



**NHS Tayside Local Supervising Authority Annual
Report to the Midwifery Committee of the
Nursing and Midwifery Council**

1st April 2005 – 31st March 2006

September 2006

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INTRODUCTION TO REPORT

The Local Supervising Authority (NHS Tayside) and Tayside Supervisors of Midwives have prepared this Annual Report. It has been produced to meet Rule 16 of the Midwives Rules and Standards, Nursing and Midwifery Council (NMC) 2004 and NMC Circular 15/2006. A copy has been submitted to the Nursing and Midwifery Council.

“The Nursing and Midwifery Order (statutory instruction 2002/253) requires the NMC to set rules and standards for midwifery and the Local Supervising Authorities responsible for the function of statutory supervision of midwives.”

“Each year every Local Supervising Authority shall submit a written report to the Council by such date and containing such information as the council may specify.” Rule 16

Ref – Nursing and Midwifery Council Midwives rules and standards (2004)

As the NHS Tayside LSAMO retired in April 2006, this report has been compiled using information from her papers by the Acting LSAMO.

FOREWARD

SUPERVISION OF MIDWIFERY PRACTICE – TAYSIDE

Supervisors of midwives have a statutory responsibility to ensure all practitioners are competent to practice and deliver safe midwifery care. They offer support and guidance to each midwife on behalf of the Local Supervising Authority – NHS Tayside.

The central aim of Supervision of midwifery practice is to protect the public by providing quality care for the childbearing woman and her family. Safety of the mother and baby is paramount in all maternity services throughout NHS Tayside. Supervisors of midwives across NHS Tayside believe this aim is reflected in the following philosophy of care:

TAYSIDE PHILOSOPHY OF MIDWIFERY PRACTICE

- Midwifery services in NHS Tayside will offer each woman an informed choice in maternity care, designed in collaboration with each woman and her family.
- All maternity care offered will seek to achieve a degree of continuity for the women building a professional relationship throughout the pregnancy care episode.
- Midwives across Tayside will work as partners within multidisciplinary teams to provide seamless maternity care programmes.
- Our midwifery care focuses on the preparation of the woman and her family unit friends/partner(s) in helping to prepare them to be confident and competent to care for the new baby.
- Women will be offered time to share with the midwife their individual needs. Listening to the needs of women, care can then be planned within the available resources.
- Care will be offered in a compassionate and sensitive manner with respect to the cultural and spiritual needs of women. All care will seek to maintain privacy and dignity at all times.
- Midwives, in line with national professional regulations, will seek to update and continuously improve their practice for the benefit of the women they care for.

1. Each local supervising authority will ensure their report is made available to the public

The LSA Annual Report has, in the past, been made available to the Maternity Services Liaison Committees in NHS Tayside. That has resulted in dialogue between MSLC members and midwifery staff around the content of the report.

During the last year or so, the Women and Reproductive Health Team web-page of the NHS Tayside website has been increasingly populated with information for staff. On completion of the 2006 LSA Annual Report, it will be added to the public part of the website.

Women who use the maternity service in Tayside will be directed to this site by means of the information booklet “Pregnancy, Birth and Your Early Pregnancy Days” provided to each of them at booking. The revised version includes contact details, by means of which women can access a Supervisor of Midwives and/or a copy of the NHS Tayside Annual Report.

2. Supervisor of Midwives Appointments, resignations and removals

In the year 2005/06 2 Supervisor of Midwives retired and there were 2 new appointees. This compares to 2 retirees and 4 new appointments in 2004/05.

No supervisors of midwives were removed. All Supervisor of Midwives have a ratio of 1:15 midwives or less.

<i>Name</i>	<i>Number of Midwives</i>
Alison Wright	15
Anne Reilly	13
Brenda Hinshaw	15
Carol Powrie	15
Carol Sutherland	14
Cathy MacDonald	10
Chrissie Hastings	14
Clare Winter	11
Diane Locherty	14
Fiona Carle	15
Fiona Greig	15
Gill Allan	15
Harriet Denny	11
Jean Trezise	15
Kay Forsyth	15
Linda Gierasik	13
Mary Meldrum	14
Myra Fraser	15

Phyllis Winters	15
Sandra Coupar	15
Sheona Chisholm	14
Vanessa Shand	14
Total Supervisors – 22	Total Midwives - 306

3. How are midwives provided with continuous access to a Supervisor of Midwives?

Across Tayside local arrangements are in place to ensure each midwife has direct access to a Supervisor of Midwives. Details of how to contact a Supervisor of Midwives is contained within the leaflet "Supervision of Midwifery, Information for Midwives Practising in Tayside – May 2006" (Appendix 1)

All midwives, on appointment to their post, are given a named Supervisor of Midwives. If they wish to choose another Supervisor of Midwives, they do so by approaching this Supervisor of Midwives. Problems can occur if the Supervisor of Midwives already has his/her quota, ie a ration of 1:15 – Standard *The ratio of Supervisor of Midwives to midwives will normally be 1:15*. However, these issues have always been resolved by discussion between midwives and Supervisor of Midwives.

