Neonatal Nursing Specialisation in South Africa

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Pre-knowledge to presentation at SANC

- Neonatal specialisation was approved from 2001-2012 under Regulation 212 (Specialisation in Medical and Surgical Nursing Science: …)
- Specialisation was stopped in 2012 due to technical error with application
- Higher education landscape changed with implementation of NQF framework
- Legacy qualifications phased out (last intake 2019) and new qualifications rolled out

NQF Level & Credits	Applied Knowledge	Discipline based knowledge
10 (360)	PhD	D
9 (180)	M	Master's *(Advanced Practice Nurse)*
8 (120)	PG Dip	Clinical Nurse Specialisation
8 (120)		Hons.
8(480)		Professional Bachelor
7 (360)		Bachelor (not nursing)
7 (120)	Ad. Dip	Midwifery
6 (360)	Dip	General Nurse
6 (120)	Ad.Cert	
5 (120)	H. Cert	Auxilliary Nurse

Pre-knowledge to presentation at SANC

- Application for recognition as PGDip declined due to “overlap with other qualifications”
- Political climate changed and motivation was resubmitted
- Presentation done at SANC Education Committee meeting to follow …

South African Neonatal Nurse Specialisation – Is Professional Licensing Justifiable?

Carin Maree, on behalf of the

Neonatal Nurses Association of South Africa

15 August 2025

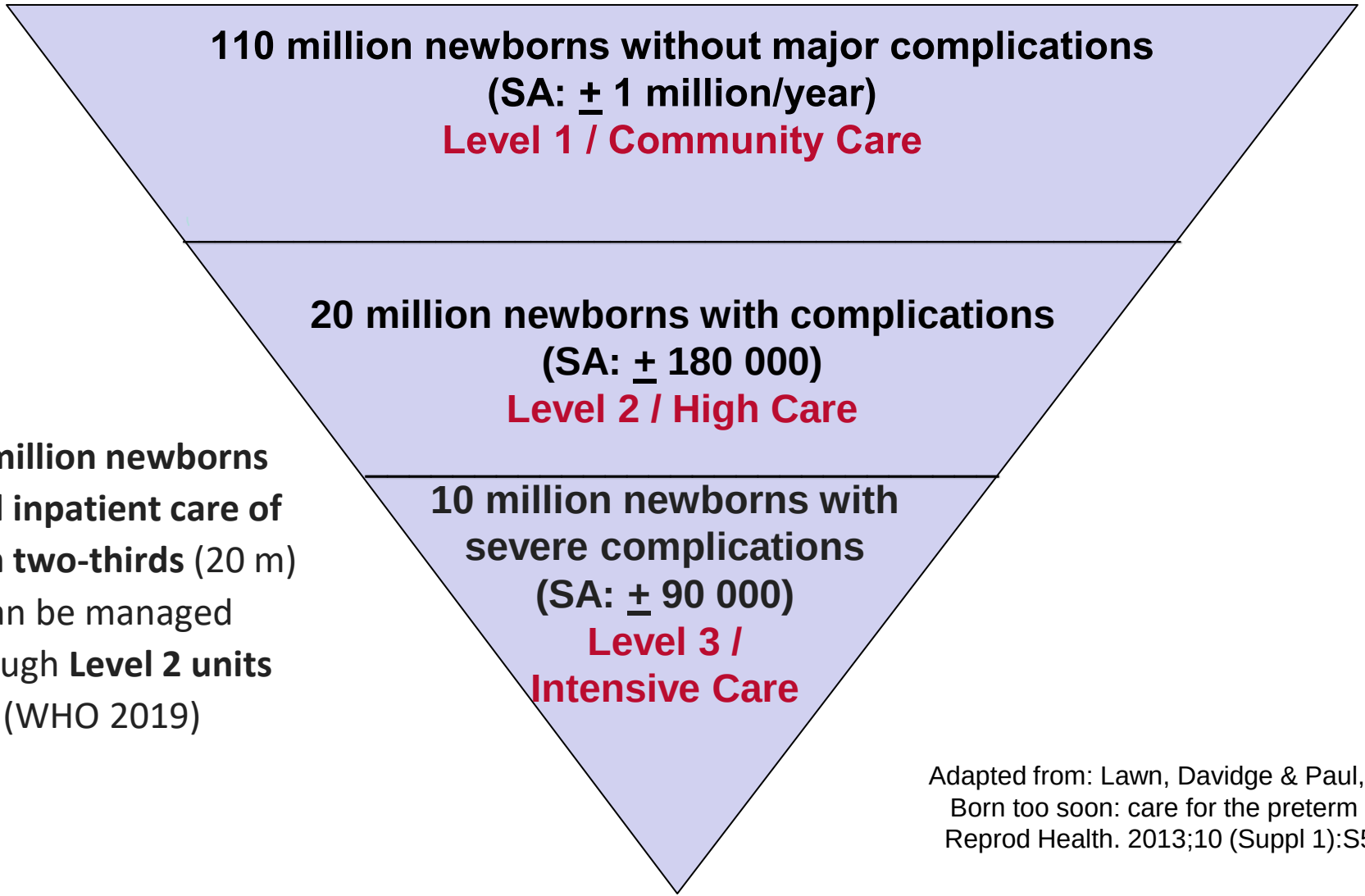
Background

Stillbirths and neonatal mortality rates are a global problem and a burden to our country:

