

NMC Framework for reviewing Local Supervising Authorities

NMC document information

Title	NMC Framework for Reviewing Local Supervising Authorities
Document type	Information and guidance
Document aim	This document describes the Nursing and Midwifery Council (NMC) framework for reviewing Local Supervising Authorities (LSAs). It is written for the Local Supervising Authority and for other stakeholders who wish to understand the review process.
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The Nursing and Midwifery Council

The Nursing and Midwifery Council (NMC) exists to safeguard the health and wellbeing of the public:

- we register all nurses and midwives and ensure that they are properly qualified and competent to work in the UK
- we set the standards of education, training and conduct that nurses and midwives need to deliver high quality healthcare consistently throughout their careers
- we ensure that nurses and midwives keep their skills and knowledge up to date and uphold the standards of their professional Code
- we ensure that midwives are safe to practise by setting rules for their practice and supervision
- we have fair processes to investigate allegations made against nurses and midwives who may not have followed the Code.

We are empowered to carry out these functions by The Nursing and Midwifery Order 2001¹ (The Order). The rules and standards for statutory supervision of midwives and the function of the Local Supervising Authorities (LSA) are in the *Midwives rules and standards*².

We wish to know of any concerns that may impact upon the health and wellbeing of women and families, such as poor midwifery practice. Also of concern to us is where the clinical environment was not safe and supportive for the provision of care or as an appropriate learning environment for pre-registration midwifery students.

Further information about the NMC, LSAs and statutory supervision of midwives can be found on our website www.nmc-uk.org.

1. Overview of the framework

The NMC has a duty to verify that the standards it sets for LSAs are being met. The *NMC Framework for reviewing LSAs* sets out the structure for how this is achieved. Appendix 1 is a flow chart of the framework process and timeline.

We already have some mechanisms in place which verify that standards for statutory supervision of midwives and the function of LSAs are being met:

- each LSA is responsible for auditing statutory supervision of midwives and midwifery practice on an annual basis.
- each LSA is responsible for submitting an annual report to the NMC about activities, key issues, good practice and trends affecting maternity services within its area.
- the NMC Quality Assurance framework monitors and reviews all higher education institutions, which deliver midwifery and nursing programmes. Any concerns in relation to the learning environment of student midwives would be reported to the midwifery department at the NMC.

¹SI 2002 NO 253 The Nursing and Midwifery Order 2001

² Midwives rules and standards 05 04

- as a self-regulating profession it is expected that any midwife with concerns relating to any of the NMC rules and standards would seek advice from her supervisor of midwives (SoMs), LSA or the NMC.

The review framework focuses on exploring more serious issues and concerns within identified LSAs. This risk-based approach is consistent with the work of the NMC and is in line with the *Regulators Compliance Code*³, which states that:

regulators, and the regulatory system as a whole, should use comprehensive risk assessment to concentrate resources on the areas that need them most.

There are a number of areas of concern that we would wish to be made aware of as either individually or collectively these may prompt a review of an LSA. These concerns are detailed in appendix 2, the *NMC review framework risk register*.

We record concerns about an LSA on a *LSA profile* (appendix 3). The profile is populated using information from the LSA annual reports which are sent to us by the LSA on an annual basis (by 30 September each year). Other stakeholder groups may also inform us of any concerns in relation to the function of the LSA and protection of the public. The LSA via the LSAMO or the Chief Executive may also request a review.

On an annual basis the NMC midwifery department assesses the LSA profiles and decide which LSAs will be reviewed during the coming year. The LSAs will then be notified and the reviews organised.

We may also, from time to time, review a randomly selected LSA, or a low risk scoring LSA to enable the NMC to test and audit the risk methodology.

1. Purpose of the review

The purpose of the review is to assess the function of the LSAs and verify that they are meeting the required standards. The review also enables exploration of concerns that may impact upon the safety of the health and wellbeing of women and their families.

