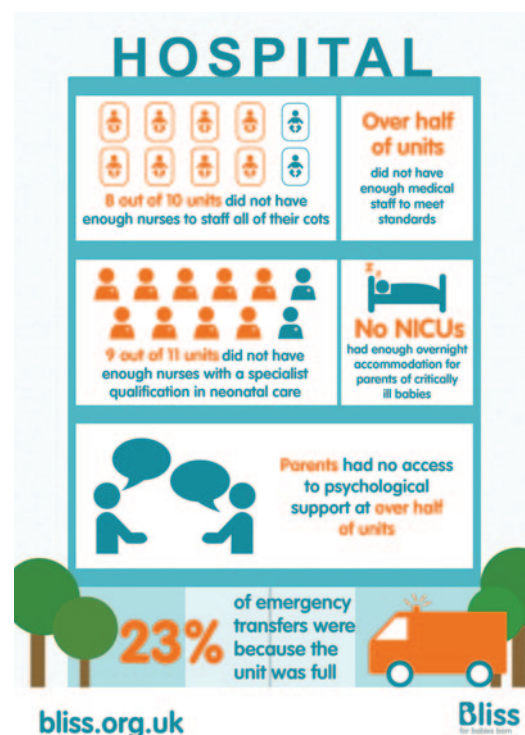
This report – which follows on from the *Bliss baby report 2015: hanging in the balance*,<sup>3</sup> highlighting that neonatal services in England are facing unprecedented pressure – shows that neonatal services in Wales are facing similar challenges. Our report revealed that eight out of ten hospitals providing neonatal care in Wales do not have enough nurses to staff all of their cots in line with national standards for safe, high quality care due to a combination of insufficient investment in neonatal nurse posts and a shortage of neonatal nurses across Wales (FIGURE 1). But getting an infant's care right at the start of life has a big impact on its chance of survival and quality of life; for example, research shows that a fall in one-to-one nursing in neonatal intensive care is linked to a rise in mortality rates.<sup>4</sup>

This pressure on neonatal services in Wales has resulted in nearly a quarter of all emergency transfers of infants taking place due to a lack of staffed cots rather than medical need, putting infants at unnecessary risk and adding to the family's stress and worry.

Just as worryingly, Bliss found that fewer than half of all neonatal units in Wales were able to offer any psychological support for parents, despite up to 40 per cent of mothers of premature infants being affected by postnatal depression.

Bliss, together with the Royal College of Paediatrics and Child Health, is calling for urgent action and investment from the Welsh Government to ensure all premature and sick infants born in Wales get the care they need. On 7 July we launched our report at a special event in the Welsh Assembly for assembly members (AMs), clinicians, policymakers and families (FIGURE 2). Our findings received extensive media coverage, not least because our research also revealed that:

- Only two out of 11 neonatal units in Wales were funded to have enough nurses with a specialist



**FIGURE 1** The main findings of *Bliss baby report 2016: time for change*.



**FIGURE 2** Bliss Campaigns and Policy Manager Helen Korrane with Llyr Gruffydd AM (North Wales).

qualification in neonatal care. All neonatal units identified difficulties with at least one aspect of nurse training and development

- As well as a shortage of nurses, half of units do not have enough doctors
- None of Wales' neonatal intensive care units (NICUs) have enough overnight accommodation for parents to meet national standards, leaving many unable to stay close to their critically ill

infant. This is vital as research shows that when parents are involved in their infant's care it significantly improves their development and recovery.

These stark findings have very real implications for parents and families of children being born premature or sick in Wales. To give just one example from many, one mother from Caerphilly (**FIGURE 3**) gave birth to triplets at 32 weeks' gestation, but due to a shortfall in nurses and bed spaces Emma Westcott had to travel 50 miles away, over the border into England, to give birth. Her triplets were born at an English hospital and they spent their whole neonatal experience there – three weeks in total – because there wasn't enough space in a Welsh unit. Emma had a four-year-old son at home; as her husband is self-employed and had to work his grandparents had to care for him. Emma was without any support and alone in England when her family was in Wales.

Looking at neonatal services in Wales, the *Bliss baby report 2016: time for change* makes the following recommendations:

- The Welsh Government and Health Boards must ensure that national standards for neonatal services are met
- In order to meet these standards and give infants the best chance of survival and improved long-term health, investment in staffing is desperately needed
- The Welsh Government must fund more nurse training places in child health and provide much needed leadership to address the critical medical workforce challenges facing neonatal services in Wales.

It is clear that neonatal services in Wales are under extreme pressure, and staff are being spread too thin. Without urgent action, the gap between the standards required and the care provided will widen even further. While there has been some welcome progress in the development of neonatal services in Wales in recent years, it is clear that units are still struggling to meet standards due to shortages of staff and barriers to training.

Bliss' findings must serve as a warning to the Welsh Government and Health Boards that they must provide additional investment to ensure that national standards for neonatal services are met. This investment must be made urgently to avoid neonatal services in Wales reaching breaking point, and to give premature and sick infants the best possible chance of survival and quality of life.



**FIGURE 3** Bliss Chief Executive Caroline Davey with Caerphilly mother Emma Westcott and triplets Ben, Eli and Max.

Soon after we launched our report, we were delighted to hear Carwyn Jones AM, First Minister of Wales, make clear his expectation that neonatal units in Wales will be properly staffed by 2021. This came during Questions to the First Minister at the Welsh Assembly, in response to a question from Andrew RT Davies AM, Leader of the Welsh Conservatives, who asked the First Minister to address the staffing problems. Nevertheless, on behalf of infants born premature or sick in Wales, and their parents, we need to keep up the pressure on decision-makers.

## References

1. Bliss. *Bliss baby report 2016: time for change*. [Online]. Available from: [www.bliss.org.uk/call-for-change-wales](http://www.bliss.org.uk/call-for-change-wales) [Accessed 30 August 2016].
2. *All-Wales Neonatal Standards 2013*. [Online]. Available from: [www.walesneonatalnetwork.wales.nhs.uk/all-wales-neonatal-standards](http://www.walesneonatalnetwork.wales.nhs.uk/all-wales-neonatal-standards) [Accessed 30 August 2016].
3. Bliss. *Bliss baby report 2015: hanging in the balance*. [Online]. Available from: [www.bliss.org.uk/hanging-in-the-balance](http://www.bliss.org.uk/hanging-in-the-balance) [Accessed 30 August 2016].
4. Watson S.I., Arulampalam W., Petrou S. et al. The effects of a one-to-one nurse-to-patient ratio on the mortality rate in neonatal intensive care: a retrospective, longitudinal, population-based study. *Arch Dis Child Fetal Neonatal Ed* 2016; 101:F195-F200.

Help Bliss to engage Welsh AMs by urging them to write to Cabinet Secretary Vaughan Gething AM to ensure that vital improvements to staffing levels and resources are made: <http://bit.ly/29nVLeA>.

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