

**Nursing and Midwifery Council report on the East Midlands
Local Supervising Authority**

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Authors	Marcia Ogunji – Registrant Reviewer (Report writer) Comments from: Selina Nylander – Lay Reviewer Yvonne Bronsky – LSAMO Reviewer Helen Pearce NMC Midwifery Adviser
NMC representative	Helen Pearce NMC Midwifery Adviser
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Contact details

Nursing and Midwifery Policy and
Standards
Nursing and Midwifery Council
23 Portland Place
London W1B 1PZ
020 7333 6692

Website: www.nmc-uk.org
Email: advice@nmc-uk.org

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1 Executive summary

1.1 Introduction

We are the nursing and midwifery regulator for England, Wales, Scotland, Northern Ireland and the Islands. We exist to safeguard the health and wellbeing of the public. We set standards for education and maintain the register of nurses and midwives. We have fair processes to investigate and deal with those whose fitness to practise is called into question.

1.2 Reason for review

The purpose of this review has been to examine the function of the East Midlands Local Supervising Authority (LSA). The East Midlands LSA was identified for review as it had not previously been reviewed as its annual report had a zero risk score. It was therefore included to test the NMC framework. The risk-based approach to reviewing LSAs has been approved by the NMC Midwifery Committee, and is in line with the NMC risk framework and the Regulators' Compliance Code.¹

1.3 Review findings

The review team identified that there were no public protection issues relating to the statutory supervision of midwifery practice that require attention. It has been identified that the East Midlands LSA meets all the standards for the LSA as set out in the NMC Midwives rules and standard (2004). There are no recommendations in relation to meeting the NMC standards.

1.4 Recommendations

We will publish this report on the NMC website at www.nmc-uk.org. The following recommendations have been made to the East Midlands LSA and an action plan must be submitted to the NMC within 8 weeks of receiving this report. We will publish it alongside this report.

There are no recommendations in relation to meeting the NMC standards.

Recommendations to the LSA to support continued development:

Organisational changes

1. To ensure that the LSA function remains intact in light of the forthcoming changes to the SHA.
2. To involve the LSAMO in the forthcoming SHA changes to ensure that the legal framework which is supervision is in no way compromised
3. To ensure that the role of the LSAMO is retained as a clear and separate function within any new organisation

¹ <http://www.berr.gov.uk/files/file45019.pdf>

4. To agree a plan to address the need to separate the role of LSAMO and Maternity Lead within the organisation replacing the SHA.

Leadership

5. To share the many examples of good practise which exist throughout the LSA especially in the context of the forthcoming changes to the organisation.
6. To ensure that the annual LSA audit reports reach the SoM's and the Trusts Boards in a timely manner.
7. To support SoM's within each Trust to review and update supervisory information on their websites.
8. To raise the profile of the activity of Supervision among service users and midwives.
9. To continue to monitor and address those areas that do not achieve the 1:15 SOM/Midwife ratio across the LSA.
10. To continue to encourage users to be involved in all areas of maternity service review, development and evaluation.

2 Introduction

We are the nursing and midwifery regulator for England, Wales, Scotland, Northern Ireland and the Islands. We exist to safeguard the health and wellbeing of the public. We set standards for education and maintain the register of nurses and midwives. We have fair processes to investigate and deal with those whose fitness to practise is called into question.

The NMC is empowered to carry out these functions by the Nursing and Midwifery Order 2001(the order).²

The NMC has responsibility under the order for setting the rules and standards related to how LSAs carry out their function³. An overview of these LSA functions, along with a description and overview of the East Midlands LSA can be found in appendix 1.

The NMC wishes 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 the NMC would be where the clinical environment was not a safe and supportive place for the provision of care or as an appropriate learning environment for pre-registration midwifery students. The purpose of this review (appendix 2) has been to examine the function of the East Midlands LSA.

2.1 Acknowledgements

The NMC would like to thank everyone who participated in the review and acknowledge that many travelled a considerable distance.

2 The Nursing and Midwifery Order 2001, SI 2002 N0 253

3 The Nursing and Midwifery Order 2001, Part VIII, Articles 42 and 43

3 The NMC review of East Midlands LSA

3.1 Reason for review

In 2008-2009 the NMC analysis of the East Midlands LSA annual report 2008-2009 was given a zero risk score.

In 2007-2008 the risk score was 27

The East Midlands LSA was identified for a review in line with the NMC framework to review all LSA's on a minimum three yearly basis.

4 Review findings

The NMC has reviewed the performance of the East Midlands LSA against key standards set within the Midwives rules and standards (2004). Our review of the LSA has focused on the supervision of midwives and the safeguarding of health and wellbeing of women, their babies and their families.

The review took place over a two day period during which an extensive review of documentation was undertaken, supported by meetings with key stake holders.

