Results A total of 30 infants were included in the survey; 22 of these infants were ≥32 weeks gestation at birth, and the other 8 infants were <32 weeks gestation. The results are shown in Table 1. A total of 372 days were saved with a cost saving around £167,400 (£450/scbu day). No family used additional support. No infant was readmitted due to poor growth or skin infection.

Conclusions

- Early discharge to home on NG feeds was safe and the infants gained weight appropriately. This saved a median of 8 bed days. The families required routine support from their close relatives and community team.

Aims The introduction of individualised care rooms (ICR) at Barnet Hospital has allowed family-centred neonatal care to take place in an environment where the mother is empowered as the main carer for her newborn with the support of trained staff. This study aims to quantify the effect this has on maternal mood in the postnatal period.

Methods Mothers of babies that had either been in the special care baby unit (SCBU) or ICR for 3 or more days were asked to complete the Edinburgh Postnatal Depression Questionnaire. The questionnaire is scored out of 30, with a higher score representing more severe concerns regarding maternal mood.

Results Questionnaires were handed out to 10 parents in each of the 2 groups. They were returned by 7 parents from ICR and 8 parents from SCBU. The average length of stay was 18 days in the ICR group and 24 days in the SCBU group. The mean score was 4.57 in the ICR group, compared to 10.37 in the SCBU group with a p value of 0.04.

Conclusion This study highlights how important maternal involvement and empowerment can be in neonatal care. Improvements in maternal mood will aid bonding and have a positive effect on the emotional and social development of the child and the family unit.

Aims To determine whether there is a significant stress response to the neonatal life support airway test (NLSAT) amongst nurses, midwives, doctors and other professionals; to compare level of experience with the stress response measured in each participant and identify whether high stress levels correlate with difficulty passing the NLSAT.

Design Quantitative observational study measuring stress levels of candidates on the NLS course using saliva tests to measure salivary cortisol levels and a validated anxiety questionnaire (State Trait Anxiety Inventory).

Setting NLS course centres in the UK in 2013

Participants: 80 healthcare professionals (nurses, doctors and midwives) enrolled on the NLS course.

Interventions: Stress levels measured at baseline (10am), immediately before and then 20 min after the initiation of the NLSAT. Demographic data including professional experience and prior exposure to the NLS course was collected.

Results Cortisol measurements failed to detect any significant rise in stress levels. Significant stress levels were induced by the NLSAT when measuring anxiety scores with baseline mean scores of 39.63 (11.75), mean pre-NLSAT scores of 48.38 (SD 12.89, p-value <0.001) and mean post-NLSAT scores of 42.82 (SD 13.65, p-value 0.03). STAI scores significantly rose in all professionals from baseline to post-NLSAT (p < 0.001) with greatest change detected for midwives (+11.82 (SD 7.64, p-value <0.001)) and mean post-NLSAT scores of 42.82 (SD 13.65, p-value 0.03). STAI scores significantly rose in all professionals from baseline to post-NLSAT (p < 0.001) with greatest change detected for midwives (+11.82 (SD 7.64, p-value <0.001)) and mean post-NLSAT scores of 42.82 (SD 13.65, p-value 0.03).

Conclusions Stress levels induced by the NLSAT are significant and need to be considered when instructing and developing the NLS course with variation amongst different healthcare professionals.