Practice standards for the newborn and infant physical examination: a national survey

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The newborn and infant physical examination (NIPE) is performed on newborns prior to discharge from hospital and again on infants aged 6-8 weeks. Traditionally undertaken by doctors, the newborn examination is now included within the midwife’s sphere of practice, but is not yet part of pre-registration midwifery training in most UK universities. Standards for the NIPE are set by Public Health England (PHE). A nationwide survey was undertaken to determine compliance with PHE standards for the NIPE and to identify which professionals were performing this examination (1). In autumn 2014, an online questionnaire was sent to all the heads of midwifery in the UK, with a return rate of 64.3%.

Of those NHS Trusts which responded to the survey, 95% employed one or more midwives who were trained to perform the NIPE. However, only 13.7% of the midwifery workforce was NIPE trained, despite the findings of an earlier study that midwives as NIPE practitioners are cost-effective and highly valued by parents (2). Midwives were far more likely to undertake the NIPE in a midwifery-led unit than in a consultant-led unit, yet even in the latter, in some Trusts over 50% of NIPEs were undertaken by midwives. There was a consensus that the best time for the NIPE to be performed was within the first 72 hours of birth and all but one Trust achieved this. Nearly 80% of respondents rated the NIPE ‘good’ or ‘excellent’ as a screening method.

There was wide variation between Trusts in the use of ultrasound screening for developmental dysplasia of the hips (DDH) and in the use of pulse oximetry in screening for cardiac abnormalities, highlighting a need for clear guidance and standards. This also applied to the quality and consistency of advice and information that is given to parents.

Despite evidence for the cost-effectiveness and acceptability of midwives undertaking the NIPE, at present a high proportion of examinations are being carried out by a very small number of midwives. The low figure is a cause for concern.