General Competencies to Initiate NNNS-II Training with Infants

Infant Handling Experience is Necessary to Initiate NNNS-II Training with Infants

This is usually achieved by engaging in clinical practice as a neonatal nurse, occupational therapist, physical therapist, psychologist, or neonatologist for a minimum of several months. Others may achieve handling experience by functioning as a volunteer in the NICU, under mentoring experiences or internships/fellowships in the NICU, and/or through experience with caring for and actively engaging with young infants in other settings.

Ways to ensure you have achieved enough handling experience to maximize training on the NNNS:

- You can dress and undress a baby (put on a onesie or shirt, pants, socks) less than 2 weeks old efficiently without causing agitation
- You can independently change a diaper
- You can pick up a baby from a flat surface and hold him/her in your arms and at your shoulder while maintaining him/her in alignment (keeping neck in neutral alignment)
- You can safely and adequately position a baby in prone, supine, side-lying and sitting
- You can safely lay the infant in your lap while keeping a hand on baby at all times
- You can independently feed a baby while responding to infant cues
- You can demonstrate multiple strategies to calm a baby (using hands, swaddling, pacifier, rocking)
- You can securely swaddle and un-swaddle an infant
- You can read infant signs & cues and respond appropriately
- You can identify signs of infant compromise
- You can anticipate a baby’s next move
- You can demonstrate adequate communication with parents of young infants
- You can comfortably do this to an infant less than 2 weeks old in rapid succession, while paying attention to the infant’s signs of tolerance: unswaddle, move arms, move legs, pick up off the surface and hold over the bedspace, put the infant down and pull them into a sitting position, hold the infant in a sitting position, pick the infant up under arms holding them vertically and allowing weight bearing on lower extremities, hold infant in prone position over your hand suspended above the bed surface, put the infant down in a prone position, turn the infant over and then pick up and hold in arms, move the infant to a position on your shoulder, put the infant down on the surface in a supine position, rotate the infant’s head to one side and then the other.

Please see the next page

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For those who intend to do NNNS-II testing in the NICU

If testing is to be done on a NICU population, trainee must also demonstrate ability to:

- Identify common medical complications in NICU population and their impact on testing/therapy
- Identify common medical Interventions in NICU population and impact on testing/therapy
- Identify medical equipment commonly found in NICU environment and any precautions related to equipment
- Identify when testing is inappropriate
- Be able to adapt or stop testing procedures based on infant tolerance
- Describe typical development across postmenstrual age and understand how immaturity can impact testing
- Monitor physiologic change by observation and understand how physiology impacts testing
- Identify warning signs of infant compromise and respond appropriately
- Communicate effectively with the medical team to ensure adequate knowledge of an infant to determine if testing is appropriate, to ensure adequate maneuvering through NICU culture, and to enable access to the team when necessary