The conclusions drawn by the Review team are thus:

Positive elements identified during the Review included:

- Statutory supervision has a high profile within this SHA and the LSA function is clearly recognised by the SHA.
- Cohesive working relationships are evident within the LSA and wider SHA
- The Supervision of midwives is highly valued by a range of stakeholders; they particularly identified that as Supervision of midwifery stands outside of hierarchical structures it adds impartiality to the practice context in a way that does not exist in nursing
- Positive appreciation for the LSAMO from all stakeholders, particularly the Supervisors of Midwives who report that the LSAMO is easy to access and provides clear leadership.
- The LSAMO takes a prominent operational role in the Preparation for Supervisor courses run across the region.
- The LSAMO has taken a lead role in re-shaping the SoM network which facilitates the sharing of information and promotion of good practice across the LSA; this forum is appreciated by the SoM's.
- There was a clear initiative to invite SoM's to reappraise their rationale for being a SoM and some took this as an opportunity to stand down, thus clearing the path for others to access training for the role and to embrace it through fresh eyes
- Supervisory investigations are clearly understood by the SoM's who are well supported by the LSAMO and LSA Midwife; both are commended by the SoM's for their approachability even out of hours.
- Where suspension of services has occurred SoMs have been made aware and this information is escalated to the LSAMO

- Several SoM's are participating in the Leadership programme and were recommended for the programme by the LSAMO.
- There were many other excellent examples of good practice that were shared including:
 - the involvement of SOMs in three presentations at UK LSA Conference in April 2010
 - the piloting of the Supervisors scorecard
 - Supervisors leading the Birth Afterthoughts service
 - Supervisors establishing a pathway for women with learning disabilities.
 - An All-Party Parliamentary Group on Maternity 2009 award in relation to teenagers
 - Preceptorship packages
 - RCM award nomination for Home Birth Team
 - The LSA standard for consideration to become a SoM (that each prospective student has a minimum nominations from 15 practising midwives)
- At the commencement of each PSOM course there is a good representation of student SoM's from across all pay bands.
- There has been an increase in the number of supervisors of midwives from 162 (March 2010) to 172 (Nov 2010). Waiting lists exist in certain Trusts of midwives seeking to become SoM's.
- Close working relationships between LSA and HEI's which offer pre-registration programmes; a SoM always sits on HEI fitness to practise panels
- Student midwives are introduced to SoM's early in their programmes and SoM's are involved in various aspects of educational delivery from curriculum planning to assisting with practice assessments'.
- Each cohort of students has a named SoM and in some Trusts the SoM's audit case notes for students who are case-holders.
- Eight Midwifery lecturers are also SoM's
- Comprehensive systems demonstrated that there was close monitoring of Sign off mentors
- Testimonials were heard from two midwives who underwent supervised practice; they each attest to the fact that they received excellent support from the LSAMO. Both confirm that despite the emotional burden, they each benefitted enormously from undergoing the supervised practice programme and one plans to incorporate her experience as a reflective session for midwives in practice

- Service users are actively involved in the production of the LSA annual reports; and the profile of supervision is high in some Trusts.

Challenges for the LSA:

- Remuneration packages and protected time for Supervisory activity varies across the Trusts; although time is identified and agreed, due to service demands some SoM's are undertaking some of this activity in their own time.
- Ratio of midwives to SoM's has improved across the LSA; however there are instances where some SoM's hold case loads greater than 15.
- To raise the profile of the LSA annual report amongst midwives
- To raise the profile of the activity of the SoM's amongst midwives
- Annual report is presented at Board level by a SoM, it is not clear if there is a distinction between the role of SoM and Head of Midwifery when the report is presented by a midwife who occupies dual roles.
- To continue to raise the profile of Supervision with service users by encouraging more service users to be involved in annual reviews both at a local and SHA level, ensuring that there is training, support and succession planning. Development of this role could both encourage user involvement in MSLCs and increase women's knowledge of supervision and how, why and when a SOM can be accessed.

5 Recommendations

We conclude that the East Midlands LSA is carrying out its statutory functions having met all of the 54 standards set by the NMC.

There are no recommendations in relation to meeting the NMC standards.

Recommendations to the LSA to support continued development

The LSA is recommended to:

- Ensure that the LSA function remains intact and able to move forward following the planned changes. Definitive leadership from the LSAMO will be required and support should be sought from the NMC to ensure that the legal framework which is supervision is in no way compromised
- The current LSAMO also functions as Maternity Lead for the SHA, thus increasing her workload; whilst this is being managed there is recognition that this duality of role is unsustainable in the long-term and assurances were given

that this has been appraised. A plan to address this within the new hosting organisation needs to be agreed.

- There appears to be a time lapse [in one case six months] from the annual LSA audit reports reaching the SoM's and / or the Trusts Boards. Whilst it is acknowledged that verbal feedback is given at the time, timely written reports are also required.
- To retain and share the many examples of good practise which exist throughout the LSA, especially in the context of organisational change.
- To ensure that the role of LSAMO is retained as a clear and separate function within any new organisational structure.
- The LSA must strengthen its efforts to achieve a clearer understanding across the LSA in respect of the developmental programme guidelines.

Rule 11 – Eligibility for appointment as a SoM [p. 21]

- To share good practice with other LSA's in respect of student SoM nomination standard/requirements.

Rule 12 – The Supervision of Midwives [p.23]

- To support SoM's within each Trust to review the information contained on their website re: the role of the SoM and to update this.
- To ensure that the SoM's get protected time if this is not occurring then the SoM's must have a clear pathway to alert the LSA.
- To emphasise to all stakeholders the level of 'goodwill' activity undertaken by SoM's and to promote the introduction of appropriate remuneration packages.
- To raise the profile of the activity of the SoM's amongst midwives.
- To raise the profile of the activity of Statutory Supervision among Service Users.
- To continue to monitor and strive to achieve the 1:15 SoM/Midwife ratio across the LSA
- To clarify the framework for academic assessment of a written piece of work for those midwives undertaking developmental programmes.

