Organisation of Midwifery Education in the UK

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Registered Nurse
Registered Midwife
Registered Health Visitor
Registered Nurse Teacher
Nurse Prescriber
Specialist Nurse in Sexual Reproductive Health
MSc – Behavioural Health: Preconception care
PhD – Preconception Care in Women with Diabetes

Clinical work

Midwife: Frimley Health NHS Foundation Trust Surrey
Specialist Nurse Sexual Reproductive Health: Margaret Pyke Centre – London
A bit of history!

- **1906** Registration of Births compulsory
- **1927** 75% of births at home
- **1934** The title *State Certified Midwife* allowed by Central Midwives Board
- **1938** Midwifery Training - 12 months
- **1946** National Health Service Act
- **1970** Peel Report - 100% Hospital Births recommended

1980’s

- Technological intervention
  - Epidural anaesthesia,
  - CTG monitoring
  - Induction of labour
  - Scientific midwifery
- Midwifery skills for normal birth ‘devalued’
- Independent midwives offered alternative
- First Direct Entry for Midwifery
- Women’s objection to ‘new obstetrics’

The Nurses, Midwives and Health Visitors Act 1979 (amended 1992 and 1997) led to formation of UKCC in 1983 which took over the professional regulation of Nurses, Midwives and Health Visitors

Principles – protection of the public and the government of the three professions by the three professions
1990s

• Start in the decline in rates of induction – women’s voices – choice

• Winterton report – women wanted choice, control and continuity in childbirth leading to Changing Childbirth (DH 1993)

• Emphasis on women centred care – with the midwife as lead carer in normal midwifery care

2004 - 2008

• 2004 – National Service Framework – a focus on women and family centred maternity care

• Maternity Matters (DH 2007) – Choice, and continuity of care in a safe service

• Safer Childbirth (RCM, RCOG 2007) – minimum standards for the organisation and delivery of care in labour

• Towards better births (Health Care Commission 2008) – A review of the maternity services in England

2008 - Today

2013 Maternity Services in England National Audit Office

2014 Five Year Forward – Modern Maternity Services Department of Health


2015 National Maternity Review NHS England - Ongoing

Increase in applications
Introducing the revised NMC Code

New professional standards of practice and behaviour for nurses and midwives

Effective from 31 March 2015

NMC Role in Education

• Set education standards, and competences.
• Approve education institutions
• Deliver quality assurance of approved programmes
• Register nurses and midwives when they have successfully completed their courses.
• Assess and ensure the quality of practice placements for students.
### Lead Midwife for Education

Each University has Lead Midwife for Education – a Registered Midwife and expert in education.

- Quality
- Collaborates with maternity services, service users and user groups
- Strategic and operational input in University and NHS Trusts
- LME signs off the good health & character for all midwifery applications to the NMC register.

### Teachers and Lecturers

Midwife teachers are Registered Midwives with Postgraduate Teaching Degree recorded by NMC register

- One midwife teacher for every ten midwifery students
- Lecturers teach but also do research
- Teaching fellows mainly teach

### BSc (Hons) Midwifery Degree

3 year Full Time Programme  EU regulations - at least 156 weeks full time study

- Entry requirement = 3 'A' levels  Science + Maths & English GCSE

Students are awarded both an academic and a professional qualification

Midwifery short programme for Registered Nurses - 78 weeks full-time

Supervised midwifery practice is 50% of the programme and takes place in both community and hospital, including antenatal clinics and wards, labour wards, postnatal wards and neonatal care.

### University Courses

- 52 Universities offer Midwifery BSc (Hons) courses in UK

- Number of places are decided by commissioning from local NHS area. Usually about 50 – 70 students per year.

- Direct Entry 3 year Programme or 78 week Programme if already a Registered Nurse.
NMC standards for pre-registration midwifery education (NMC 2009)
Midwives Rules and Standards (NMC 2004)
UNICEF Baby Friendly Initiative

Clinical Placements

50% Theory
50% Practice

Simulation suites
NHS Trusts

Clinical Mentorship

Registered Midwife who has undergone a 'Mentorship programme'.

Responsible for ‘sign off’ of student clinical practice.