The focus is on serious issues and concerns but may include investigation of key themes highlighted by the NMC. The review aims to be both formative (an aid to development) and summative (a check that required standards are being met). It is important that the review team also have the scope to explore where applicable, the practice of maternity services in relation to supervision in order to understand the context in which the LSA is functioning in and to triangulate information.

Terms of reference are attached in appendix 4.

³ http://www.cabinetoffice.gov.uk/REGULATION/reform/enforcement_concordat/compliance_code.asp

2. Concerns of interest to the NMC

As part of this framework we wish to be notified of information which gives cause for concern in relation to safeguarding the health and wellbeing of women and their families, in the context of statutory supervision. This may include;

- an inadequate supervisory framework in place to meet the *Midwives rules and standards* across the LSA
- where a midwife is reported to the NMC for clinical concerns without reference to the supervisory framework
- where the clinical environment is unsafe for the midwife student or mentorship is ineffective and not supporting student midwives
- concerns regarding the function and performance of supervision within the LSA
- poor compliance with recommendations from any investigation reports either from the LSA or other organisations such as investigating bodies
- concerns of conduct which relate to, for example, bullying, harassment or abuse of power from within the LSA or supervisory framework which may impact upon the function of supervision

A full list of concerns, associated risks and risk scores are listed in the *NMC review framework risk register* (appendix 2).

Process leading to a review

4.1 Sources of information

Information regarding an LSA will be gathered by the NMC from a variety of sources:

- LSA Annual Report
The annual report that is submitted by the LSA to the NMC on an annual basis (by 30 September each year)
- Self-referral
The LSA may self-refer if they would find a review helpful in relation to concerns regarding the ability to carry out its function. These may be potential or actual concerns
- NMC internal functions
Any issues highlighted during the NMC QA framework reviews and monitoring events to higher education institutions and their service partners or via our Fitness to Practise Directorate
- External stakeholder organisations
External stakeholder reports, investigations and communications. We work collaboratively with other agencies involved in the monitoring of standards and safety including the Departments of Health, investigating bodies and safety agencies across the four countries of the UK
- Members of the public
Information received by members of the public will also be considered

Information can be submitted to the NMC by email, telephone or in writing to the NMC midwifery department. A notification form (appendix 5) is also available on the NMC website www.nmc-uk.org

Information we receive will **not** automatically prompt a review of an LSA. The information will be gathered and reviewed on an annual basis to help inform which LSAs will be reviewed in the coming year.

4.2 Risk assessment

A risk-based approach is used to assess which LSAs we will review. This enables us to focus on particular LSAs which require more support, so uses resources effectively.

As information is received it will be stored in a file for the relevant LSA and a summary will be recorded on the LSA profile (appendix 3).

Where consortia arrangements are in place information will be stored as either relevant to an individual LSA or an entire consortia.

An initial risk assessment of the information is undertaken, using the *framework risk register* (appendix 2) and categorising information by concern, risk type and risk score. The risk score is calculated based on likelihood of the risk occurring and the impact should the risk occur using the scoring table and definitions in the framework risk register.

The risk register is an evolving component of the framework which will be updated over time as reviews are completed and further areas identified for exploration or where existing concerns are considered unfounded. Any concern which is recorded on a LSA profile will be categorised against the risk register and assigned the appropriate risk score.

The NMC will update each LSA profile on an annual basis of the information received and risk assessed about them. This will allow the LSA to comment on any information held and provide mitigation if appropriate. Any mitigation received from the LSA will also be updated on the LSA profile.

4.3 Decision for review

On an annual basis the LSA profiles will be reviewed to decide which LSAs will be reviewed in the coming year.

The decision to review will normally be based on which LSAs may be at highest risk of not meeting the standards and where the greatest risk may be with regards to safeguarding the health and wellbeing of women and their babies. However, on occasions the midwifery department may select an LSA to be reviewed at random or one with a low risk score. This will enable us to audit and test the NMC risk methodology.

The NMC midwifery department will also undertake a mid-year review of the LSA profiles and assess any changes which may be required.

