
Greater Manchester and Eastern Cheshire Newborn Infant Physical Examination (NIPE) Competencies

FINAL V1
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Document Control

Ownership

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Version control

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1. Purpose:

The NIPE examination within the first 72 hours of birth has in recent years become embedded within the role of the midwife, and an increasing number of midwives undertake this examination alongside other qualified Healthcare Professionals. The Heads of Midwifery in GMEC discussed the variation in qualification and ongoing competency and professional development across the region. It was agreed that the Local Maternity System (LMS) would produce a document that **outlines the requirements for midwives and student midwives** undertaking the NIPE in Greater Manchester & Eastern Cheshire.

2. Requirements:

All midwives carrying out NIPE examinations within the GMEC region will be NIPE qualified and have undertaken a recognised NIPE course that adheres to the following principles:

- The NIPE must be completed by midwives who have been appropriately trained in accordance with the guidance below.
- NIPE qualifications must be undertaken within a Higher Education institution (HEI)
- Ongoing professional development and competency must be undertaken in line with the guidance below.

3. NIPE training programme / qualification

Qualification to undertake NIPE requires the practitioner to undertake a full training programme within a HEI of their/their employer's choice.

The training programme should consist of the following:

Theoretical component/Assessment:

The midwife/student midwife will develop both the theoretical and practical skills of the NIPE screening programme within the context of the holistic assessment of the newborn and the theoretical assessment will include:

- A portfolio of evidence* containing a record of a minimum 20 NIPE summative clinical assessments/reflective accounts. This will assess the practitioner's theoretical knowledge and clinical competence – to be supervised and assessed by NIPE practitioners
- An assessment, the format of which is determined by the HEI and in accordance with the academic requirements of the programme, to assess the practitioner's theoretical/clinical knowledge and competence.

Clinical component/Summative Assessment:

The clinical assessment will include:

- Midwives/student midwives will gain experience / develop clinical skills in their allocated maternity ward/clinical placement.
- Assessment of competence must include the theory and clinical competencies of NIPE to ensure a standardised approach is adopted.

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- Demonstration and observation of NIPE including discussions of neonatal physiology / pathology, midwifery / neonatal care and medical management.
- Midwives/student midwives will undertake at least 20 summative NIPE examinations and be assessed as competent.
- NIPE assessment will be supervised by NIPE practitioners within the clinical area.
- Collation of a portfolio of evidence containing records of a minimum of 20 summative NIPE clinical assessments/reflective accounts that have been supervised and assessed by NIPE practitioners (*NB one portfolio only to be completed. Pre-registration students will have 2 portfolios – the MORA and the NIPE booklet. These may be linked on PARE).
- An assessment, the format of which is determined by the HEI and NMC in accordance with the academic requirements of the programme, to assess the practitioner's theoretical/clinical knowledge and competence.

GM Education Group have agreed that the clinical assessments required as part of the preparation for NIPE qualification can be assessed by any qualified NIPE practitioner. All student midwives commencing education in HEIs in GM from September 2022 will undertake both theoretical **AND** clinical components of the NIPE programme in pre-registration education. This will be followed by a preceptorship programme that will facilitate more protected time for the development of the newly qualified midwife's confidence and foster a successful transition period.

All HEIs affiliated with GM will incorporate both theoretical and clinical components into their undergraduate midwifery programme from September 2022 to meet the Future Midwife Standards (NMC 2019). Provider sites and HEIs agree to provide access for student midwives to undertake the clinical components and agree protected time and funding for newly qualified midwives to make the transition and for student midwives who require further support to progress.

4. Core competencies:

The NIPE practitioner must demonstrate the following competencies:

- Clear Knowledge of the National NIPE Screening Programme.
(Including the 4 main screening elements that are assessed: eyes, heart, hips and testes).
- Complete relevant maternal / neonatal histories and both maternal and neonatal risk factors.
- Determine the relationship between antenatal and intrapartum and subsequent events that may impact on the newborn's health status.
- Creates an environment for safe and effective examination that encourages parental participation and provides information and facts to aid decision making. The aim is to have at least one parent present during the examination, but this might not always be possible.
- Utilises a holistic, systematic approach, to comprehensively examine the newborn.
- Ability to assess and recognise any deviation in the newborn from the normal parameters.
- Effectively and sensitively records and communicates findings to parents and relevant professionals.

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- Confirm that NIPE examination is recorded as per NSC/PHE standards (electronic records and SMART4 NIPE system).
- Ability to escalate and refer concerns to the relevant multidisciplinary team.
- Clear knowledge of local pathways of referral e.g. timing of referrals, appropriate escalation of identified abnormalities or concerns as per NIPE standards.
- Integrates health promotion and education as part of the examination, promoting wellbeing of baby and family e.g. safe sleeping, smoke free home, signposting parents to appropriate government websites for advice regarding car seats, slings etc.
- After qualification, NIPE Practitioners must be compliant with level 3 Safeguarding Children training in line with national collegiate document and demonstrate clarity of Knowledge of local safeguarding pathways.
- Knowledge of maternal and infant attachment/promotion of infant mental health.
- Explains normal neonatal behaviour, and outlines opportunities to foster parent-infant relationship.
- Teaching parents the signs of an unwell baby and where to [get help/advice and contact details](#).
- Consideration of professional, legal and ethical considerations for midwives conducting the NIPE.
- Maintain the ability to supervise and assess other NIPE learners.

5. Continuous Professional Development:

Aim: To maintain and further develop professional knowledge and competence in conducting NIPE.

Continuous professional development is the responsibility of the individual midwife, supported by the employer. Continuous professional development should be achieved as per NIPE Handbook Clinical Guidance:

Maintaining individual practitioner competence

- Maintaining competence
- A local competency assessment should be used
- Focus should not be on a minimum number of screening examination but on the quality of the exam performed*
- Local mandatory assessment of clinical competencies for those who conduct the NIPE newborn and infant 6–8-week screening examinations should be undertaken
- An annual local update should be provided for those who undertake the NIPE screening examination (may include practical and theoretical assessment)
- Annual completion of NIPE e-learning module

*local providers may choose to determine and set minimum numbers of exams, but this is not a programme requirement

Source: eLH NIPE Unit 6: Further information for NIPE practitioners

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For Greater Manchester, this will be required for all those **midwives** who undertake NIPE screening within Greater Manchester.

GMEC Annual update - will consist of the following:

- **eLearning**
 - Annual successful completion of the e-Learning for Health Unit 6: Further information for NIPE practitioners (hours required for completion: 4.5hrs). Evidence will be requested to demonstrate completion.
- **Local annual competency assessment**
 - Discussion with assessor including:
 - Updated knowledge of current knowledge of NIPE systems and documentation changes.
 - Clear knowledge of the most recent PHE National Screening Committee NIPE screening programme standards.
 - Shared learning from untoward incidents/best practice.
 - Practical assessment with assessor including:
 - Observation of a NIPE examination by an experienced NIPE practitioner, e.g. member of a core NIPE team; the quality of the examination will determine the number of examinations observed.
 - Refer to PHE NIPE CPD document when assessing annual update.
- **Record keeping**
 - The Annual assessment will be aligned to individual practitioner appraisal records, confirming competence to practice.
 - A local register will be held of NIPE Practitioners who have attended annual update and have attained/maintained competency should be kept.
 - A record of clinically active practitioners will be included on an annual basis into the Training report submitted by each maternity provider to the GMEC LMS Maternity Programme Board.

All NIPE practitioners supported to undertake the course will commit to remaining clinically active as a NIPE practitioner and assessor.

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