Rule 16 – The Annual Report

- To raise the profile of the LSA annual report amongst midwives
- LSAMO to support SoM's to present the Annual Reports at Board level in their own right as SoM's.

6 Conclusion

The review team would like to highly commend the LSA team for all the hard work undertaken to ensure that all aspects of the review ran smoothly.

The team was impressed with the level of appreciation demonstrated by all stakeholders for the role of supervisor of midwives and strongly commends the LSA team for raising and maintaining this strong profile. In particular the review team noted the high praise afforded the LSAMO who in the discharge of duties has demonstrated excellent leadership.

There were many examples of good supervisory practice demonstrated and it was evident that supervision is valued and respected both within the midwifery profession and externally in Trusts and the SHA.

The conclusions and recommendations herein are based on the documentary and verbal evidence presented at each stage of the review.

The review team can conclude that there are no public protection issues relating to statutory supervision of midwifery practice that require immediate attention.

The East Midlands LSA meets all the standards set out by the NMC.

Certain themes were identified in the review and form the basis of the recommendations; the LSA are required to draw up an action plan containing specific targets for the actions to be achieved. It is expected that the LSA will implement the actions and have processes in place to monitor and review the outcomes of the report.

Actions concerning the recommendations should be detailed in the LSA annual report to the NMC.

This report will be published on the NMC website.

7 Evidence of standards being met or unmet

Rule 4 – Notifications by local supervising authority

Local supervising authority standards: In order to meet the statutory requirements for the supervision of midwives, a local supervising authority will:

Standard	Judgement	Evidence Source
1.1 publish annually the name and address of the person to whom the notice must be sent	Standard met,	Annual report LSA circular Webpage Policy documents
1.2 publish annually the date by which it must receive intention to practise forms from midwives in its area	Standard met	Annual report Circulars Webpage Policy documents
1.3 ensure accurate completion and timely delivery of intention to practise data to the NMC by 20 April each year	Standard met	Verified with LSAMO Receipt of uploads to NMC records Evidence of use of electronic database
1.4 ensure intention to practise notifications, given after the annual submission, are delivered to the NMC by the twentieth of each month.	Standard met	Evidence seen of use of electronic database Verbal account from LSAMO Receipt of uploads to NMC records

Rule 4 – Notifications by local supervising authority

Local supervising authority standards: In order to meet the statutory requirements for the supervision of midwives, a local supervising authority will:

Standard	Judgement	Evidence Source
Review team commentary All standards met		
Recommendations for rule 4 No recommendations		

Rule 5 – Suspension from practice by a local supervising authority

Local supervising authority standards: To demonstrate there are mechanisms for the notification and investigation of allegations of a midwife's impaired fitness to practise, a local supervising authority will:

Standard	Judgement	Evidence source
2.1 publish how it will investigate any alleged impairment of a midwife's fitness to practise	Standard met	Annual report Webpage Policy documents Verified with midwives Guideline seen
2.2 publish how it will determine whether or not to suspend a midwife from practice	Standard met	Guideline I from LSAMO UK forum
2.3 publish the process for appeal against any decision	Standard met	Publication seen
2.4 ensure that midwives are informed in writing of the outcome of any investigation by a local supervising authority.	Standard met	Guidelines seen Correspondence Verified with midwife
Review team commentary		
None		
Recommendations for rule 5		
Standard met		

Rule 9 – Records

Local supervising authority standards: To ensure the safe preservation of records transferred to it in accordance with the midwives rules, a local supervising authority will:

Standard	Judgement	Evidence source
3.1 publish local procedures for the transfer of midwifery records from self-employed midwives	Standard met	Guideline H from LSAMO UK forum There are 5 independent midwives who practise regularly in the LSA although evidence was not available to confirm how familiar they are with the policy
3.2 agree local systems to ensure supervisors of midwives maintain records of their supervisory activity	Standard met	Activity form completed by each supervisor documenting time spent on supervisory activities given to HoM on monthly basis and to LSAMO for annual audit
3.3 ensure supervisors of midwives records, relating to the statutory supervision of midwives, are kept for a minimum of seven years	Standard met	Evidence seen – file retention policy / audit criteria
3.4 arrange for supervision records relating to an investigation of a clinical incident to be kept for a minimum of 25 years	Standard met	Retention policy Verified by SoM's

Rule 9 – Records

Local supervising authority standards: To ensure the safe preservation of records transferred to it in accordance with the midwives rules, a local supervising authority will:

Standard	Judgement	Evidence source
3.5 publish local procedures for retention and transfer of records relating to statutory supervision.	Standard met	Guideline B seen
Review team commentary None		
Recommendations for rule 9 None		

Rule 11 – Eligibility for appointment as a supervisor of midwives

Local supervising authority standard: In order to ensure that supervisors of midwives meet the requirements of Rule 11 a local supervising authority will:

Standard	Judgement	Evidence source
4.1 publish their policy for the appointment of any new supervisor of midwives in their area	Standard met	Letter congratulations successful completion of course Letter confirming appointed as SoM Certificate confirming appointment as SoM Knowledge of policy confirmed by SoM's Letter outlining SoM preceptor programme?
4.2 maintain a current list of supervisors of midwives	Standard met	Evidence seen Verified with LSAMO and SoM's
4.3 demonstrate a commitment to providing continuing professional development and updating for all supervisors of midwives for a minimum of 15 hours in each registration period.	Standard met	Evidence seen such as SoM profile documentation Course documentation Database detailing 6 hours per year / per SoM CPD activity

Rule 11 – Eligibility for appointment as a supervisor of midwives

Local supervising authority standard: In order to ensure that supervisors of midwives meet the requirements of Rule 11 a local supervising authority will:

Standard	Judgement	Evidence source
<p>Review team commentary</p> <p>The LSAMO in partnership with SoM'S in the local Trusts throughout the LSA has invested much time and effort into raising the profile of both Supervision and the role of the SoM. This has led to a waiting list of those wanting to undertake the preparation course in some Trusts.</p> <p>It is highly commendable that each potential student SoM has to be nominated and supported by a minimum of 15 midwives from practice</p>		
<p>Recommendations for rule 11</p> <p>To share good practice and to maintain interest by ensuring that SoM's demonstrate effective leadership</p>		

Rule 12 – The supervision of midwives

Local supervising authority standard: To ensure that a local framework exists to provide equitable, effective supervision for all midwives working within the local supervising authority, and that a supervisor of midwives is accessible at all times a local supervising authority will:

Standard	Judgement	Evidence source
5.1 publish the local mechanism for confirming any midwife's eligibility to practise	Standard met	Guideline J seen
5.2 implement the NMC's rules and standards for supervision of midwives	Standard met	Standards for LSA audit of Trusts
5.3 ensure that the supervisor of midwives to midwives ratio reflects local need and circumstances (will not normally exceed 1:15)	Standard met	Evidence of ratios as at November 2010
5.4 set up systems to facilitate communication links between and across local supervising authority boundaries	Standard met	LSAMO strategic planning evidence seen East Midlands National LSA conference
5.5 enable timely distribution of information to all supervisors of midwives	Standard met	East Midland LSA Newsletter

Rule 12 – The supervision of midwives

Local supervising authority standard: To ensure that a local framework exists to provide equitable, effective supervision for all midwives working within the local supervising authority, and that a supervisor of midwives is accessible at all times a local supervising authority will:

Standard	Judgement	Evidence source
<p>5.6 provide a direct communication link, which may be electronic, between each supervisor of midwives and the local supervising authority midwifery officer</p>	<p>Standard met</p>	<p>Email addresses for SoMs Contact list seen</p>
<p>5.7 provide for the local supervising authority midwifery officer to have regular meetings with supervisors of midwives to give support and agree strategies for developing key areas of practice</p>	<p>Standard met</p>	<p>Minutes from contact supervisors forum seen Minutes from Guideline meeting seen SoM forum / Network days LSA conference SoM's have direct access to LSAMO</p>
<p>5.8 monitor the provision of protected time and administrative support for supervisors of midwives</p>	<p>Standard met</p>	<p>Balanced scorecard Annual audits / reports National LSA standards Feedback from SoM's</p>

Rule 12 – The supervision of midwives

Local supervising authority standard: To ensure that a local framework exists to provide equitable, effective supervision for all midwives working within the local supervising authority, and that a supervisor of midwives is accessible at all times a local supervising authority will:

Standard	Judgement	Evidence source
5.9 promote woman-centred, evidenced-based midwifery practice	Standard met	Evidence in LSA audit reports Proactive steps taken by SoM's in certain Trusts to reduce the LSCS rate and to promote normal and home birth rates
5.10 ensure that supervisors of midwives maintain accurate data and records of all their supervisory activities and meetings with the midwives they supervise	Standard met	Activity form for supervision seen Verbal evidence from the SoM's Local supervision annual reports
5.11 supervisors of midwives are available to offer guidance and support to women accessing maternity services	Standard met	Home birth documentation signed off by SoM Trust Website advertise information re: SoM Poster explaining the role of the SoM
5.12 supervisors of midwives give advice and guidance regarding women-centred care and promote evidence-based midwifery practice	Standard met	Minutes of SoM meetings with service users Midwife Audit to Questionnaire re: LSA effectiveness

Rule 12 – The supervision of midwives

Local supervising authority standard: To ensure that a local framework exists to provide equitable, effective supervision for all midwives working within the local supervising authority, and that a supervisor of midwives is accessible at all times a local supervising authority will:

Standard	Judgement	Evidence source
<p>5.13 supervisors of midwives are directly accountable to the local supervising authority for all matters relating to the statutory supervision of midwives</p>	<p>Standard met</p>	<p>Guideline seen Each supervisor meets the LSAMO on completion of the course Certificate of appointment clearly identifies this accountability</p>
<p>5.14 supervisors of midwives provide professional leadership</p>	<p>Standard met</p>	<p>23 SoM's undertaking leadership training Demonstrate leadership in relation to projects In audits each holds a section re: projects Certificates which are issued to the SoM's / this is displayed on the labour notice board in at least one maternity unit within the region and has attracted attention from the multidisciplinary team Evidence of audit of cold babies (Pilgrim) obesity project (Pilgrim) leading disabilities pathway and the inclusion project Leicester Birth afterthoughts</p>
<p>5.15 supervisors of midwives are approachable and accessible to midwives to support them in their practice.</p>	<p>Standard met</p>	<p>Questionnaire Responses back from midwives – in audit folder</p>