Once a decision has been made to undertake a review the relevant LSAs will be informed and given a minimum of 3 months notice to organise the review.

It is the NMC midwifery department's responsibility to prioritise visits to be undertaken during the coming year and to take into account constraints on resources.

The Midwifery Committee will be informed of which LSAs are being reviewed for the coming year.

5. The review team

The review will be undertaken by a team who have been recruited by the Appointment Boards and trained by the NMC for this purpose. The review team will consist of a:

- midwife
- lay reviewer
- LSA Midwifery Officer
- NMC Midwifery adviser

During allocation of work to the reviewers a Chair will be selected as well as the main report writer.

The LSA will be asked to host the review. The host LSA will contribute to the review by submitting required documents in advance of the review, organising for the review team to meet with specified stakeholders and by facilitating the review in general.

6. The review

6.1 Preparation

- **Notification to the LSA**
The LSA is given at least 3 months notice. The LSA is informed why the review is taking place and given a copy of the framework. The midwifery department will then liaise with the LSA to finalise dates and location of the review
- **Confirmation to the LSA and request for documents**
At the stage of notification a list of required documentation will also be requested of the LSA. This will include
 - LSA annual report *
 - LSA self audit tool
 - Context information
 - Selection of supervision reports that supervisory teams sent to the LSA
 - LSA risk register and or risk meeting minutes
 - User or user group reports of supervision audits
 - HEI annual reports (midwifery education section)
 - Final review programme

** Received by the NMC as part of the annual reporting process*

All documentation is sent to us electronically by the LSA at least six weeks prior to the review taking place

- Allocation of reviews to the review team
Once dates of the review have been confirmed with the LSA we allocate

the review team. An information pack will be posted to the review team at least two – four weeks in advance of the review

- **Conflict of interest**
On occasions there may be a conflict of interest of a reviewer and an LSA which is being reviewed. Reviewers will be asked to declare any conflict of interest before being allocated to a review and a decision made on whether the declaration should prevent the reviewer from participating in a review of that LSA
- **Travel and accommodation**
Travel and accommodation for the review is arranged through the NMC
- **Review team pre-meeting**
It is important that the review team meet prior to the review commencing to enable the team to prepare as a team. This will be arranged for the afternoon/evening prior to the review. During this meeting the chair for the review is decided as well as the main report writer. The review team will also meet with the LSAMO of the LSA being reviewed in order to ask any preliminary questions about the context of the LSA.

6.2 Duration

The review will take place over 2 consecutive days to ensure adequate time is given to the review team to conduct the review effectively.

We will avoid planning a review close to holiday periods such as bank and religious holidays.

6.3 Location

The review would normally be based at the LSA offices, however, consideration will be given to the facilities available within the LSA and where necessary the LSA will be asked to recommend another venue.

We hold the option of visiting a maternity service if it is felt necessary in specific circumstances and in keeping with the objectives of the framework.

6.4 Programme

The review team will meet with a wide range of stakeholders from across the LSA, review evidence and triangulate information received in advance of the review.

The LSA should ensure those taking part in the review have received the terms of reference and access to the framework document so they have an understanding of the review process and objectives.

The NMC will provide the LSA with a programme for the review and will be explicit on timings and which individuals and groups the review team wish to meet with. This will enable the programme to run smoothly and effectively.

The programme should commence with a presentation setting the context of the LSA.

The programme should include regular in-camera sessions for the review team, time with the LSAMO and time to review evidence.

The review should end with an in-camera session followed by a short feedback session to the host LSA. This feedback session will be short as the main feedback

will be detailed in the report following the review.

It is recognised that some flexibility may be required in organising the programme.

6.5 User involvement

It is important to ensure that users of maternity services and user organisations are supported to be involved in the review. During the planning stages we will consider with the host LSA, the most appropriate location to meet with users and user organisations. This may be a local maternity service.

Wherever the review team meet with users, consideration should be given to extra provisions such as a room for breastfeeding, baby changing facilities and a room with toys for young children.