This above system has never been evaluated.

At present work is ongoing to establish a formal rota of availability of Supervisor of Midwives 24 hrs a day, 7 days a week. The present system involves an ad hoc arrangement where one of the senior midwives, who is a Supervisor of Midwives, being phoned out of hours if there is no Supervisor of Midwives on duty. In practice, Supervisor of Midwives are contacted on very few occasions out of hours. The means of contact is via the Midwifery Co-ordinator.

4. How is practice of midwives supervised?

Standard – The ratio of midwives to supervisors will not normally exceed 1:15.

During this period, those Supervisors of Midwives who have had more than 15 supervisees have been asked to comply with the above standard. This has been achieved with discussions and negotiations taking place between the two parties. Letters were then sent out to all supervisees informing them of their supervisor.

In order to maintain this ratio all new midwives working in NHS Tayside are informed by letter of their supervisor. The letter also indicates that requests to be allocated to a specific supervisor may not always be possible due to the need to meet this standard.

Each Supervisor aims to meet with their supervisee on commencement of employment and at least once a year. The supervisory interview allows midwives to consider their clinical competence and development needs. The midwife may use her/his professional portfolio as a resource for this requirement. However Supervisors have had discussions in respect of how practice can be supervised. The outcome is to introduce the use of case notes during the supervisory interview. The supervisee will be asked to bring along a set of case notes for a woman that she has provided care for. The supervisee can then demonstrate through discussion how care was provided.

A proforma for guiding and recording the content of the discussion between midwife and SoM is in established use, the original held by the SoM and a copy provided to the midwife.

During this period 1 midwife who practised in NHS Tayside was reported to the LSAMO as there were concerns relating to ill health. This case has been formally reported to the NMC. As previously reported in the 2004/2005 annual report, the case of a midwife who practised in NHS Tayside was heard by the NMC and she was removed from the register. The two reported cases did not relate to direct client care.

No midwife has undergone supervised practice during this period.

5. Service user involvement in monitoring supervision of midwives and assisting the LSAMO with the annual audits

Tayside has active Maternity Services Liaison Committees in 2 of its 3 geographical areas and the service user members have, over the years, contributed a great deal of time, enthusiasm and energy to help in the gathering of the patient and public perspective of maternity services.

In 2005/06 an extensive audit of NHS Tayside maternity services was undertaken. It had major input from service users and the public with focus group interviews being held across the region.

While not specifically auditing supervision of midwives, Supervisor of Midwives were very much involved in this audit.

Supervisor of Midwives have concentrated this year on undertaking audit of documentation of antenatal, intrapartum and postnatal care, with a total of 205 records being reviewed. Service user involvement was not sought for this audit.

Supervisor of Midwives continue to explore means of raising the profile of midwifery supervision in Tayside and recently sought the opinion of one Maternity Services Liaison Committees regarding having an open day, when women could come along and chat to Supervisor of Midwives informally. The feedback at that time was that it was probably best to start by raising the profile of supervision by providing written information in the first instance.

6. Engagement with higher education institutions in relation to midwifery education programmes

In NHS Tayside the LSAMO has regular meetings with the Lead Midwife for Education and that is the main means of contributing to programme development.

Supervisors of Midwives attend the School of Nursing and Midwifery to introduce the students to who Supervisors of Midwives are and what their role in midwifery is. A brief history of the development of supervision is given. The Supervisors duties and responsibilities are outlined with respects to the woman, the midwife and the LSA.

The responsibility of the midwife in relation to the Supervisor is also detailed, for example the need to comply with PREP requirements and submit an annual intention to practice form.

Consideration is also given to the current influences on statutory supervision such as leadership and clinical governance. These themes are then revisited in the students 3rd year where they consider how supervision fits into their practice in a practical way.

7. New policies related to the supervision of midwives

No new policies related to the supervision of midwives have been developed in the last year.