Rule 12 – The supervision of midwives

Local supervising authority standard: To ensure that a local framework exists to provide equitable, effective supervision for all midwives working within the local supervising authority, and that a supervisor of midwives is accessible at all times a local supervising authority will:

Standard	Judgement	Evidence source
<p>Review team commentary</p> <p>Not all Trust websites contained information re: the role of the SoM; it is therefore uncertain how service users would be made aware of the role of the SoM</p>		
<p>Recommendations for rule 12</p> <p>Each Trust is advised to review the information contained on their website re: the role of the SoM and to update this. There is an inconsistent picture of some SoM's getting protected time and remuneration, others only get the time. The LSA must ensure that the SoM's get protected time if this is not occurring then the SoM'S must have a clear pathway to alert the LSA</p>		

Rule 13 – The local supervising authority midwifery officer

Local supervising authority standards: In order to discharge the local supervising authority supervisory function in its area through the local supervising authority midwifery officer, the local supervising authority will:

Standard	Judgement	Evidence source
6.1 use the NMC core criteria and person specification when appointing a local supervising authority midwifery officer	Standard met	Job description seen NMC core criteria used
6.2 involve a NMC nominated and appropriately experienced midwife in the selection and appointment process	Standard met	Evidence provided in the letter of invitation
6.3 manage the performance of the appointed local supervising authority midwifery officer	Standard met	SHA systems in place regarding employment and management of the East Midlands LSAMO
6.4 provide designated time and administrative support for a local supervising authority midwifery officer to discharge the statutory supervisory function	Standard met	LSA Midwife and LSA PA

Rule 13 – The local supervising authority midwifery officer

Local supervising authority standards: In order to discharge the local supervising authority supervisory function in its area through the local supervising authority midwifery officer, the local supervising authority will:

Standard	Judgement	Evidence source
<p>6.5 arrange for the local supervising authority midwifery officer to complete an annual audit of the practice and supervision of midwives within its area to ensure the requirements of the NMC are being met.</p>	<p>Standard met</p>	<p>All units have an annual audit visit and subsequent report</p>
<p>Review team commentary</p> <p>There was clear evidence that User input was gained for the LSA audits and this practice is to be commended</p>		
<p>Recommendations Rule 13</p> <p>None</p>		

Rule 15 – Publication of local supervising authority procedures

Local supervising authority standard: To ensure incidents that cause serious concern in its area relating to maternity care or midwifery practice are notified to the local supervising authority midwifery officer, a local supervising authority will:

Standard	Judgement	Evidence source
7.1 develop mechanisms with NHS authorities and private sector employers to ensure that a local supervising authority midwifery officer is notified of all such incidents	Standard met	East Midland Serious Incident Policy
7.2 publish the investigative procedure	Standard met	Guideline L
7.3 liaise with key stakeholders to enhance clinical governance systems	Standard met	The East Midlands LSA audits Close partnership with Trust clinical governance / risk management teams and SoM's Clear escalation pathways to LSAMO
7.4 publish the process for the notification and management of complaints against any: - local supervising authority midwifery officer - supervisor of midwives	Standard met	Guideline G

Rule 15 – Publication of local supervising authority procedures

Local supervising authority standard: To ensure incidents that cause serious concern in its area relating to maternity care or midwifery practice are notified to the local supervising authority midwifery officer, a local supervising authority will:

Standard	Judgement	Evidence source
<p>7.5 publish the process for removing from appointment a:</p> <ul style="list-style-type: none"> - supervisor of midwives - local supervising authority midwifery officer 	Standard met	<p>Re: LSAMO – evidence seen</p> <p>Re: SoM – Evidence seen</p>
<p>7.6 publish the process for appeal against the decision to remove:</p> <ul style="list-style-type: none"> - an officer - a supervisor of midwives - a local supervising authority midwifery officer 	Standard met	National Guideline
<p>7.7 ensure that the following are informed of the outcome of any local supervising authority investigation of poor performance, following its completion:</p> <ul style="list-style-type: none"> - local supervising authority midwifery officer - supervisor of midwives. 	Standard met	National Guideline

Rule 15 – Publication of local supervising authority procedures

Local supervising authority standard: To ensure incidents that cause serious concern in its area relating to maternity care or midwifery practice are notified to the local supervising authority midwifery officer, a local supervising authority will:

Standard	Judgement	Evidence source
Review team commentary None		
Recommendations for rule 15 None		

Rule 16 – Annual report

Local supervising authority standard: Written, annual local supervising authority report will reach the Midwifery Committee of the NMC, in a form agreed by the Nursing and Midwifery Council by 1 June each year. (Note: This rule has been amended and the deadline is now the end of September each year.)

