

MAY 2022

# SOFT-LANDING

## Is your first job on Neonates?



TEAM SOFT LANDING SHARES ALL THAT YOU NEED TO MAKE THAT 'LANDING' SOFT

This month's newsletter is a little bit different, and we hope that offering a focus on Neonatal care in the UK will be useful for colleagues starting new jobs in NHS neonatal units. International medical graduates have sometimes found it challenging to settle in their neonatal placements. This is mostly because the way neonatal care is planned and delivered in the NHS is very specialised.

Neonatal doctors are expected to be competent in certain basic neonatal skills, Also, neonatal units use different systems to document their daily work, admission and discharge notes to facilitate national audits. Units are often very busy and work with multi-disciplinary teams. It can be overwhelming sometimes for new starters, but do not worry. There's plenty of help and support available.

We are excited to share that we will be at RCPCH conference this June, please come and say hello if you are there!

And, join our fabulous team as we look for regional reps from Scotland, Essex and Merseyside. Send your CV to [team.softlanding@gmail.com](mailto:team.softlanding@gmail.com)

Choose  
YOUR JOB  
WISELY



When you apply for a neonatal job in the UK, you should be able to check which level the unit is and decide if your neonatal training is suitable for the job. If you have post-graduate training in paediatrics including neonates from your home country, you should be able to manage day-to-day work in a level 2/3 unit. However, it is advisable to initially opt for a position in the junior (SHO) rota to familiarise yourself with the system, and then transition to being a registrar. In your paediatric job, you might have to cross-cover neonates, but often this will be a level 1 unit.

There are different levels of neonatal care in the NHS based on the level of specialist care they offer. All doctors in the unit should have training to perform resuscitation and be able to stabilise the newborn prior to transferring to an appropriate level of care.

There is a dedicated transport team (Neonatal Transport Service) to facilitate transfer.



As a neonatal doctor, you will also cover the post-natal ward and transitional care unit.



## Levels of neonatal care in the UK



### Level 3 (Neonatal Intensive care Unit)

For babies requiring intensive, and high dependency care, born before 28 weeks of gestation,

- Very unwell at birth, intubation and ventilation > 48 hours, surgical intervention, therapeutic hypothermia



### Level 2 (Local Neonatal Unit)

For babies requiring high dependency care and special care, will support babies born between 28 - 32 weeks of gestation

- Short term intensive care - ventilation for 48 to 72 hours and, following discussion with a level 3 unit, those whose condition is expected to improve shortly thereafter, parenteral nutrition

### Level 1 (Special care)

For babies who do not need intensive care, often for babies born after 32 weeks of gestation

- Non-invasive monitoring and management of conditions like hypothermia, hypoglycaemia, sepsis, naso-gastric tube feeding etc.



## The Essentials

### Common Procedures in the Unit



Often our training is in resource limited settings and our expertise with neonatal procedures will vary depending on availability of equipments. Most of us will have training in intubation, insertion of umbilical lines and long-lines and heel prick blood sampling. However, performing certain procedures may require support and supervision in the first few days. But do not worry, there will always be someone to guide you and help you. Discuss with your educational supervisor if you need help with gaining competencies in procedures, particularly in intubating and securing intravenous access in extreme preterm neonates (< 28 weeks gestation). Another procedure commonly performed in the unit are cranial ultrasound. Courses and study days are available on these.

Remember to get yourself signed off for procedural competencies and document on eportfolio as these are evidences required for training post applications

### NLS (Newborn Life Support) Course



Newborn Life Support course, more commonly known as NLS, is run by the Resuscitation Council UK and is aimed at all the healthcare professionals involved in the care of newborn infants. This includes both junior and senior medical and nursing staff, midwives, paramedics and resuscitation officers.

NLS course teaches the knowledge and skills to approach the management of a newborn infant requiring assistance in the first 20 minutes of their life in a competent manner. The course, once passed, is valid for 4 years and needs renewal every 4 years.

How to apply? Resuscitation council UK webpage (link below) provides details on the course, including availability dates and Centre near you. You can then book the course by contacting the course Centre organiser, email of whom can be found on Resus council's webpage.