Lecturers also visit to discuss progress in practice.
The Directive 2005/36/EC of the European Parliament and of the Council (NMC 2009) states that the practical and clinical training of a midwife must include:

- at least 100 prenatal examinations
- supervision and care of at least 40 women in labour
- personally carrying out at least 40 deliveries (active or if necessary, simulated) participation in breech deliveries
- performance of episiotomy and initiation into suturing
- supervision and care of 40 women at risk in pregnancy, labour or postnatal period
- supervision and care (including examination) of at least 100 postnatal women and healthy new-born babies
- observation and care of new-born requiring special care
- care of women with pathological conditions in the fields of gynaecology and obstetrics
- initiation into care in the field of medicine and surgery
- provide family planning advice
- diagnose pregnancy & monitor normal pregnancy and carry out antenatal examinations
- recognise and refer pregnancies at risk
- provide parent education including advice on hygiene and nutrition
- care for mother during labour and monitor the fetus
- conduct spontaneous vaginal deliveries, including episiotomy if required, and in emergency a breech delivery
- recognise warning signs of abnormality in mother or infant, refer to doctor and assist where appropriate, undertake emergency measures where necessary
- examine and care for the newborn infant, including resuscitation if required
- care for mother in the postnatal period and give advice on infant care
- carry out prescribed treatment
- maintain necessary records

https://www.youtube.com/watch?v=cXEzf3AMsCE

**Summative Assessment Year 1**
- **OSCE**
- Written essay
  - Word limit 2000 words
- **Exam**: Multiple choice questions
- Short answer paper
- Poster presentation accompanied by written account of 500 words
- **Essay**
  - Discussing an aspect of midwifery care
  - Word limit 2000 words

**Year 1 practice portfolio demonstrating achievement of proficiencies**
- Graded competencies
- Postnatal OSCE
- Medicines management exam

**Year 2**
- **Exam**: Computer based exam on case scenario
  - Multiple choice & short answer questions
  - E:portfolio of evidence
    - Equivalent to 2000 words
  - Essay
    - Based on a case study
    - Word limit: 2000 words

**Elective Practice /Project**
- 4-6 weeks alternative placement
- Work abroad
- Alternative parts of the country
- Research projects
Prescribing Medicines

UK has Midwives Exemptions that midwives can administer.

Student midwives can also administer except for controlled drugs.

Midwives and Nurses can become Non-medical Prescribers 6 month University course

INTRANOUS THERAPY - Students undertaking a professional preparation programme are not allowed under any circumstances to:

- check or administer any Intravenous Drugs (Bolus or Infusion)
- check or add any additives into Intravenous Bags of Fluid
- check units of blood or blood products for transfusion, except for the purposes of collection of blood from a blood bank when under the direct supervision of a registered practitioner, who has completed the relevant test of competency
- start a blood transfusion
- take blood via arterial lines
- set up and change syringe drivers and pumps
- change the rate of flow through an infusion pump (except when following the Trust Policy for the administration of Synthocinon in labour under mentor guidance)

Students can perform the following under direct supervision of a registered practitioner:

- Prime IV giving set with clear fluid with no additives
- connect primed IV giving set (with no additives) to a cannula only
- turn on a primed IV giving set
- care of the venous access device site
- change a bag of clear IV fluid without additives or where the only additive is Synthocinon, which has been checked by two midwives
- adjust drip rate of an infusion without pump
- monitor a patient undergoing blood transfusion (from Year 2 of the programme under the direct supervision of a registered practitioner who has completed the relevant test of competency)

Revalidation

Changes October 8th 2015

The Prep (practice) standard states that:
you must have practised in some capacity by virtue of your nursing or midwifery qualification for at least 450 hours during the three years prior to the renewal of your registration

The Prep (Continuing Professional Development) standard states that:
you must undertake at least 35 hours of learning activities during the three years prior to your renewal of registration and these learning activities must be relevant to your practice and you must document the way that these learning activities have informed and influenced your practice.

Portfolio
Post Registration Study

MSc Courses – vary some midwifery specific

Advanced Practice – Consultant Midwife usually need MSc or PhD

Specialist Practice – Diabetes Midwives, Weight Management midwives, Neonatal specialist, Practice Development midwife

PhD programmes – integrate with other health care students

References

Standards for pre-registration midwifery education NMC 2009 [www.nmc-uk.org](http://www.nmc-uk.org)


Thank you