- SDG target for neonatal mortality is < 12/1000 live births
- Neonatal mortality in South Africa is approximately 12/1000 live births (± 4/1000 = in first week of life)
- Perinatal mortality (26 weeks gestation until 1 week after birth) is increasing:
  - ± 30-33 % of deaths are stillbirths
  - ± 30-33 % of deaths occur on day of birth
  - ± 15-20 % of deaths occur on day two
  - ± 13-18 % of deaths occur on day three to seven

As we address mortality, the morbidity rises as those who survive often survive with special needs

Newborn Acuity



30 million newborns need inpatient care of which two-thirds (20 m) can be managed through **Level 2 units** (WHO 2019)

Adapted from: Lawn, Davidge & Paul, et al. Born too soon: care for the preterm baby. Reprod Health. 2013;10 (Suppl 1):S5–S5.

Neonates' characteristics

Neonates are not just tiny adults and preterm newborns are not just small neonates

- Vulnerable population at high risk of mortality and morbidity
- Adjust from intra-uterine to extra-uterine life to proof they can exist independently from the womb
- Immature immune systems, underdeveloped organ systems, and physical fragility
- Susceptible to infections, temperature regulation issues, and other health challenges
- Pharmacokinetics and pharmacodynamics differ significantly
- Congenital abnormalities might be life-threatening
- Crucial period for establishment of attachment and bonding (and therefor foundation for lifelong relationships)