8. Developing trends affecting practice in the LSA

BIRTHS IN TAYSIDE – APRIL 2005 - MARCH 2006

Count of Method of Delivery	
Method of Delivery	Total
Breech – Assisted	12
Breech – Spontaneous	16
Breech Extraction	1
Elective Caesarean	408
Emergency Caesarean	421
Forceps (non-rotational)	350
Forceps (rotational)	108
Scheduled Caesarean	30
Spontaneous - Other Cephalic	11
Spontaneous – Vertex	2400
Urgent Caesarean	111
Ventouse (non-rotational)	109
Ventouse (rotational)	19
Wrigleys Forceps	1
Grand Total	3997

Count of Livebirth	
Livebirth	Total
Livebirth	3979
Stillbirth	18
Grand Total	3997

WORKFORCE ISSUES

The workforce within NHS Tayside is fairly static and vacancies that do arise can be filled without delay. However sickness has periodically run at higher than average levels in the last year. Short term measures were instigated to provide adequate cover to minimise any impact this may have had on safety of women and their families.

A further audit of the workforce in respect of Birthrate plus will take place in the future.

AUDIT

Quality Improvement Scotland reviewed the maternity services in NHS Tayside on 16th February 2006. Information presented to the peer review group included demographics, service provision and progress to date on The Framework for Maternity Services.

The outcome for the visit was overall positive. Strengths included Ultrasound scanning by midwives, risk management, Montrose CMU, telemedicine, EPAC, management of substance misusing women, anaesthetic service for labouring women and baby friendly status.

The challenges included:

- the development of high dependency unit facilities;
- telemedicine for all Community Maternity Units;
- achieving Baby Friendly status on all sites.

A further challenge highlighted was the need for NHS Tayside to have a Maternity Strategy. The development of this strategy has commenced and is being led by the consultant midwife.

PRACTICAL ISSUES

The main change in practice in the last year or so has been the introduction and extension of water labour and water birth in the Tayside Community Maternity Units. Arbroath, Montrose and Perth Community Maternity Units all now have regular water labours and births and midwives are becoming ever more enthusiastic about this service. It is anticipated this trend will follow in Dundee once the CMU there is opened with two pools being included in the design.

9. Complaints regarding the discharge of the supervisory function

In 2005/06 there were no complaints regarding LSA, LSAMO or a SoM in Tayside.

Should such a complaint arise the process of investigation would be as for complaints received about other aspects of maternity services; the relevant individuals would be interviewed and asked to provide statements and a report would be submitted to NHS Tayside Board.

Formal guidance on this is not presently in place so will be developed in the coming months.

10. Local Supervising Authority investigations undertaken during the year

The following information has been taken from the papers of the then Local Supervising Authority Midwifery Officer (LSAMO)

- One neonatal death was the subject of review by the Consultant Midwife in Tayside and by external advisors. The case was reported to the LSAMO who reviewed midwifery practice around the event and participated in the Root Cause Analysis.
- One midwife was referred to the Nursing and Midwifery Council on grounds of health problems. She has recently terminated her employment on the grounds of ill health.
- One midwife was removed from the register by the NMC Conduct and Competence Committee.
- The LSAMO undertook investigation of two midwives' fitness to practice. Both midwives have subsequently left NHS Tayside and have not submitted an Intention to Practise Form for the period 01/04/06 – 31/03/06.

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**LOCAL SUPERVISING AUTHORITY
TAYSIDE NHS BOARD**

SUPERVISION OF MIDWIFERY

**INFORMATION FOR MIDWIVES
PRACTISING IN TAYSIDE**

MAY 2006

Aim of Supervision

The aim of supervision is to safeguard and enhance the quality of care for childbearing women and their family. The role of a supervisor of midwives is to protect the public by empowering midwives and midwifery students to practise safely and effectively. Supervisors are accountable to the local supervising authority (NHS Tayside) for all supervisory activities. When midwives are faced with a situation where they feel they need support and advice the supervisor acts as a resource. Supervisors can also assist in discussions with women when concerns are expressed regarding the provision of care.

The supervisor of midwives also has a role in the following:

- Creating a practice environment, which empowers professional practice through evidence based decision-making.
- Monitoring the Standards of Midwifery Practice.
- Receiving and processing your Intention to Practise form.
- Investigating cases of professional misconduct.

Supervisors of Midwives (SoM)

All midwives have direct access to their Supervisor of Midwives. You will have an opportunity to meet on a yearly basis to explore and develop clinical skills requirements and continuing professional development. You can contact your Supervisor of Midwives directly on the contact numbers listed. Information about arrangements for 24 hour access to a SoM can be obtained from the Maternity Co-ordinator at Ninewells Hospital, Bleep 4062.