Each local supervising authority will ensure their report is made available to the public. The report will include but not necessarily be limited to:

Standard	Judgement	Evidence source
8.1 numbers of supervisor of midwives appointments, resignations and removals	Standard met	The East Midlands database Verification by the NMC Detailed in annual reports
8.2 details of how midwives are provided with continuous access to a supervisor of midwives	Standard met	Verified by midwives Detailed in Guidelines
8.3 details of how the practice of midwifery is supervised	Standard met	Verbal evidence submitted by LSAMO and SoM'S LSA audit report
8.4 evidence that service users have been involved in monitoring supervision of midwives and assisting the local supervising authority midwifery officer with the annual audits	Standard met	LSA Annual report

Rule 16 – Annual report

Local supervising authority standard: Written, annual local supervising authority report will reach the Midwifery Committee of the NMC, in a form agreed by the Nursing and Midwifery Council by 1 June each year. (Note: This rule has been amended and the deadline is now the end of September each year.)

Each local supervising authority will ensure their report is made available to the public. The report will include but not necessarily be limited to:

Standard	Judgement	Evidence source
8.5 evidence of engagement with higher education institutions in relation to supervisory input into midwifery education	Standard met	LSAMO meets with LME's SoM's allocated to student cohorts SoM's involved in student fitness to practice hearings Eight Midwifery Lecturers are also SoM's
8.6 details of any new policies related to the supervision of midwives	Standard met	Detailed in annual report
8.7 evidence of developing trends affecting midwifery practice in the local supervising authority	Standard met	Detailed in annual report Verified by SoM's / Heads of Midwifery / Midwives
8.8 details of the number of complaints regarding the discharge of the supervisory function	Standard met	No complaints made Details of how to complain are published on the East Midlands website

Rule 16 – Annual report

Local supervising authority standard: Written, annual local supervising authority report will reach the Midwifery Committee of the NMC, in a form agreed by the Nursing and Midwifery Council by 1 June each year. (Note: This rule has been amended and the deadline is now the end of September each year.)

Each local supervising authority will ensure their report is made available to the public. The report will include but not necessarily be limited to:

Standard	Judgement	Evidence source
<p>8.9 reports on all local supervising authority investigations undertaken during the year</p>	<p>Standard met</p>	<p>The annual supervisory authority report was completed and submitted in a timely manner.</p> <p>The annual report is available to the public on the website.</p> <p>Evidence of policy verified</p>
<p>Review team commentary</p> <p>In 2009/10 there were 32 formal supervisory investigations involving 43 midwives. This resulted in 3 episodes of supervised practice and 25 episodes of developmental support. The review team detected some confusion in relation to those on developmental programmes having to undertake a written assessment. It was not clear if the developmental support tool was being used appropriately. It is noted that the developmental support tool has only recently been introduced.)</p>		
<p>Recommendations for rule 5</p> <p>Whilst the Review team recognise that the LSA has provided an Investigation Workshop and that the majority of Supervisors have attended, the LSA must also strengthen its efforts to achieve a clearer understanding across the LSA in respect of the best Developmental Support tool</p>		

The local supervising authority

Local supervising authorities (LSAs) are organisations that hold statutory roles and responsibilities for supporting and monitoring the quality of midwifery practice through the mechanism of statutory supervision of midwives. The primary responsibility of an LSA is to safeguard the health and wellbeing of women and their families.

LSAs sit within an organisation such as an NHS authority. This varies in each country of the United Kingdom, and in:

- England the LSA is the Strategic Health Authority
- Northern Ireland the LSA is the Public Health Agency
- Scotland the LSA is the Health Boards
- Wales the LSA is Healthcare Inspectorate Wales.

The chief executive of the organisation is responsible for the function of the LSA.

Each LSA must appoint a practising midwife to the role of LSAMO. The statutory requirements for this person and role are also set by the NMC which are available at www.nmc-uk.org. The LSAMO is employed by the LSA to put its responsibilities into practice and this function cannot be delegated to another person or role. The LSAMO has a pivotal role in clinical governance by ensuring that the standards for supervision of midwives and midwifery practice meet the requirements set by the NMC. Apart from the NMC the LSA is the only organisation that can suspend a midwife from practice and can only do so pending referral to the NMC with allegations of misconduct or persistent lack of competence.

Supervisors of midwives (SoMs) are experienced midwives who have undergone additional education and training in the knowledge and skills needed to supervise midwives. SoMs can only be appointed by a LSA, not by an employer, and as such are acting as an independent monitor of the safety of midwives' practice and the environment of care provided by the maternity services. By appointing SoMs the LSA ensures that support, advice and guidance are available for midwives and women 24-hours a day, to increase public protection. SoMs are accountable to the LSA for all their supervisory activities and their role is to protect the public by enabling and empowering midwives to practise safely and effectively. They also have a responsibility to bring to the attention of the LSA any practice or service issues that might undermine or jeopardise midwives' ability to care for women and their babies safely.

Every midwife practising in the UK is required to have a named SoM who is from the LSA in which she practises midwifery most each year. This LSA is described as the midwife's main area of practice and every midwife is required to notify their intention

to practise (ItP) to this LSA each practice year. A practice year runs from the 1 April to 31 March.

Profile of the East Midlands LSA

The East Midlands LSA covers the five counties of Northamptonshire, Derbyshire, Nottinghamshire, Lincolnshire, Leicestershire and Rutland serving a population of 4.36 million approximately. The aim of the LSA is to ensure that the care provided by registered midwives is at the standard expected of a midwife on the NMC register.



