



Evaluating the student experience of introducing newborn infant physical theory into a pre-registration midwifery programme in the UK

Dr. Luisa Cescutti-Butler PhD, PGDip, MA,
RM, RGN

Professor Susan Way

(sueway@Bournemouth.ac.uk)

Faculty of Health and Social Care

Department of Midwifery and Health Sciences





Bournemouth
University

Background 1

- Newborn Infant Physical Examination (NIPE) is undertaken within 72 hours of birth following the initial examination at birth
- Its aims are to detect less obvious adverse conditions or abnormalities and is essentially a screening programme to exclude congenital hip abnormalities, cardiac disorders, cataracts and undescended testes
- Recent UK maternity policy has set a direction to provide continuity of midwifery care to women accessing maternity services

Background 2

- One such area of practice that could arguably enhance continuity of care from the midwife is the NIPE
- Only 13% of practising midwives are qualified NIPE practitioners in England
- Systems/structures not in place to support UG student midwives
- Two models have been researched – we are reporting on one of them today

NIPE learning throughout the three-year UG curriculum

Year of study	Theoretical content	Recommended Practice Component	Undergraduate module
Year 1	NIPE screening standards/competencies ; Principles of a physical examination; Examination of the newborn eye	Checking newborn eye and red reflex x10	Health & Wellbeing Unit
Year 2	CVS & respiratory assessment; Examination head, neck & shoulders; examination of abdomen & genitalia; breaking bad news	Newborn eyes x5; Auscultate HR in 4 key areas for rate and rhythm x 10; Auscultate lungs for equal air entry x10; palpate testes	Clinical Practice 2 Unit
Year 3	Professional issues: importance of history gathering & professional accountability; Examination of newborn hips/femorals; Neurological examination	Newborn eyes x5; Auscultate HR in 4 key areas for rate and rhythm x 10; Auscultate lungs for equal air entry x10; palpate testes; examine hips for DDH	Clinical Practice 3 Unit

Aims and objectives

- To explore the experiences of student midwives in relation to the impact and effectiveness of introducing the theoretical elements of NIPE, into the undergraduate midwifery curriculum.
- The impact and effectiveness also extended to the students practising the skills in the clinical environment, if and when, the opportunity arose.
- A secondary objective was to understand how best to incorporate the study findings into developing the future curriculum



- All 3rd years invited through letter of invitation and Participation Information Sheet
- Response rate was enough for 2 focus groups which was facilitated by a research assistant
- Interview proforma that looked at three main areas (practical experience; theoretical content and what next)



Results : three broad themes

Timing of
theoretical
content



Applying
theory to
practice

Holistic
Care

Timing of theoretical input

Having it over the three years kept our interest up

In the second year or third year, in the first year it was so overwhelming



There is a lot of information to take on board, a lot of learning, if that was in one unit [module] it may be an intense unit to study all at once

Applying theory to practice

I'm not interested at all then if the support is not going to be there, then there is no point me doing it

A lot of students wanted to focus on the immediate skills they would need to pass the module and become safe, confident practitioners

Love having the underpinning knowledge ... I wouldn't be confident in using the practical skills but I still have the knowledge which I use

Started out feeling it wasn't a priority... can now see how important the teaching has been across all aspects of practice

Holistic care

The few midwife checks I have seen, have been holistic and women-centred... effective communication, universal skills which carry across their [the midwife's] entire practice

They [paediatricians] tend to not even notice that they're [the women] are there. I think it [the midwife] that's a much better experience for the woman, it's holistic care, whereas paed's don't give that



Seeing paediatricians doing EXON they often don't provide time for questions or explanations...they are not as thorough as midwives



Discussion

- Spiral curriculum and the benefits of revisiting knowledge
- Enjoyed the theoretical knowledge even if not directly using the skills
- Structured reflection and in-class reflection
- Creative solutions required:
 1. Student-led or midwife-paediatrician-led clinics
 2. Simulation within clinical skills laboratories

Conclusion

- The outcomes of this study have helped in the development of the most recent curriculum review where the full NIPE requirements of the knowledge, skills and competencies are to be incorporated into the undergraduate programme.
- It is thought that this development is timely due to the current work being undertaken by the Nursing and Midwifery Council in reviewing the pre-registration midwifery education standards and the emphasis on continuity of carer, which can be enhanced by the midwife completing the newborn examination



lcbutler@bournemouth.ac.uk