6.6 Consortia arrangements

Where consortia arrangements are in place (that is one LSA Midwifery Officer being responsible for a number of LSAs) the decision to review the entire consortia or an individual LSA will be decided by the NMC. The decision will be on a review-by-review basis dependent on whether the need to review is based on consortia level or LSA specific risks.

7. After the review

7.1 Report writing

The reviewer selected as report writer will use the notes from the review meeting provided by the team to write a draft report including any recommendations. A template is provided for this purpose. The first draft will be circulated to the review team for comment within two weeks of the review and a final draft circulated to the host LSA for factual correction within four to six weeks of the review.

7.2 Publication of final report

The final report will be signed off by the Head of Midwifery at the NMC, circulated to the host LSA and published on the NMC website as a public document within ten weeks of the review.

7.3 Recommendations and action plan

As part of the report recommendations will be made to the LSA and to the NMC. The LSA is requested to send an action plan addressing the recommendation within eight weeks of receiving the final report. The action plan should be signed off by the Chief Executive and the LSAMO and will then be published on the NMC website alongside the report.

7.4 Summative report to the Midwifery Committee and Council

The Midwifery Committee will be updated on the outcomes of the reviews. Council will also be updated through the Midwifery Committee report.

7.5 Follow-Up

Progress against the NMC recommendations and the subsequent LSA action plan will be monitored and reviewed by the NMC. We will request an update on progress against the action plan from the LSA and may wish to meet with the LSAMO to discuss progress and, or any outstanding issues.

Progress will also be updated on the LSA profile which will be reviewed at the annual assessment meeting. A second review may be recommended for some LSAs to ensure that the agreed action plan is being met.

7.6 Evaluation and feedback

All participants in the review (both the LSA and the review team) will be asked to complete an evaluation form to inform future development of the review framework and to inform future training and performance monitoring of the review team.

8. Appointment, training and performance of NMC reviewers

8.1 Appointment

Appointment of review team members is through the NMC Appointments Board.

8.2 Training

All successfully appointed reviewers will be required to undertake a training programme before they are able to undertake any reviews. This will include a mixture of skills, knowledge and equality and diversity training.

After the initial year of reviews a 'buddy' system will be considered whereby any newly appointed reviewers will be paired up with an experienced reviewer and have the opportunity to shadow a review in advance of undertaking their first review.

8.3 Performance monitoring

After each review members of the review team and the host LSA will have the opportunity to feedback any performance issues of members of the review team to the NMC using an evaluation form. All reviewers will also undertake an appraisal in line with the appointments board policy.

9. Communications with stakeholders

The NMC Midwifery department will ensure effective communications of this framework with relevant stakeholders. This will include:

- publication of the framework on the NMC website
- publication of review reports on the NMC website
- liaison with key stakeholders in updating the framework.

10. Equality and Diversity

This framework has been equality impact assessed in line with NMC policy. It promotes equality and diversity through:

- a fair and transparent appointments process through the NMC appointments board
- extra considerations provided to users of maternity services and user representatives
- clarification that users of maternity services includes both men and women
- review team to include registrant, lay and LSAMO reviewers
- consideration of religious holidays when planning reviews.

If you have any special requirements with regards to accessing this framework or with any of the processes within the framework please contact the NMC midwifery department on 020 7333 6692 or email: advice@nmc-uk.org.

11. Travel, accommodation and expenses

We will pay an allowance, travel and accommodation for review team members in line with our travel, accommodation, allowance and subsistence policy. Reviewers will need to submit their expenses in line with NMC policy, which includes valid receipts prior to being paid.