Professional Development – Annual Review with your Supervisor

You will be invited to meet with your SoM annually. This will provide you with an opportunity to discuss and plan updating, explore the development of clinical skills, review your training needs, personal portfolios and reflect on clinical situations you may have encountered. This review will help you meet your requirements for PREP.

NMC Post-Registration Education & Practice Standards

Continuous Professional Development Standard (PREP) – to meet this Standard you must:

- Undertake at least five days (35 hours), or equivalent, of learning activity relevant to your practice during the 3 years prior to your renewal of registration.
- Maintain a personal professional profile of this learning activity.
- Comply with any request from the NMC to audit compliance with these requirements.

(PREP) Practice Standard – To meet this standard: *with effect from 1 August 2006*

You need to complete a minimum of 450 hours of practice during the 3 years prior to the renewal of your registration.

If you have and wish to retain both nursing and midwifery registrations you will need to have completed a minimum of 900 hours of practice divided equally between nursing and midwifery during the 3 years prior to the renewal of your registration.

Intention to Practise Forms (ITP)

The NMC distributes forms to midwives in January each year. You must complete your ITP form which has to be discussed with and countersigned by your SoM. The SoM will forward your ITP to the LSAMO. All newly qualified midwives, newly employed midwives or midwives who have been omitted from the NMC distribution must complete an Intention to Practise form obtained by the midwife by contacting the NMC directly.

NB Failure to notify your Intention to Practise may result in your temporary suspension from practise until notification has been recorded.

NHS TAYSIDE LSA MIDWIFERY OFFICER IS KAY FORSYTH

Supervisor of Midwives contact numbers

In Tayside there is 24hr access to a supervisor of midwives. The contact number can be obtained from the Maternity Co-ordinator, Ninewells Hospital, Bleep 4062.

Ninewells Hospital :

Allan, Gill, ext 32140
 Chisholm, Sheona, ext 32140
 Coupar, Sandra, ext 34076
 Denny, Harriet, ext 33837/32140
 *Forsyth, Kay, ext 32017 (LSA
 Midwifery Officer for Tayside NHS Board)
 Fraser, Myra, Tel 01382 732967
 Gierasik, Linda, Tel 01382 732967
 Locherty, Diane, ext 32141

Meldrum, Mary, ext 32812
 MacDonald, Cathy, ext 32812
 Powrie, Carol, ext 34124
 Reilly, Anne, ext 32140
 Shand, Vanessa, ext 32070
 Sutherland, Carol, ext 32964
 Trezise, Jean, ext 32140
 Winter, Clare, ext 33615
 Wright, Alison, ext 31540

Perth CMU:

Hinshaw, Brenda, ext 13425
 Greig, Fiona, ext 13541
 Hastings, Chrissie, ext 13425

Montrose CMU:

Winters, Phyllis, Tel 01674 832175

Forfar Community Midwives:

Carle, Fiona, Tel 01307 475225

**Local Supervising Authority Midwifery Officer - Each local supervising authority (Health Board) appoints a local supervising authority midwifery officer who is responsible for exercising its function in relation to the Supervision of Midwives. During 2006 this will become a 'Regional Post' – Tayside being included in the North Region.*

Your responsibilities as a practising midwife - to yourself

- Familiarise yourself with 'Midwives Rules & Standards NMC 05/04'
- Maintain & improve your professional knowledge & competence.
- Be confident in your knowledge of the role & activities of a midwife.
- Be familiar with all legislation relating to midwifery practice.
- Maintain a personal and professional portfolio.

Your responsibilities – to the public

- Ensure you are a competent, safe practitioner (Midwives Rules & Standards NMC 05/04).
- Ensure you have current documentary evidence of Hep B status, which complies with current OHSAS policies, which have an impact on practise.

To your Supervisor

- Submit Intention to Practise and change of home/Address. (Rule 36, Section B)
- Arrange to meet your SOM, at least annually.

To Student Midwives

- Enable student midwives to be supported by the supervisory framework (Midwives Rules & Standards, Nursing & Midwifery Council 05/04).

To NMC

- Practice and conduct yourself within the framework provided by the Code of Professional Conduct.
- Notify change of home/address and name change.

NMC Publications

All midwives should have personal copies of all current NMC Guidelines and Code of Practise booklets. Information about NMC publications can be obtained from your Supervisor, by contacting the NMC directly, or via website www.nmc-uk.org.T

References:

1. Midwives Rules & Standards, Nursing & Midwifery Council 05/04



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