Clinical Psychologists, with specialist expertise in neonatology, are key providers of evidence-based psychological assessment and interventions for parents, infants and staff on neonatal units. They work as part of an MDT, provide consultation to medical teams on complex cases and supervise other professionals delivering psychological interventions for parents and providing staff support. They can provide assessment and intervention in three important areas within neonatal units:

1) Parental and Family Mental health

Admission to a Neonatal Unit (NNU) for any reason can have negative psychological consequences for the parents, the neonate, and the parent-baby relationship (Grunberg, 2018; Bry and Wigert, 2019). It is well documented that there are significantly higher rates of mental health difficulties (anxiety, depression and trauma) in parents who have infants in neonatal care when compared to the general perinatal population (Feeley et al., 2011; Lefkowitz et al., 2010). Moreover, the NNU environment itself (e.g. the risk of death or harm to their baby), receiving a diagnosis or witnessing treatments their baby has to undergo, can be traumatising (Obeidat, 2009).

Clinical Psychologists use a number of therapeutic models to support parents' mental health needs and to undertake peri-trauma work. Effective and timely specialist inpatient intervention results in a number of cost benefits including shorter length of stay and improved outcomes for parents and infants which are sustained over time (Cherry et al, 2016; Hannan & Bourque, 2020). They can provide additional follow-up care post discharge to assist in the transition home when often parents start to begin to psychologically process their baby's neonatal stay, diagnosis or developmental outcome. Clinical Psychologists assess risk and help to ensure clear pathways for mental health difficulties, provide highly specialist interventions according to NICE Guidelines and refer on to specialist perinatal mental health or other specialist services as needed.

In addition to mental health needs, Clinical Psychologists provide psychological interventions for a range of specific issues that arise on the neonatal unit such as coping with adjustment and loss (for individuals, couples and siblings), end of life work, complex decision making, consultation on child development, improving confidence in parenting and coping with the hospital environment. They also help the ward teams to manage complexity in parents and families, for example parents with complicated social, emotional and psychological histories and support teams with the management of risk. They work at an individual and system level to implement interventions for families and facilitate psychologically informed care within neonatal teams.

2) Infant Mental Health

Clinical Psychologists are trained in infant mental health and developmental psychology. This enables them to focus on the infant themselves and the processes of bonding between parents and their infant and the helping the development of attachment relationships between the infant and parent, in a hospital setting. Clinical Psychologists work with AHPs and the MDT on neonatal units to enhance these aspects of care through collaborative care planning and are also able to assess when additional intervention may be needed post-discharge (for example from Parent-Infant Mental Health Teams).

3) Staff Support and Training

Rates of burnout and trauma (both direct and vicarious trauma) are high in the neonatal workforce. Clinical Psychologists can play an important role in supporting and signposting staff to appropriate services as and when this is needed. They also provide consultation to and supervision of neonatal staff members working with complex or distressing clinical situations, can provide pre-case discussions and debriefs of difficult clinical situations, lead reflective practice sessions and provide bespoke teaching and training to the neonatal team.