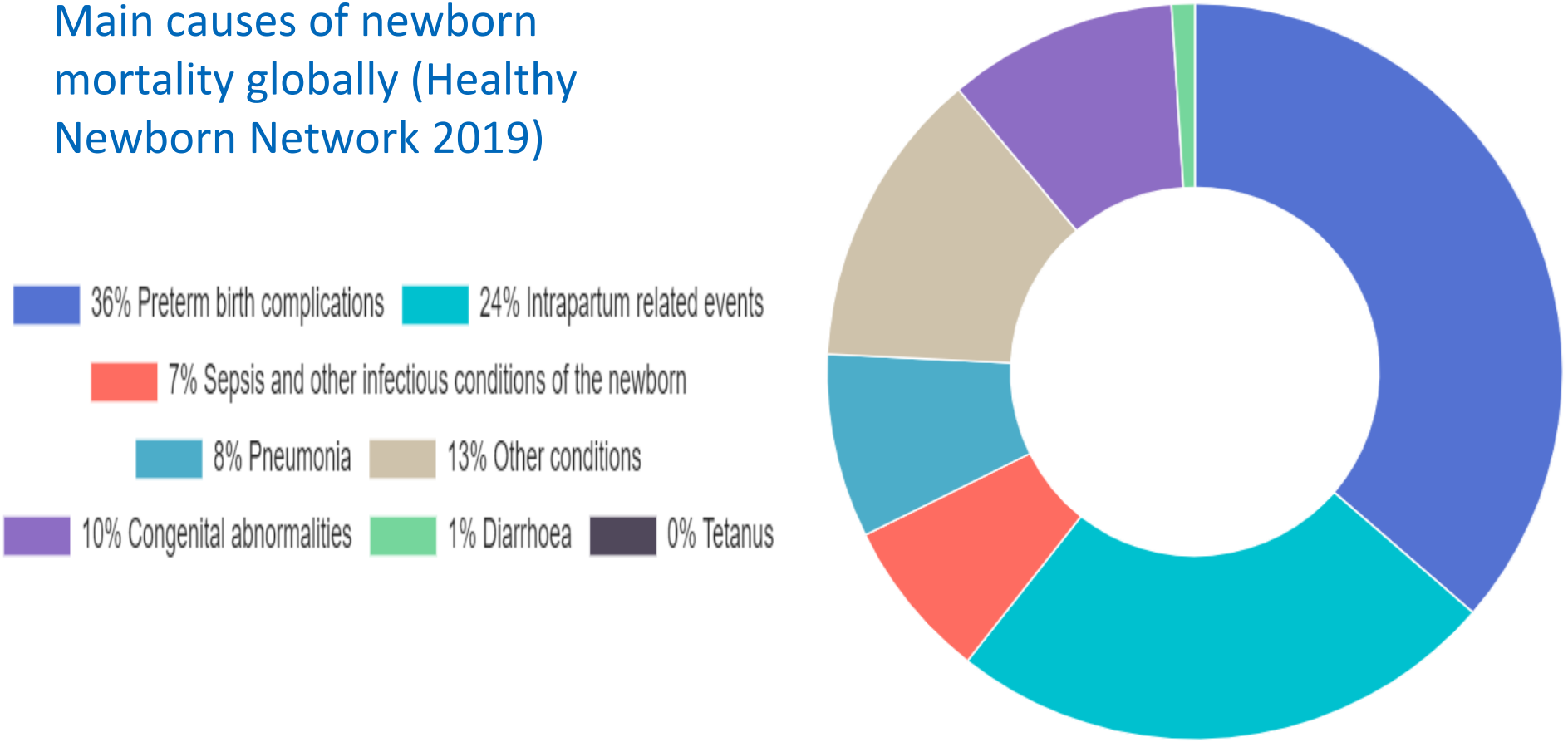
Preterm newborns' characteristics

Neonates are not just tiny adults and

preterm newborns are not just small neonates

- Small size & thin permeable skin
- Organs immature & different progress of disease
- Severely sensitive for touch and handling, positioning, environment (temperature, lights, noise), treatment (procedures, medication), chemicals, plasters, tubes, etc., etc.
- Very high risk for mortality
- If surviving, usually with morbidity

Main causes of newborn mortality globally (Healthy Newborn Network 2019)