12. Appeals and complaints process

If at any stage during the review framework process you have any concerns or queries in the first instance please contact the NMC midwifery department:

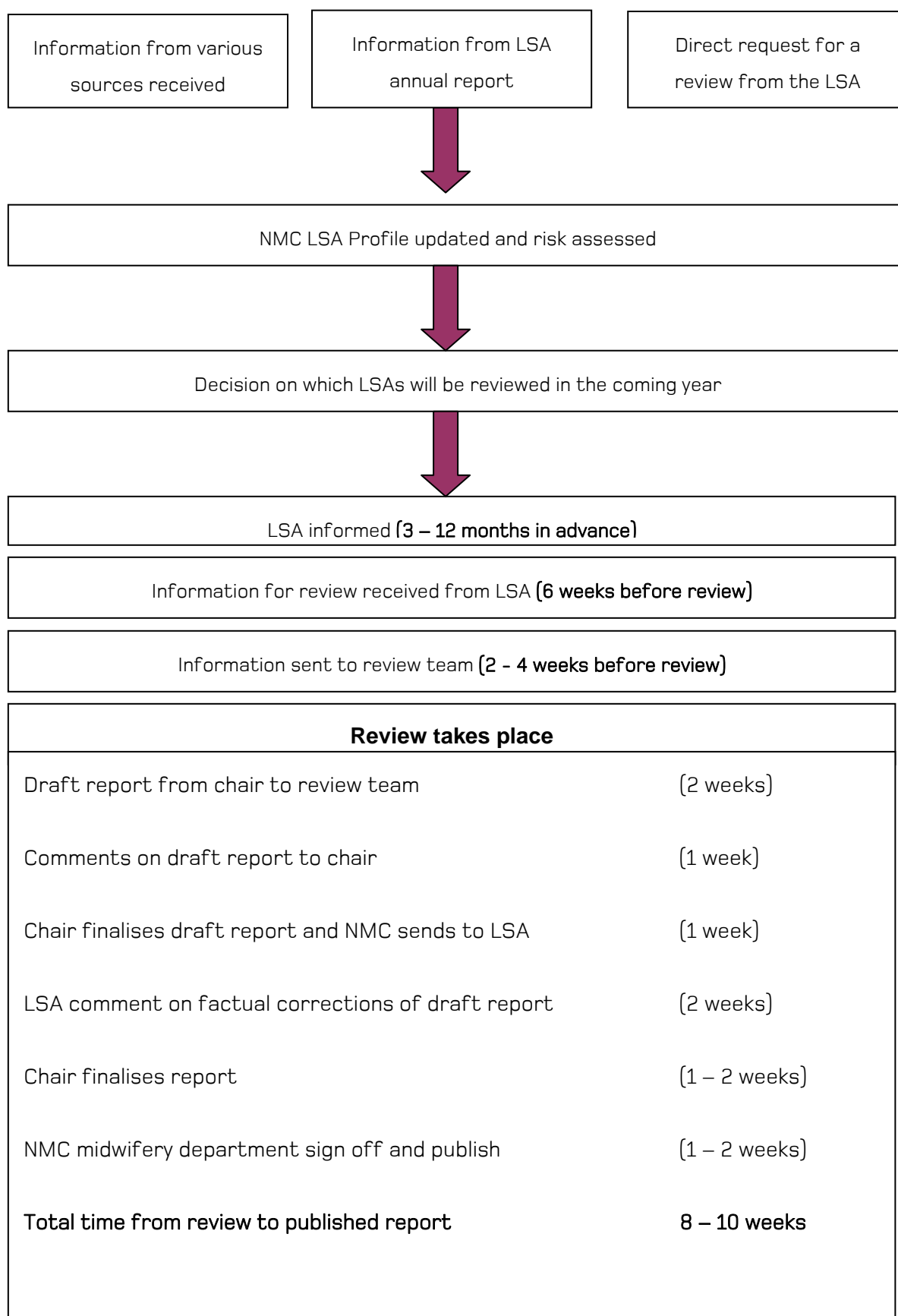
Tel: 0207 333 6692

Email: advice@nmc-uk.org.

A formal appeal or complaint can be submitted in writing to:

Head of Midwifery
Nursing and Midwifery Council
23 Portland Place
London W1B 1PZ.




