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Addysg a Gwella Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Newborn and Infant Physical Examination Cymru

annual learning framework guidance



1. Introduction

This guidance has been produced to support NIPEC practitioners undertaking the NIPEC newborn examination, to record and maintain their knowledge, understanding and skills in NIPEC examination.

NIPEC screening practitioners should complete the annual learning framework to:

- ❏ demonstrate evidence of lifelong learning and continuing professional development
- ❏ keep up to date with national NIPEC standards, clinical guidance, and changes
- ❏ enable local providers to demonstrate quality assurance in the NIPEC examinations completed locally
- ❏ promote consistency in practice across all disciplines (medical, midwifery and nursing)

The annual learning framework is intended to be used by qualified NIPEC practitioners as defined in section 12 of the NIPEC Handbook and a nominated confirmer. It is recommended that the NIPEC confirmer is a NIPEC practitioner. The framework may also be used by NIPEC practitioners in primary care undertaking the NIPEC **infant examination**.

Further information on the requirements and expectations of each of these roles is provided in the 'requirements and expectations' section of this guidance.

2. Recommendations

The following 3 elements of the framework are recommended to be completed annually:

- ❏ NIPEC e-learning module (heiw.nhs.wales/our-work/the-newborn-and-infant-physical-examination-cymru-nipec)
- ❏ discussion of national standards, clinical pathways, training, and education resources
- ❏ attendance at a local or national NIPEC update session

The following elements are recommended. However, the requirement to complete these, or the frequency of completion, can be determined by local agreement:

- ❏ NIPEC working in partnership: visits to specialist clinics or multidisciplinary discussions or meetings
- ❏ NIPEC reflection: reflective discussion or personal reflective account

Components of the framework can be completed throughout the year as opportunities arise. However, a final sign off should be arranged to review the evidence within the framework and acknowledge that local requirements have been met.

3. Requirements and expectations

This section sets out the requirements and expectations for qualified NIPEC practitioners and confirmers.

3.1 NIPEC practitioner requirements

The NIPEC practitioner must:

- ✦ hold a professional qualification (General Medical Council (GMC) or Nursing and Midwifery Council (NMC) registered, or a Physician Associate)
- ✦ be a fully qualified and practicing NIPEC practitioner as defined in section 12 of the NIPEC Handbook

3.2 NIPEC screening practitioner expectations

The NIPEC practitioner must meet the following expectations.

Professional responsibility

NIPEC practitioners have a professional responsibility to keep up to date and maintain their skills in relation to the NIPEC newborn screening examination. This includes engaging in continuous professional development.

3.3 Confirmer requirements

The nominated confirmer must hold a professional qualification (GMC or NMC registered, or a Physician Associate)

3.4 Confirmer expectations

The nominated confirmer must meet the following expectations.

Impartiality

Confirmers must offer impartiality when completing the framework, avoiding any conflicts of interest.

Equality

Confirmers must approach the completion of the framework without regard to the race, religion, nationality, gender, or seniority of the NIPEC practitioner.

Confidentiality

Confirmers must maintain confidentiality and refrain from sharing information with anyone not involved in the learning framework. Local pathways should be in place for escalation of any concerns regarding the practice of the NIPEC practitioner.

Approach

Confirmers must remain constructive and supportive throughout the process of completing the framework.

4. Annual learning framework components

4.1 NIPEC e-learning module (recommended annually)

The NHS Wales NIPEC module is aimed at health care professionals who undertake NIPEC examination in the NHS in Wales and have qualified as a NIPEC practitioner.

It covers the 4 screening elements of the physical examination:

- 📌 eyes
- 📌 heart
- 📌 hips
- 📌 testes (males)

Completion of the e-learning module should be annual.

As a useful addition to formal training, the module uses animation to illustrate good clinical practice.

Insert instructions on how to access the module

4.2 National standards, clinical pathways, training, and education resources (recommended annually)

The checklist provided within the framework can be used to ensure that the NIPEC practitioner has good working knowledge of the wider NIPEC examination including:

- 📌 NIPEC standards, pathways and guidance including those for eye, heart, hips, and testes (heiw.nhs.wales/our-work/the-newborn-and-infant-physical-examination-cymru-nipec)
- 📌 referral pathways (local)
- 📌 the NIPEC handbook (heiw.nhs.wales/our-work/the-newborn-and-infant-physical-examination-cymru-nipec)
- 📌 Every Child Counts 'Your Pregnancy and Birth'
[Every Child Your Pregnancy & Birth \(pagesuite-professional.co.uk\)](http://pagesuite-professional.co.uk)

4.3 Attendance at local or national NIPEC update session (recommended annually)

This section of the framework should be used to record attendance at a local NIPEC update session, which is recommended annually in the NIPEC Handbook.

It can also be used to record other NIPEC-related study days or self-directed learning as evidence of continuing professional development. Examples of what could be documented include:

- 📌 attendance at local/national NIPEC annual updates (recommended annually)
- 📌 attendance at local, regional, or national meetings in relation to the NIPEC examination
- 📌 self-directed research or reading in relation to NIPEC
- 📌 participation in NIPEC audit – including local audits

4.4 NIPEC working in partnership: visits to specialist clinics or multidisciplinary discussions or meetings (recommended)

Safe and efficient referral pathways into local specialist care following abnormality suspected findings are essential to NIPEC.

Successful pathways depend on effective multidisciplinary working and effective inter-departmental communication. This section of the framework can be used to support local relationships and to help NIPEC practitioners develop a wider overview beyond the examination itself.

The NIPEC practitioner can document:

- ✦ visits to specialist clinics in relation to the NIPEC examination including hip ultrasound, paediatric cardiology clinic, paediatric ophthalmology clinic and neonatal consultant follow-up clinics
- ✦ involvement in multidisciplinary discussions or meetings in relation to findings from the NIPEC examination

4.5 NIPEC reflection: reflective discussion or personal reflective account (recommended)

The NIPEC annual learning framework provides an opportunity for NIPEC practitioners to complete an annual reflection in relation to a NIPEC examination they have completed.

The NMC, the GMC and the Royal College of Paediatrics and Child Health (RCPCH) recognise the importance of reflective practice in identifying gaps in knowledge or skills and preventing similar issues or incidents from happening again.

Themes from the NMC documents have been used in the reflection section of the framework, including:

- ✦ describing the event
- ✦ identifying what the practitioner would change or improve next time
- ✦ identifying learning points from the experience

An opportunity for the NIPEC practitioner to recognise what they have done well is also included, as this can be an important step in identifying and embedding good practice. This may be a result of personal reflection or based on feedback from other people (for example, a peer reviewer highlighting good practice).

5. Annual final sign-off

The annual final sign-off should be used as an opportunity for the NIPEC practitioner and confirmer to review the evidence within the framework and acknowledge that the annual recommendations, plus any local requirements, have been met.

Any matters which are unresolved or require further escalation should be dealt with locally as agreed by the organisation.

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