

Bliss 30th birthday Baby Report

Neonatal care in England - 2009



Summary



Approximately 70,000 babies were admitted to neonatal care in England in 2008. Almost 20,000 were admitted for intensive care. This is more than one baby every half hour admitted to the highest level of care.

This year, Bliss is celebrating its 30th birthday. In these 30 years, a total of 15 reviews have been conducted into neonatal care in England by official governmental and parliamentary bodies, professional organisations, and Bliss. Each has documented failures in the system and recommended action to remedy these problems. However, none has ever been fully implemented.

In the last 18 months, the NHS Neonatal Taskforce has conducted the most comprehensive review of neonatal care ever undertaken in England. The quality of care set out in the Taskforce's report is ambitious and, if implemented, would make a dramatic and lasting improvement to the way babies and their families are cared for.

We are now calling on the Government, all political parties and the NHS to show their commitment to delivering these much needed improvements in services for special care babies and their families.

NHS Neonatal Taskforce

A Neonatal Taskforce was set up in February 2008 in response to critical reports into services for special care babies and their families by the National Audit Office and House of Commons' Public Accounts Committee. These reports criticised the organisation of neonatal care and highlighted a number of issues which needed to be addressed, including shortages of specialist doctors and nurses, poor commissioning processes* and a lack of clear data on the outcomes of care provided to identify any areas for improvement.

Toolkit for high-quality neonatal services

The work of the Taskforce has culminated in the production of a toolkit to support health service professionals and commissioners to provide high-quality neonatal care.

The toolkit sets out eight principles, each backed up by a range of 'markers of good practice', which spell out how care should be delivered to fulfil the various principles.

Key principles include:

Staffing of neonatal services

- a minimum standard of one to one nursing care is provided to babies in intensive care, one to two nursing care in high dependency and one to four nursing care in special care
- specialist doctors are available at all times
- professionals such as dieticians, physiotherapists and speech and language therapists are available to provide support in the units and the community after babies return home with their families.

* Commissioning is the process of deciding what services are needed, funding them and ensuring they meet requirements

Care of the baby and family experience

- parents are introduced to staff and properly shown round the neonatal unit where their baby is being cared for, and receive information which they can understand about their babies' care
- parents are encouraged and supported to participate in decisions about their baby's care
- overnight accommodation is made available close by for parents whose babies are in intensive care, facilities are available so that siblings can visit units, and comfortable and discreet areas are provided for mothers to breastfeed their babies
- families have access to psychological support.

Transfers

- a safe and effective transfer service is available at all times for babies who need to be moved to another unit
- the service recognises the importance of family circumstances and gives parents the opportunity to accompany their baby.

The toolkit also includes guidance for commissioning neonatal services, good practice examples and other useful documents for NHS professionals and managers.

Transforming neonatal care

Bliss welcomes the publication of the toolkit, however we have some concerns about how these vital improvements to services for our most vulnerable babies and their families will be delivered.

Neonatal services provide a vital safety net for all babies. Although it will cost less than £150 per baby born in England to introduce the improvements set out in the Taskforce's report, no new funding will be provided. With freezes to NHS spending, fierce competition for resources and a growing birth rate, there is a risk that the vision set out by the Taskforce will fail to be achieved.

Bliss is also concerned that the toolkit has not provided any timescales by which the principles for high-quality care or the markers of good practice should be delivered.

Bliss is calling for:

- a group to be set up with the authority to monitor progress and address any obstacles to implementation – to be composed of government ministers, senior civil servants and NHS officials, specialist neonatal doctors and nurses, parent representatives and Bliss
- clear timescales to be published for meeting the Taskforce's principles, to support doctors and nurses work towards their full implementation
- the vision for neonatal care set out in the toolkit to be made a top priority in the 2010/11 NHS Operating Framework
- adequate resources to be identified without delay to make these vital improvements for special care babies and their families.

For more information, please contact Helen Kirrane on 020 7378 5742 or email helenk@bliss.org.uk

Bliss

9 Holyrood Street, London SE1 2EL

t 020 7378 1122 f 020 7403 0673

e information@bliss.org.uk

w www.bliss.org.uk

Family Support Helpline Freephone 0500 618140

Bliss – The National Charity For The Newborn Registered Charity no. 1002973

Registered no. 2609219 Registered Scottish Charity SC040878

Bliss

for babies born too soon,
too small, too sick