



**Local Supervising Authority
Ayrshire and Arran
1 APRIL 2008- 31 MARCH 2009**

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Content

Section		Page
	Executive summary	3
1	Introduction	4
2	Each local supervising authority will ensure their report is made available to the public	6
3	Numbers of supervisor of midwives appointments, resignations and removals	7
4	Details of how midwives are provided with continuous access to a supervisor of midwives	8
5	Details of how the practice of midwives is supervised	10
6	Evidence that service users have been involved in monitoring supervision of midwives and assisting the local supervising authority midwifery officer with the annual audits	15
7	Evidence of engagement with higher education institutions in relation to supervisory input into midwifery education	16
8	Details of any new policies related to the supervision of midwives	18
9	Evidence of developing trends affecting midwifery practice in the local supervising authority	19
10	Details of the number of complaints regarding the discharge of the supervisory function	21
11	Reports on all local supervising authority investigations undertaken during the year	21
12	Conclusion	23
	References	
	Appendices	

Local Supervising Authority Ayrshire and Arran

Executive Summary

The Local Supervising Authority (LSA) is responsible for ensuring that the statutory supervision of all midwives and midwifery practice as set out in the Nursing and Midwifery Order (2001) and the Nursing and Midwifery Council Midwives rules and standards (NMC 2004) is carried out to a satisfactory standard for all midwives working within its geographical boundaries.

This report follows the guidance set out by the Nursing and Midwifery Council Guidance for the LSA annual report submission to the NMC for the practice year 1 April 2008-31 March 2009.

The principle function of the LSA is to ensure the safety of the public through the effective supervision of midwifery practice and this is achieved through promoting best practice, preventing poor practice and intervening in unacceptable practice (NMC 2006).

There are 54 standards contained within the midwives rules and the role of the Local Supervising Midwifery Officer (LSAMO) is to ensure the standards are met. A self assessment tool is undertaken within the LSA on an annual basis and any actions required are incorporated into an action plan, which the supervisors of midwives review on a regular basis.

Each midwife is required to have a supervisor of midwives and supervisors of midwives are appointed to the LSA. As set out in the NMC (2004) Midwives rules and standards the LSAMO plays a pivotal role in clinical governance by ensuring the standard of supervision of midwifery practice meets that required by the NMC.

This report provides details on how the statutory requirements are being met in NHS Ayrshire and Arran and where challenges or risks to the function of statutory supervision of midwifery have been identified. It also describes what actions are being taken to ensure that there is a safe standard of care for the public.

Local Supervising Authority Ayrshire and Arran

1.0 Introduction

This report covers the reporting year 1st April 2008-31st March 2009. It has been produced to meet the requirements of Rule 16 of the NMC (2004) Midwives rules and standards in the Local Supervising Authority (LSA) of Ayrshire and Arran. Articles 42 and 43 of the Nursing & Midwifery Order 2001 require that the practice of midwives be supervised. The purpose of the statutory supervision of midwives is to protect the public and to support and promote good midwifery practice. The LSA is responsible for ensuring that statutory supervision of midwifery practice is exercised to a satisfactory standard and this is delegated to the LSAMO.

The LSA sits within the NHS Board Ayrshire and Arran. The Chief Executive and LSAMO details are as follows:-

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1.1 Standards

In the NMC (2004) Midwives rules and standards there are 54 Standards to be met by LSAs and supervisors of midwives. A self assessment of the 54 standards is undertaken annually. Where standards are not met or only partially met action plans are developed in conjunction with supervisors of midwives to achieve the standard.

1.2 This is the third report since the inception of a fulltime LSAMO in the West of Scotland. There are four LSAs in the West of Scotland. Each Chief Executive in the West of Scotland requires an annual report to enable them to have assurances that there is a robust framework of statutory supervision of midwifery practice within its geographical boundaries. Therefore this report aims to demonstrate how the standards are being met with in the LSA of NHS Ayrshire and Arran.

1.3 Over the past three years the LSAMO has made steady progress alongside the supervisors of midwives in establishing a strategic direction for supervisors of

midwives in the area. This includes the establishment of a West of Scotland Link Supervisor of Midwives Forum (WOSLSM), a process for auditing LSAs throughout the region and a system to notify serious untoward incidents to the LSA.

Supervisors of midwives are undertaking investigations when there has been a serious incident to address practice issues and identify system failures. Guidelines and policies have been reviewed and this year the LSAMO Forum UK Guidance has been adopted across the West of Scotland to ensure the standard of supervision of midwifery practice is consistent with all other areas in the UK. A website has also been established across the region in July 2009. This can be accessed on www.midwiferysupervision-woslsa.scot.nhs.uk.

Networks are now firmly established throughout the region and there is evidence of progress in achieving the targets set out in previous LSA annual reports submitted to the NMC.

1.4 NMC Risk Register

When the annual report is submitted to the NMC a risk scoring framework is used (Appendix 1) to assess non compliance with the 54 NMC standards for LSAs. This risk score is applied collectively by the NMC across the four LSAs in the West of Scotland. In the practice year 2006-2007 a risk score of 129 was applied to the West of Scotland.