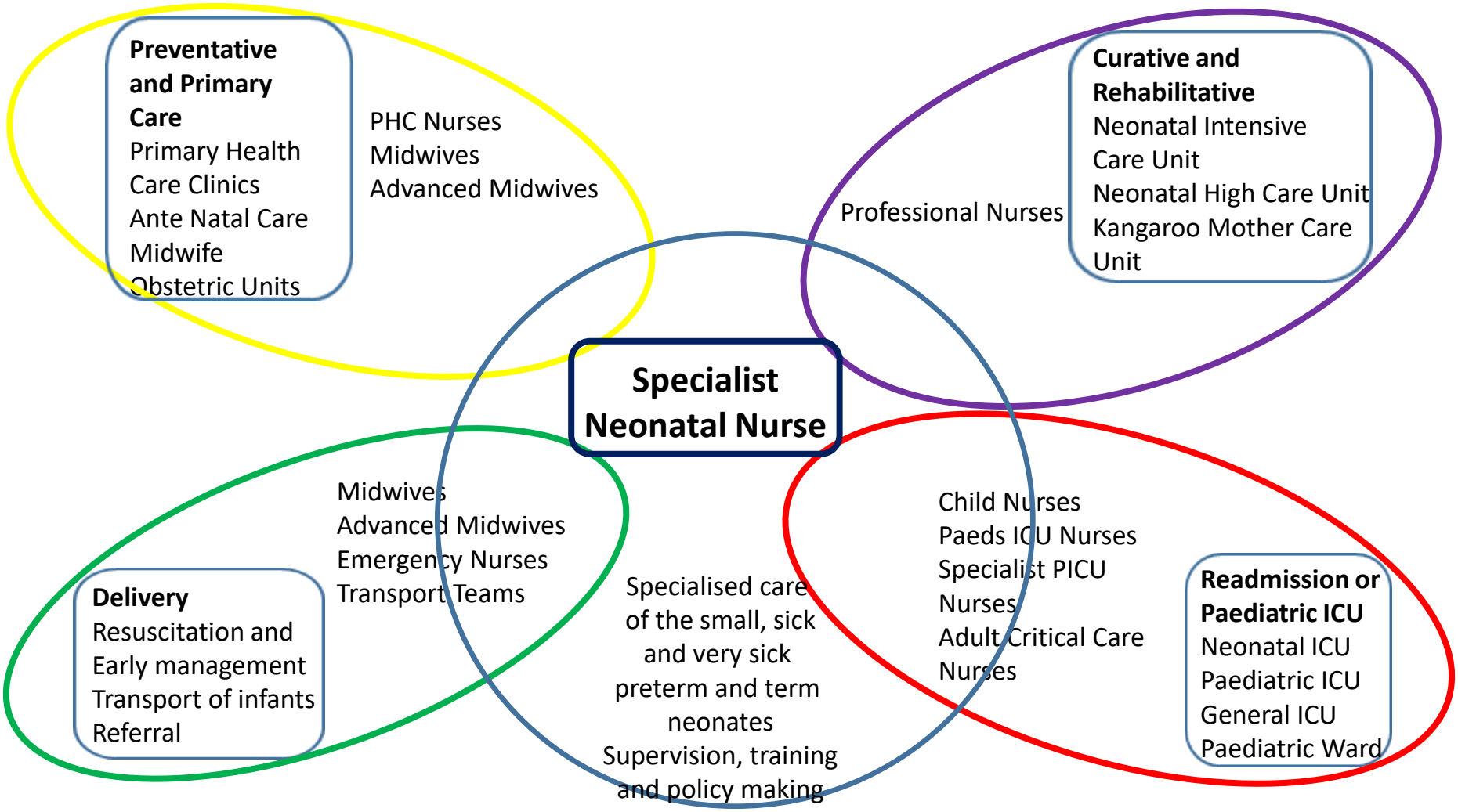


Many of the deaths are considered to be preventable, but a death that has been prevented might lead to a survivor with special needs

WHO Levels of Care and Interventions

Level 1 Immediate and Essential Newborn Care	Immediate newborn care (delayed cord clamping, drying, skin-to-skin, KMC, etc.) Neonatal resuscitation for those who need it Breastfeeding early initiation and support Essential newborn care identification and referral of complications Targeted care as needed, e.g. PMTCT of HIV
Level 2* Special Newborn Care & Transition **Each district hospital to have neonatal high care beds available*	Thermal care including KMC for all stable neonates <2000gms Assisted feeding and IV fluids Detection and management of neonatal sepsis with injection antibiotics Detection and management of neonatal jaundice with phototherapy Detection and management/referral of neonatal encephalopathy Detection and management/referral of congenital abnormalities Management of of preterm respiratory distress with CPAP / nasal cannulas Follow up of at-risk newborns
Level 3 Intensive Newborn Care	Mechanical/assisted ventilation Exchange transfusion Advanced feeding support (e.g. parenteral nutrition) Investigation and treatment for congenital conditions, including surgery (e.g. gastroschisis, hydrocephaly, meningocele, trachea-esophageal atresia, etc.) Management of complications (e.g. renal failure, hypoxic-ischaemic encephalopathy, kernicterus, retinopathy of prematurity, etc.) Management of moderate and severe prematurity

Nurses' Roles in Neonatal Care



Curriculum Composition of Postgraduate Diplomas (Clinical Nurse Specialisation)

Definition of a **Nurse Specialist**:

"This level requires in-depth knowledge and expertise in a specific practice area such as paediatric nursing. To become a nurse specialist would require a post-graduate diploma (PGD) in the specific specialisation. This qualification will yield a professional registration with the Council as a nurse specialist (e.g. nurse specialist: paediatric nursing)." (SANC Position Statement 2012)

PGDip Qualification Matrix:

