



Topic Expert Group: Education and training of the multidisciplinary team working in neonatology

A common neonatal nurse training curriculum

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Target group

All nurses working in neonatal care

User group

Parents, healthcare professionals, professional societies, education providers, health services, and regulators of the profession

Statement of standard

All nurses providing care to infants and their families have access to and undergo education and training using a competency based curriculum and assessment framework.

Rationale

For over thirty years several countries have recognised neonatal nursing as a specialty with either training in the neonatal unit, or at an academic institution, resulting in a neonatal diploma or master's degree. (1) Infants in the NICU are among the most nurse-intensive patients. To intervene before the onset of life-threatening problems, nurses must make complex assessments, implement highly intensive therapies, and make immediate adjustments dependent on infant response. Maintaining optimal respiratory, cardiac, and feeding status may result in improved development and behavior, lower levels of morbidity, and shorter hospitalisation. (2,3)

In addition to staffing levels, neonatal outcomes have been shown to be associated with levels of patient volume, and training of medical and nursing staff. (4) In order to ensure that infants and families receive a standardised level of care, nurses should develop competencies through an integrated, developmental curriculum, both in university and practice settings.

Benefits

- More competent nurses are related to increased survival (5)
- Significantly reduced rates of mortality and morbidity (4)
- Improved nurse retention and satisfaction (6)
- Consistency in quality of care delivery in neonatology (consensus)



Components of the standard

Component	Grading of evidence	Indicator of meeting the standard
For parents and families		
1. Parents contribute to the delivery of nurse education programmes.	B (Low quality)	Training documentation
For healthcare professionals		
2. Neonatal nurses are qualified in specialty as evidenced by the following criteria: Registered nurse, period of preceptorship or mentorship including defined foundation learning within the specialty, completion of a programme of post-registration (post-licensure) education which links the following theory and practice elements: <ul style="list-style-type: none">• Theory modules relating to the care of the neonate and their family within special care, high-dependency care and intensive care, delivered and assessed within a higher education institution.• Achievement of core skills set, undertaken with supervision of an experienced qualified neonatal nurse, assessed in practice and supported by evidence of learning.• Clinical decision-making skills.	B (Moderate quality)	Certificates of award, professional portfolio
For neonatal unit		
3. Infrastructure for educational programmes is provided. (see TEG NICU design)	B (Moderate quality)	Audit report
For hospital		
N/A		
For professional societies		
4. Standards of care, including competencies at the local level are developed and regularly updated, disseminated, and promoted. (7)	B (Low quality)	Guideline
For education providers		
5. A (post) graduate programme focused on neonatal nursing, including the	B (Moderate quality)	Training documentation



following domains is provided: neonatal physiology and pathophysiology, family-centred care, clinical practice, leadership and teamwork, professional development and research. (7)

For health service and regulators of the profession

6. Common national training frameworks aligned with the relevant European Qualifications Framework are available and regularly updated. (8)	B (High quality)	Training documentation
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Where to go – further development of care

Further development	Grading of evidence
For parents and family	
<ul style="list-style-type: none"> Parents are provided with the opportunity to review and revise neonatal nurse curricula. 	B (Very low quality)
For healthcare professionals	
<ul style="list-style-type: none"> Undertake a minimum of 6 days per year of continuing professional development (CPD). (9) 	B (Low quality)
For neonatal unit	
N/A	
For hospital	
<ul style="list-style-type: none"> Support healthcare professionals to undertake CPD. 	B (High quality)
For professional societies	
<ul style="list-style-type: none"> Develop, disseminate, and promote care competencies at regional, national, and international level. (7) 	B (Very Low quality)
For education providers	
<ul style="list-style-type: none"> Provide specialty postgraduate programmes with a focus on neonatal care. 	B (Very Low quality)
For health service and regulators of the profession	
<ul style="list-style-type: none"> International mutual recognition of specialty qualifications in neonatal nursing is facilitated. 	B (Moderate quality)

Getting started

Initial steps
For parents and family
<ul style="list-style-type: none"> Parents are involved in the delivery of nurse education programmes.
For healthcare professionals
<ul style="list-style-type: none"> Attend specialty training through on-the-job training or through professional education programmes.
For neonatal unit



N/A

For hospital

- Support healthcare professionals to participate in neonatal nurse training.
- Provide opportunities for on-the-job training, and experiential learning environments (clinical placements) for students undertaking professional education programmes.

For education providers

- Include basic neonatal care content in undergraduate nursing and midwifery curriculum.

For health service and regulators of the profession

- Develop and implement common training frameworks aligned with the relevant European Qualifications Framework. (8)

Source

1. Council of International Neonatal Nursing (COINN). Position Statement on Neonatal Nursing Education [Internet]. 2018 [cited 2018 May 15]. Available from: <https://coinnurses.org/wp-content/uploads/2018/03/COINN-PS-0100-Neonatal-Nursing-Education.pdf>
2. Lake ET, Staiger D, Horbar J, Cheung R, Kenny MJ, Patrick T, et al. Association Between Hospital Recognition for Nursing Excellence and Outcomes of Very Low-Birth-Weight Infants. *JAMA*. 2012 Apr 25;307(16):1709–16.
3. Lake E, Patrick T, Rogowski J, Horbar J, Staiger D, Cheung R, et al. The Three Es: How Neonatal Staff Nurses' Education, Experience, and Environments Affect Infant Outcomes. *JOGNN*. 2010;(39):S97–8.
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6. Cooper E. Creating a culture of professional development: a milestone pathway tool for registered nurses. *J Contin Educ Nurs*. 2009 Nov;40(11):501–8.
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