Demographics

Within the East Midlands there is a combination of urban and rural settings, varying from large cities to remote rural locations. The population of the East Midlands varies from densely (Leicester city, Nottingham city and Derby city) to sparsely populated areas (Lincolnshire and the Peak district of Derbyshire).

Demographics: 51% women, 49% men; 19% school age, 62% working age and 19% of pensionable age; 6.5% from a black or minority ethnic background.

Average life expectancy: men 77, women 81.

Overall general health and life expectancy is improving in the East Midlands and is close to the average for England as a whole. However there are large inequalities within the region with the health of those living in more deprived areas generally worse than those living in more affluent areas. Lifestyle indicators are similar to the

average for England; 1 in 4 adults smoke, more than 1 in 6 binge drink and only 12% meet the recommended level of physical activity. One in four adults in the East Midlands are classified as obese, which is higher than the national average. The rate of road injuries and resulting deaths is higher than the national average.

Maternity Services

During 2009/10 there were 53,141 births as determined by the number of neonatal blood spots. Of these 49,237 women delivered within the East Midlands maternity services. This differential of approximately 4,000 is accounted for by women who deliver in units that are in an alternate LSA. This is most pronounced in Derby and Leicester where there are neighbouring units closer to the women that lie in another county, eg Burton in Staffordshire. Midwives provide antenatal and postnatal care, however Intrapartum care is provided by an alternative provider. It is believed that this is a choice factor influenced by geography in the majority of cases.

As stated above the total number of babies born in the East Midlands in 2009/2010 was 49,153 compared to 48,135 in 2008/2009. This is an increase of 2%.

There are 11 Trusts providing maternity services on 17 sites with community provision of services across the five counties.

The NHS Trusts providing maternity services in the East Midlands are:

- Chesterfield Royal Hospital NHS Foundation Trust
 - Darley Birth Centre
- Derby Hospitals NHS Foundation Trust
- Sherwood Forest NHS Foundation Trust
- Nottingham University Hospitals NHS Trust
 - Queens Medical Centre Campus
 - Nottingham City Campus
- Nottingham City Primary Care Trust
- Northampton General Hospital NHS Trust
- United Lincolnshire Hospitals NHS Trust
 - Lincoln County
 - Pilgrim Hospital, Boston
 - Grantham Maternity Unit
- University Hospitals of Leicestershire
 - Leicester General Hospital
 - Leicester Royal Infirmary
 - Melton Mowbray Birth Unit
- Kettering General Hospital NHS Foundation Trust
- Bassetlaw Hospital (part of Doncaster and Bassetlaw NHS Foundation Trust)

Corbar Maternity Unit at Buxton
(Stockport Hospitals NHS Foundation
Trust)

Two of these services are amalgamated with larger Trusts outside of the East Midlands LSA; Corbar in Buxton is linked with Stockport in the North West LSA and Bassetlaw in Worksop is linked with Doncaster in the Yorkshire and Humberside LSA. The Corbar Maternity Unit is a small Midwifery led unit, which is managed from the Stockport Hospitals NHS Foundation Trust which lies within the North West LSA. To ensure that the process of supervision is not disjointed, a Service Level Agreement has been drawn up with the North West LSA to provide LSA services to this area. This has led to a simplified process with clear lines of communication and accountability for the midwives. Therefore Corbar while geographically within the East Midlands is encompassed within the North West LSA.

The LSA team

Mr Kevin Orford as the Chief Executive of the SHA has the responsibility for the discharge of the statutory function of the Local Supervising Authority (LSA). To enable this Shirley Smith was appointed in 2005 as the LSA Midwifery Officer (LSAMO). The managerial responsibility for this position is held by Professor Rachel Munton – Interim Director of Nursing. In addition to the LSAMO there is a LSA PA Lisa Wilshere and a LSA Midwife Biddy Saunders. The latter position became full time in September 2009 and is considered to be a development post on a one year secondment (this has recently been extended to 18months). The LSA PA position is a one year contract, which has been renewed for the past three years.

The LSA team is hosted within the SHA and is seen as an integral part of the Nursing and patient safety team, whilst recognising the distinction between the LSA and the SHA functions.

The supervisors form a vital part of the LSA team, there were 162 appointed supervisors in the East Midlands as of the 1st April 2010 for 2092 midwives a ratio of 1:13. It is refreshing to note that there are no difficulties attracting midwives to the preparation of supervisors course within the east Midlands, some units have a waiting list of candidates. In 2009/10 there were twice as many appointments of supervisors as retirements/resignations.

The NMC and its framework for reviewing LSAs

We are the nursing and midwifery regulator for England, Wales, Scotland, Northern Ireland and the Islands.

- We exist to safeguard the health and wellbeing of the public.
- 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.

The NMC sets the rules and standards for the function of the LSA 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, available at www.nmc-uk.org. The purpose of the review is to verify that the LSAs are meeting the required standards. Any concerns raised from the review that may impact on safeguarding the health and wellbeing of women and their families will be highlighted. Recommendations for action will be given.

The review should 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).

As part of the review, the review team will assess:

- the function of the local supervising authority
- the function of statutory supervision of midwives
- information from the LSA profile and self assessment form
- concerns which may affect protection of the women, babies and their families
- concerns in relation to the learning environment of student midwives.