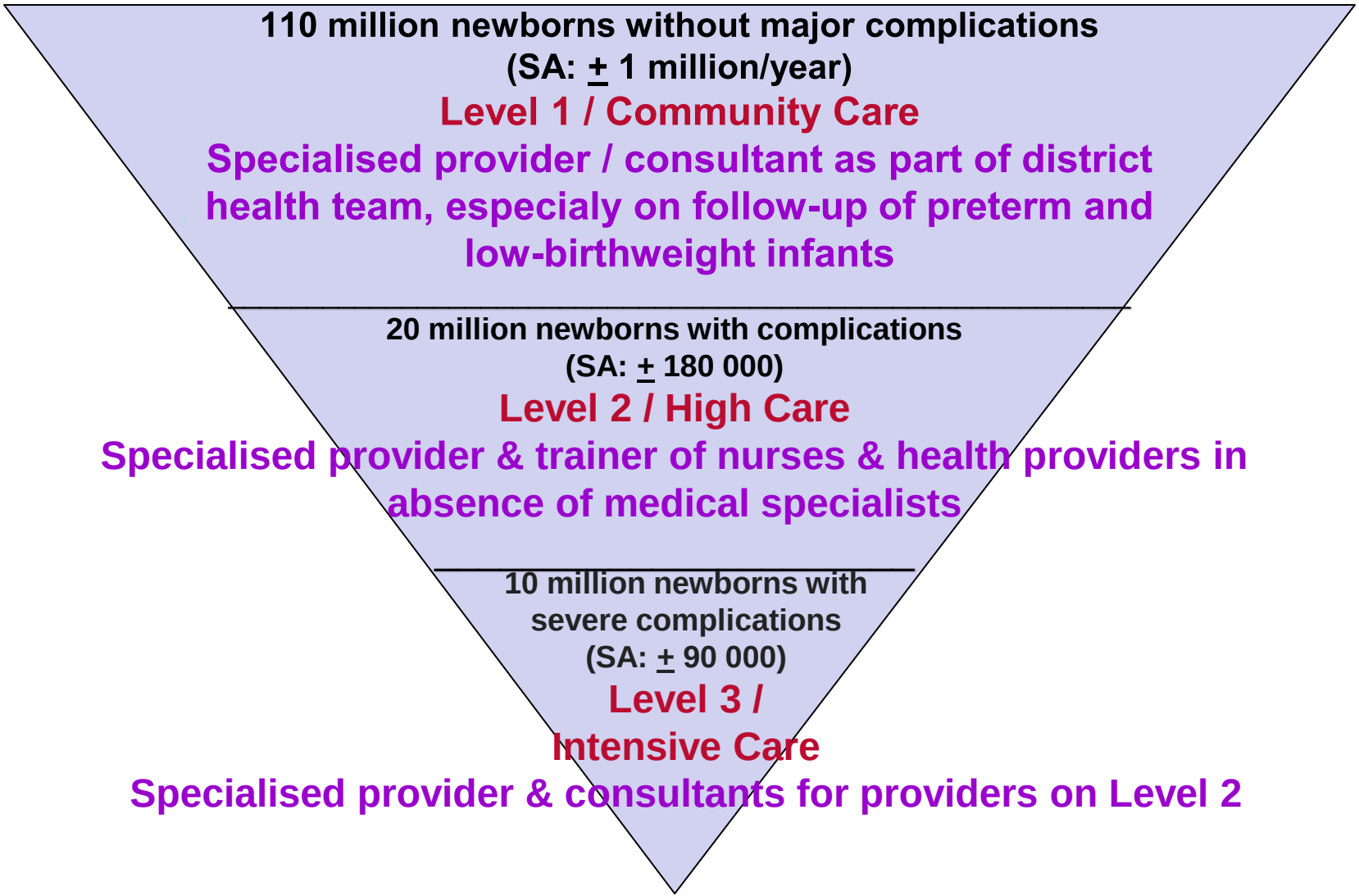
- PGD: 120 credits (1200 notional hours)
- Theory (40% = 48 credits) + Work-Integrated Learning (WIL) (60% = 72 credits)
- Core / generic content relevant to all PGDips: Theory (10 credits) + WIL (14 credits)
- Fundamental / specialisation-related content: Theory (38 credits) + WILL (58 credits)