Flow chart of the NMC framework for reviewing LSAs



NMC Framework Risk Register Key

Consequence/Severity of Impact

Likelihood	Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5
Almost certain - 5	5	10	15	20	25
Likely - 4	4	8	12	16	20
Possible - 3	3	6	9	12	15
Unlikely - 2	2	4	6	8	10
Remote - 1	1	2	3	4	5

RISK  Low  Moderate  High

1-8 9-15 16-25

Rating consequences and impact

Catastrophic	Critical impact on protection of the public e.g. significant contributor to higher than anticipated unexplained deaths of mothers or infants or, serious injury of mother or baby requiring life-long support. Very difficult and long term to recover.
Major	Major impact on protection of the public or function of the LSA. E.g events which risk public or professional confidence in the respective maternity services or respective LSA/SHA, non-compliance with action plans from various investigating authorities. Medium to long term effect.
Moderate	Significant impact on protection of the public, function of the LSA. E.g. events where co-partners such as Education Providers identify issues in the learning environments for student, where the LSA Framework is unattainable due to closure of education routes for Preparation of SoM Programme. Medium term effect.
Minor	Minor impact, loss, delay, inconvenience e.g. non-compliance with NMC Standard or Guidance. I.e. when appointing an LSAMO, failure to submit an ITP etc, lack of data or evidence to support Investigations or Reports issued by the LSA. Short to medium term effect.
Insignificant	Risk identified with clear mitigation from LSA including management through internal risk framework, clear plans action plans and lines of reportage, etc. Little or no effect.

Rating the likelihood

Almost certain	Is expected to occur in most circumstances
Likely	Will probably occur in most circumstances
Possible	Might occur at some time
Unlikely	Could occur at some time
Remote	May occur only in exceptional circumstances

NMC Framework Risk Register

Ref	Summary of information	Source	Risk	Likelihood	Impact	Risk score
Chief Executive sign off and quality of report						
1	Chief Executive did not sign annual report and no indication that it had been viewed by him/her.	LSA Annual Report	Lack of sign off may mean non-engagement with supervisory function at SHA/board level.	2	8	16 RED
2	Some requirements of rule 16 of the midwives rules and standards not described in the LSA annual report and NMC not assured that an effective supervisory framework is in place.	LSA Annual Report	Effective supervisory framework may not be in place and therefore unable to protect the public.	4	4	16 RED
3	Inconsistent description of supervision framework described and NMC not assured that an effective and consistent supervisory framework is in place.		Effective and consistent supervisory framework may not be in place and therefore unable to protect the public.	4	4	16 RED
Numbers of Supervisors of Midwives, appointments, resignations and removals						
4	SoM/MW ratio above 1:20 within individual services or across the LSA.	LSA Annual Report	Elements of supervisory framework unachievable or unsustainable due to lack of supervisors.	3	4	12 AMBER
5	SoM / MW ratio not stated.	LSA Annual Report	Elements of supervisory framework unachievable or unsustainable due to lack of supervisors	4	4	16 RED

Details of how midwives are provided with continuous access to a Supervisor of Midwives

6	Description of how midwives are provided with continuous access to a SoM not described or variable across LSA and NMC not assured that an effective supervisory framework is in place. E.g. some areas within an LSA may use a 24/7 hour rota and some may use a contact list.	LSA Annual Report	That in an emergency midwives may not have clarity about how to contact a Supervisor of Midwives thereby delaying a decision that may have an influence on the outcome for a mother and baby.	3	4	12 AMBER
7	No evidence that ' <i>continuous access to a SoM</i> ' process is audited so lack of assurance that process is working effectively.	LSA Annual Report	Process may not be working effectively which may have impact during emergency situations (see above).	3	4	12 AMBER