The review team should:

- verify that the midwives rules and standards are being met
- explore key themes identified by the NMC

- visit one or more maternity services if deemed appropriate due to the reasons for the review
- meet with stakeholder groups including the LSAMO, midwives, supervisors of midwives, users of maternity services, lay organisations and representatives, directors and heads of midwifery, directors of nursing, chief executive of the Health Board and LSA
- observe evidence of examples of best practice within the function of the LSA
- explore any other areas of concern or interest during the course of their visit.

The review team

Name: Yvonne Bronsky
Role in review team: LSAMO
Other roles: LSAMO South East and West of Scotland Regions

Name: Selina Nylander
Role in review team: Chair
Other roles: Doula UK

Name: Marcia M Ogunji
Role in review team: Registrant reviewer / Report Author
Other roles: Senior Lecturer in Midwifery Practice / Three-Year Degree Programme
Manager – University of Bedfordshire

Name: Helen Pearce
Role in review team: NMC representative
Other roles: NMC Midwifery Adviser

Key people met during the review

Chief Executive

Interim Director of Nursing

Director of Patient Care

Assistant Director of Patient Care

PCT Chief Executives

PCT Directors of Nursing

Maternity Commissioners

Heads of Midwifery

Clinical Directors

Maternity General Managers

SHA Patient Safety Team

Supervisor of Midwives

Student Supervisor of Midwives

Midwives

Student Midwives

LSA Midwifery Officer

LSA Midwife

LSA service user representatives

Maternity service liaison members

Lead Midwives for Education

Midwifery Educationalists

Preparation for Supervision of Midwives programme leaders

Members of the East Midlands and Yorkshire and the Humber LSA partnership meeting

**NMC Review of East Midlands
Local Supervising Authority**

Day 1 - Wednesday 24th November 2010

Location: Sir Colin Campbell Building,

University of Nottingham Innovation Park (UNIP), Triumph Road,

Nottingham NG7 2TU

Rooms B02 & B03

Programme

Room	Time	Activity
B03	09.00	Welcome, arrival and coffee Kevin Orford Chief Executive, Professor Rachel Munton Director of Patient Care, Siobhan Heafield Assistant Director of Patient Care
B03	09.15	Introduction from the NMC review team to the LSA and guests
B03	09.45	LSA presentation to the NMC Review Team and guests
	10.15	Refreshment break
B03	10.30	Review team meeting with Trust and PCT Chief Executives, Trust and PCT Directors of Nursing, and Maternity Commissioners
B03	11.30	Review team meeting with Heads of Midwifery, Clinical Directors and Maternity General Managers
B03	12.00	Review team meeting with Heads of Midwifery
B03	12.30	Review team meeting with wider SHA team, Patient Safety Team, Linda Houldcroft, Liz Bowsher, Julie Bardil, Jane Appleby, Sue Drydon, Siobhan Heafield, Wendy Martin, Fiona Illingworth
B03	13.00	Lunch – Break out room for in camera session B02
B03	13.45	Review team meeting with Supervisors of Midwives – including Contact Supervisors, Mentors for the Preparation of Supervisors course

B03	14.45	Review team meeting with Midwives (includes sign off mentors), self employed Midwives.
	15.30	Refreshment break and in camera session B02
B03	16.00	Review team meeting with the LSA Midwifery Officer and LSA Team
	17.00	End of day 1

All in camera sessions in room B02

NMC Review of East Midlands
Local Supervising Authority
Day 2 - Thursday 25th November 2010

Location: Sir Colin Campbell Building,

University of Nottingham Innovation Park (UNIP), Triumph Road,

Nottingham NG7 2TU

Rooms B02 & B03

Room	Time	Activity
B03	09.00	Welcome, arrival and coffee - Professor Rachel Munton, Siobhan Heafield, The LSA Team
B03	09.15	Overview of Day 1 NMC Review team and the LSA
B03	09.30	Review team meeting with Student Midwives NMC Team Representatives to visit Maternity Unit.
B03	10.00	Review team meeting with LSA service user representatives, service users and Maternity Services Liaison members
	11.00	Refreshment break and in camera session
B03	11.15	Review team meeting with LMEs, Midwifery educationalists
	12.00	In camera session
	12.30	Lunch
B03	13.00	Review team meeting with Preparation for the Supervision of Midwives programme leaders and members of the East Midlands and Yorkshire and the Humber LSA Partnership meeting
B03	13.30	Review team meeting with Student Supervisors
B03	14.00	Issues of clarity with LSA Midwifery Officer
	15.00	Refreshment break and in camera session
B03	15.45	Feedback from NMC Review team to the LSA
	16.00	Finish of NMC Review

All in camera sessions in room B02

Evidence viewed

- www.eastmidlands.nhs.uk
- www.midiwfe2.org
- LSA self assessment
- Risk assessment
- NGH SOM annual report 2009-2010
- Sherwood 2009-2010 annual report
- Derby annual report 2010
- Context information
- LSA annual report 2009-2010
- User group reports
- DMU annual report 2008-2009
- Northampton annual report 2009-2010
- NUH annual report 2008-2009
- LSA audit report
- LSA policies