(SANC Education and Training Guidelines for Postgraduate Diploma Programmes)

PGDip	Overlapping neonatal content (± 24 credits)	Unique content of speciality (± 72 credits)
Critical Care Nursing Specialist	*Commonly not including neonatal content* *Principles such as ventilation, etc. differ vastly from neonatal ventilation*	Nursing management of adult medical and surgical critical care patients
Midwifery Specialist	Immediate newborn care, breastfeeding, nasogastric feeding support and KMC Neonatal resuscitation and stabilisation Identification and management of common neonatal disorders (including infections treated with IV therapy, jaundice treated with phototherapy, respiratory distress treated with CPAP, common congenital abnormalities, stable very and late preterm infants) Identification and referral of severe neonatal disorders (see unique content of neonatal nursing specialists)	Pre-conception care, antenatal midwifery care, intrapartum midwifery care and postnatal midwifery care
Child Nursing Specialist		Identification and management of disorders related to infants, toddlers, pre-schoolers, primary schoolers, and adolescents
Emergency Nursing Specialist	Neonatal resuscitation Immediate essential newborn care	Emergency nursing pre-hospital, triage and management of patients with different levels of acuity in the emergency room
Neonatal Nursing Specialist	Same as midwifery and child nursing specialist	Identification and management of extremely preterm infants < 28 weeks, disorders needing surgery (exomphalos, trachea-esophageal atresia, hydrocephalus, NEC, etc.), hypoxic-ischaemic encephalopathy treated with therapeutic hypothermia, respiratory disorders treated with mechanical ventilation, oscillation or ECMO, advanced feeding support by parenteral infusion, kernicterus and exchange transfusion, metabolic disorders, severe congenital abnormalities, retinopathy of prematurity, renal failure and dialysis, sepsis, meningitis

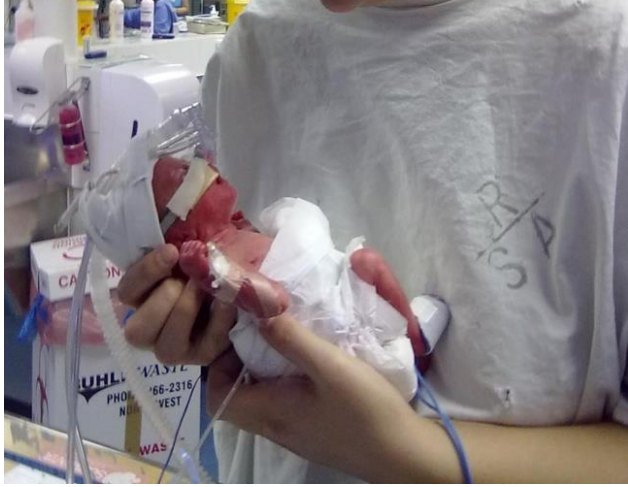
Roles of Neonatal Nurses

District health teams & district, regional and referral hospitals, NHI



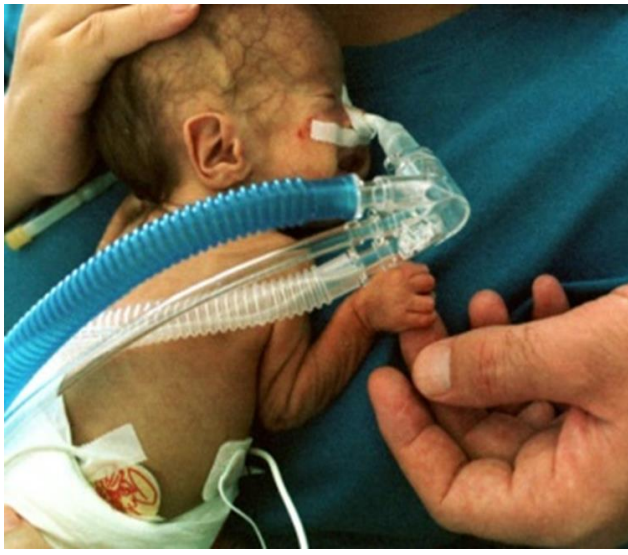
Neonatal nursing is complex and advanced beyond the scope of general nursing practice.