Details of how the practice of midwives is supervised

8	LSA audit process not described (or not described well) so NMC not assured that an effective supervisory framework is in place.	LSA Annual Report	Effective supervisory framework may not be in place and therefore unable to protect the public	4	3	12 AMBER
9	No description of ITP process.	LSA Annual Report	Lack of supervisory framework in place and inability to delivery function of supervision.	4	4	16 RED
10	LSA Audit Process stated as not undertaken.	LSA Annual Report	No mechanism in place to assure LSA that supervision is functioning and therefore NMC not assured that effective supervisory framework in place.	5	4	20 RED

Evidence that service users are assisting the LSAMO with the annual audits						
11	Public User Involvement in supervision audits not described.	LSA Annual Report	Lack of user input into development of supervisory framework. Risk in meeting rules and standards.	4	3	12 AMBER
12	Public User Involvement in supervision could be enhanced.	LSA Annual Report	Minimal user input into development of supervisory framework.	2	2	4 GREEN
Evidence of engagement with higher education institutions in relation to supervisory input in to student midwifery education						
13	No evidence of engagement with higher education institutions.	LSA Annual Report	Risk in meeting rules and standards.	4	4	16 RED
14	Indication that the clinical learning environment for student midwives is not an appropriate learning environment. This may include lack of qualified mentors, lack of support for undertaking mentorship programme or challenges in meeting student/mentor ratio.	LSA Annual Report QA Framework	Supervisory framework is not pro-active in improving learning environment for student midwives and/or students learning in an inappropriate clinical environment.	4	4	16 RED
Details of any new policies related to the supervision of midwives						
15	No detail of any new policies.	LSA Annual Report	Lack of pro-activity of LSA in supporting supervisors of midwives with policy development.	4	4	16 RED
Evidence of Developing Trends affecting midwifery practice in the local supervising authority						
16	Limited information or description provided on	LSA Annual Report	Role of supervisory framework unclear.	4	4	16

	maternal death trends within LSA and interface with supervisory framework.		Limited analysis learning from trends and lack of opportunity to apply learning in the future to protect the public.			RED
17	Evidence to suggest increasing births across the LSA of over 5-10% or increase in midwife to birth ratio.	LSA Annual Report	Impact upon the protection of the public and suitability of clinical environment as a safe and supportive place for provision of care. Impact on appropriateness of clinical learning environment for pre registration midwifery students	3	5	15 AMBER
18	Maternity Service/s within LSA under review by NMC or other stakeholder or special measures in place by the Health Care Commission.	LSA Annual Report	Impact upon the protection of the public and suitability of clinical environment as a safe and supportive place for provision of care. Impact on appropriateness of clinical learning environment for pre registration midwifery	3	5	15 AMBER
Details of number of complaints regarding the discharge the Supervisory Function						
19	No description of complaints process or number of complaints.	LSA Annual Report	Possibility that complaints process is not in place or is not robust.	3	5	15 AMBER
20	Evidence of up held complaints against the LSA.	LSA Annual Report	That the LSA has been deemed to be in effective in its function to women or midwife (dependent on complaint). There may have been a	4	4	16 RED

			compromises to protecting the public e.g. due to bullying, harassment or discrimination.			
Reports on all local supervising authority investigations undertaken during the year						
21	High or low percentage of supervisory practice programmes described and/or lack of definition on reasons for high or low numbers.	LSA Annual Report	Rules and Standards in relation to investigation leading to supervised practice not being interpreted appropriately/effectively. Risk that midwives being placed on a programme of supervised practice inappropriately.	3	4	12 AMBER
General concerns identified in the NMC framework for reviewing LSAs						
22	Inadequate supervisory framework in place to meet the Midwives Rules and Standards across the LSA.	NMC framework for reviewing LSAs	Effective supervisory framework not in place and therefore unable to protect the public.	3	5	15 AMBER
23	Where a midwife is reported to the NMC for clinical concerns without reference to the supervisory framework.	NMC framework for reviewing LSAs	Effective supervisory framework not in place and therefore unable to protect the public.	3	5	15 AMBER
24	Where the clinical environment is unsafe for midwife student learning or mentorship is ineffective and not supporting student midwives.	NMC framework for reviewing LSAs	Impact on appropriateness of clinical learning environment for pre registration midwifery	3	5	15 AMBER
25	Concerns regarding the function and	NMC framework for	Effective supervisory framework not in place and	3	5	15