<https://www.resus.org.uk/training-courses/newborn-life-support>

Important Info: It's a mandatory course if you are working with Neonates, and you can claim the course fee (including travel and accommodation allowance) from your study budget.

The course is essential for successful application to ST3/4 training posts.

Enjoy a fun filled day of learning and making new friends!



## NIPE- NEWBORN AND INFANT PHYSICAL EXAMINATION



The NHS newborn and infant physical examination (NIPE) programme aims to identify and refer all children born with congenital anomalies, particularly of the eyes, heart, hips and (in males) testes, where they are detectable within 72 hours of birth. NIPE or the 'baby check' is routinely done on the post-natal ward and also the newborn care unit. This check is done by the midwives, but there are specific indications when a paediatrician needs to perform the NIPE (e.g. prematurity, antenatally detected anomaly, sick babies on the unit). You will be initially shown how to do the baby check and document. Please have someone supervise your first few NIPES and familiarise yourself with the local guidelines and referral pathways.

NIPE forms a bulk of the post natal job for SHO's and junior fellows. As registrars, you will have to often supervise or advise on NIPE abnormalities. So, mastering this would be a good start!

Most trusts will have a NIPE handbook. You can get online training from -

<https://portal.e-lfh.org.uk/>

Best is to see one, do one, teach one!

## Are you Okay ?



**ASK**  
for help

- Educational supervisor
- Clinical lead
- Advanced nurse practitioners
- Senior nurses
- Senior / GRID trainees

**Be prepared**

- Simulation training
- Study days / Courses

**KEEP WELL**

- Long shifts - take breaks
- Drink water
- Eat healthy

Neonatal shifts can be long and busy. You will be doing quite a few long days or nights at a stretch. As a junior fellow, you will hold the delivery suite bleep and also attend to reviews on the post-natal ward and the unit. You will have to learn to prioritise tasks ! As senior fellows, you will mostly be based in the unit, but will have to support your junior colleague for difficult deliveries. But there is help around always. Most level 3 unit will have advanced nurse practitioners who are amazing in teaching and supporting new doctors. Your nurse-in-charge and senior nurses will be able to advise you as well, particularly on unit policies and guidelines which might differ considerably across trusts. There is always consultant cover, and they are more than happy to be called out-of-hours for advice.

**Do not hesitate to ask for help.**

Remember to take care of yourself. Eat health, drink lots of water and take breaks! Speak to your supervisor if you are struggling with anything, do not suffer in silence. And, Team Soft Landing is there too !



## Book your study days.. early !

There will be teaching sessions and simulations within the departments. Otherwise look out for regional neonatal study days organised by RCPCH, Royal Society of Medicine, BAPM and your respective deaneries. Courses to look out for -

Neonatology Study Day, Royal Society of Medicine, <https://www.rsm.ac.uk/>

Cranial Ultrasound Course: The Essentials, University College of London, <http://training.ucheducationcentre.org/>

Meetings and Events: British Association of Perinatal medicine <https://www.bapm.org/>

Keep an eye out for other relevant courses on FOMOhub <https://fomohub.org/events/>

## The budding Neonatologist

If you join training, you can apply for speciality training in Neonatology. Follow the RCPCH website for more information

<https://www.rcpch.ac.uk/resources/neonatal-medicine-sub-specialty>

There are lots of research opportunities in neonatology. Speak to your supervisor at the first contact meeting and get involved early. Browse the NeoTRIPS webpage for trainee-led projects <https://neotrips.org/>

## Meet the Team at the RCPCH Conference



- Workshop on 'Challenge Differential Attainment - Co-create with Team Soft Landing your bespoke IMG support package', June 28, 10:45 - 12:00
- Plenary session 'Trainee-led national programme to reduce differential attainment at subspecialty paediatric training (GRID)- a Team Soft Landing initiative' , June 29
- A clinical leaders session 'Soft Landing and MWRES: an IMG led initiative to address workforce inequality in paediatrics', June 28
- A poster presentation on 'Supporting International Medical Graduates (IMGs) entry to Level one paediatric training – A regional experience', June 28