Advanced nursing skills and judgement are needed to care for the small, sick and very sick in resource-limited and technological advanced contexts



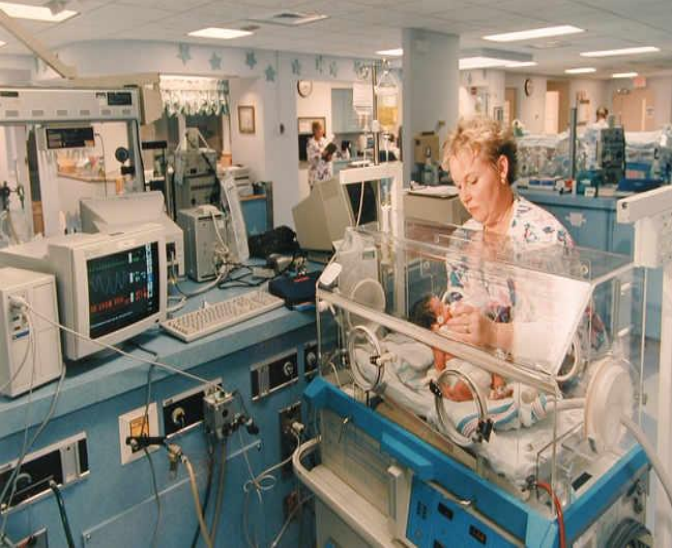
Updated and in-depth knowledge and skills are required regarding continuous technological & pharmacological advances

Caring neonatal nurses are needed to facilitate family involvement, bonding and attachment amidst intensive care of the vulnerable neonates

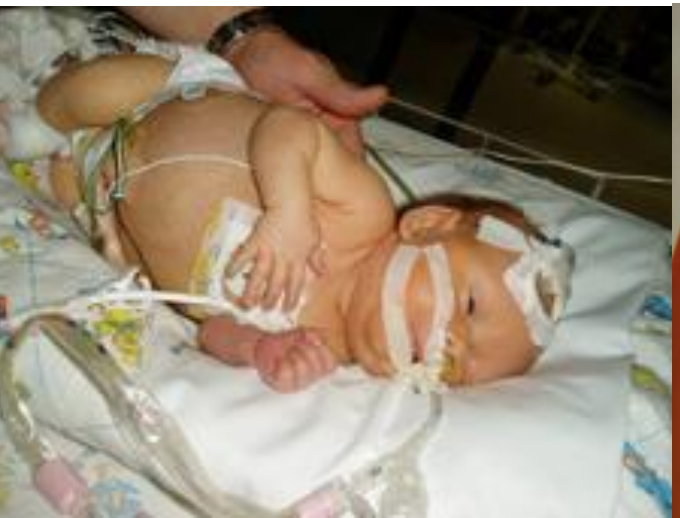


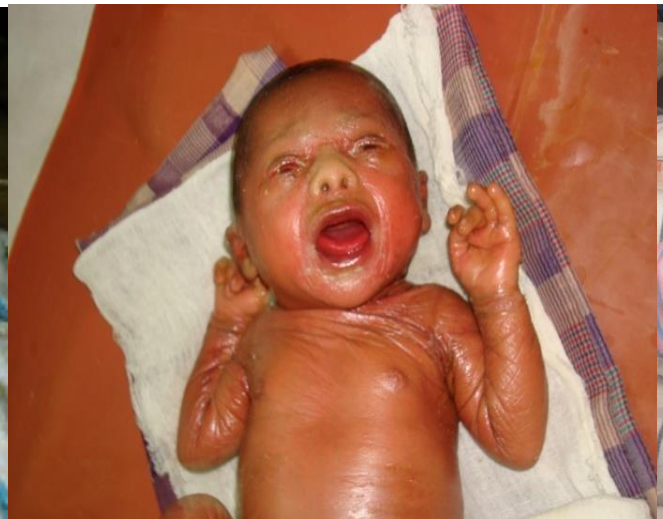
Recognition?

- Worldwide neonatal nursing is recognised as a priority area and a field of nursing specialisation
- International status: Council of International Neonatal Nurses (COINN)
- National: Neonatal Nurses Association of Southern Africa
- We are celebrating International Neonatal Nurses' Day today (15 August)



In conclusion:
professional licensing is justifiable





Any questions?

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