	performance of supervision within the LSA.	reviewing LSAs	therefore unable to protect the public.			AMBER
26	Poor compliance with recommendations from any investigations reports from either the LSA or other bodies such as the Healthcare Commission.	NMC framework for reviewing LSAs	Effective supervisory framework not in place and therefore unable to protect the public.	3	5	15 AMBER
27	Concerns of conduct which relate to, for example, bullying, harassment or abuse of power from within the LSA or supervisory framework which may impact upon the function of supervision.	NMC framework for reviewing LSAs	Effective supervisory framework not in place and therefore unable to protect the public.	3	5	15 AMBER

LSA Profile

LSA		LSAMO		Chief Executive		Contact details of LSA		
Date	Details	Source	Concern <small>(reference risk register)</small>	Risk <small>(reference risk register)</small>	Likelihood	Impact	Risk score	
Date of assessment meeting				Recommendations following assessment meeting	<input type="checkbox"/> To monitor / <input type="checkbox"/> To undertake review			
Reasons for review to be undertaken				Date for proposed review				
Review complete				Report of review published on NMC website				
Action plan received from NMC				Action plan implementation date				
Follow on actions								
Comments:								

Terms of Reference for the review team

The NMC sets the rules and standards for the function of the Local Supervising Authorities (LSAs) which are detailed in the Midwives Rules and Standards. The NMC has a duty to verify that the LSAs are meeting the required rules and standards and this will be achieved through the *'NMC framework for reviewing LSAs'*.

The purpose of the review is to examine the function of the LSA (which is an organisation) and verify that the LSA is meeting the required standards. It also enable concerns that may impact upon protection of the public and safety of women and their families to be reviewed.

The review will target serious issues and concerns identified in the LSA profile but may also include exploration of key themes highlighted by the NMC. The review aims to be both formative (an aid to development) and summative (a check that a required standards are being met).

It is important that the review has the scope to explore the function of statutory supervision of midwives and where applicable practice of maternity services in relation to supervision. This enables consideration of the context in which the LSA is functioning and to triangulate information.

The review team will verify that the Midwives rules and standards are being met.

In order to do this the reviewers may:

- Review
- The function of the Local Supervising Authority
- The function of statutory supervision of midwives
- Information from the LSA profile and self assessment form
- Concerns raised to the NMC which may affect safety of women and babies.
- Concerns in relation to the learning environment of student midwives
- Evidence provided by the LSA
- Explore key themes identified by the NMC.
- Visit one or more maternity services either to enable access to the review by service users and lay organisations or because it is deemed appropriate to inform the review.
- Meet with stakeholder groups that may include LSAMOs, midwives, supervisor of midwives, users of maternity services, lay organisations and representatives, Heads of Midwifery, Directors of Nursing, Chief Executive of Maternity Services or the SHA/LSA, Department of Health Advisors etc.
- Consider examples of best practice within the function of the LSA.

The review will be undertaken by a team who have been trained by the NMC for this purpose and will include:

- a midwife
- a lay reviewer
- a LSAMO
- a NMC Midwifery adviser

Notification Form

This form is part of the NMC framework for reviewing Local Supervising Authorities. The complete framework is available on the NMC website www.nmc-uk.org. Please complete and return this form to advice@nmc-uk.org if you have any concerns in relation to:

- The function of the Local Supervising Authority
- Statutory Supervision of Midwives
- Protection of women and their families from poor midwifery practice within an LSA geographical area
- The clinical learning environment of student midwives.

If you have any queries on the framework or completing this form please contact the NMC Midwifery department on 020 7333 6692.

Date	
Your name	
Organisation & job title <i>(if applicable)</i>	
Category	<i>e.g. member of the public, LSA Midwifery Officer, midwife, lead midwife for education, etc</i>
Contact Details	
Please detail your concern	