The risk score has been reduced. Together with the LSAMO they have established a strategic and consistent approach to statutory supervision of midwifery across the region. The LSA has been committed to ensuring there is a robust framework for statutory supervision in place. This work was rewarded as in the year 2007-2008 a risk score of 12 (Appendix 2) was given to the West of Scotland which demonstrates the significant work Supervisors of midwives across the area have undertaken work to ensure undertaken by supervisors of midwives to ensure there is a consistent and strategic approach to statutory supervision of midwifery practice.

1.5 The risk identified by the NMC following submission of the annual report for the year 2007-8 was :-

- SOM/MW ratio above 1:20 within individual services or across the LSA

In NHS Ayrshire and Arran the ratio was 1: 19 which as specified by the NMC risk register places the LSA as at moderate risk. There has been an active recruitment strategy within the LSA over the past year and five student supervisors of midwives will commence the preparation programme in September 2009. In the past year there have been three student supervisors of midwives and one of these was appointed in July of this year.

It is anticipated that if there are no resignations that there will be ratio of 1:14 by August 2010.

1.6 Challenges identified for NHS Ayrshire and Arran in last years annual report were identified as :-

- Continue reducing identified risks by the NMC

- Continue raising the profile of supervision of midwifery practice
- Maintain the recruitment and retention strategy
- Continue to engage with service users
- Ensure West of Scotland LSAs website is live
- Ensure the framework of supervision of midwifery practice is proactive and supports midwives in their roles
- Continue developing evidence to meet the standards for supervision of midwifery practice

Progress is being steadily made to meet these challenges. Supervisors of midwives have been committed to raising the profile of supervision within the NHS Board and in encouraging other midwives to undertake the preparation programme to become a supervisor of midwives. The supervisors also strive to promote supervision of midwifery practice amongst service users and have a range of attractive posters throughout the unit. Promotion of the role of supervisor of midwives amongst service users is ongoing work and still continues to be a challenge as demonstrated again in this years LSA audit. The West of Scotland web site became live in July 2009. The supervisors of midwives show continued commitment to their role in striving to achieve a proactive framework for supervision and meeting the standards for supervision of midwifery practice.

2. Each Local Supervising Authority will ensure their report is made available to the public

This report will be distributed to

- NMC
- Each Supervisor of Midwives
- The LSA /NHS Board
- Maternity Services Provision Group.
- Clinical Governance Committee
- Any member of the public on request
- Lead Midwife for Midwifery Education
- Head of Midwifery
- Director of Nursing

A web site has also been developed for the West of Scotland LSAs and went live in July 2009. The report will be published on the website which is www.midwiferysupervision-woslsa.scot.nhs.uk.

3. Numbers of Supervisor of Midwives Appointments and Referrals

- 3.1** There are currently sixteen supervisors of midwives in NHS Ayrshire and Arran. Three hundred midwives submitted their Intention to Practise in the reporting year in the LSA. This gives a ratio of 1:19 supervisor of midwives to midwives

within the LSA which is above the NMC recommended target of 1:15. This ratio was identified as a risk in the NMC framework risk register in previous annual reports. The ratio of supervisor to midwives is deemed as a risk by the NMC and a risk score of 12 was given to the West of Scotland in relation to this risk. An alert letter was issued by the NMC based on this risk factor.

The NMC risk register key has been applied to the numbers of supervisors and midwives on 31 March 2009 this can be seen in table 1. Table 2 depicts the number of supervisors of midwives, appointments, designations and leave of absence for the year 2006-2007, 2007-2008 and display the trends over the last two years. Table 3 provides an up to date position.

Table 1 2008-2009

LSA	Number of Supervisors of midwives	Number of MWS	Appointments	Resignations	Leave of Absence	Ratio Of SOM/MW
A&A	16	300	0	0	2	1:19

Key to Risk Severity

Risk Green =Low Yellow = Moderate Red =High

Table 1 demonstrates that the ratio of supervisor to midwives in Ayrshire and Arran is 1: 21 and is moderate risk

Table 2 2006-2008

LSA	Year	Number of supervisors of midwives	Number of Midwives	Appointments	Resignations	Leave of Absence	Ratio SOM:MW
A&A	2007-2008	16	310	2	0	2	1:19
A&A	2006-07	16	310	3	1	0	1:18

Key to Risk Severity

Risk Green =Low Yellow = Moderate Red =High

Table 2 displays trends over two years which shows little variation in the ratio of supervisor to midwives over the two years

Table 3 Ratio from June 2009 and up to September 2010

Number of Midwives	Number of supervisors as of June 2009	Ratio	Number of students to commence preparation programme September 2009	Projected ratio September 2010
300	17	1:18	5	1:14

Key to Risk Severity

Risk Green =Low Yellow = Moderate Red =High

Table 3 gives a projection of trends; the ratio is now 1:18 and projected as being 1:14 by 2010

It can be seen from the tables that there has only been slight variations in the ratio over the past two years. The supervisors of midwives have been very active in the last two years in profiling the role of the supervisor of midwives in an effort to recruit midwives to take on the role of supervisor of midwives.

- 3.2** NHS Ayrshire and Arran have had difficulty recruiting supervisors of midwives. The previous LSA audits identified that midwives did not feel experienced enough or confident enough to undertake the role of supervisor of midwives. Therefore in an effort to profile the role of the supervisor of midwives, and the

eligibility of midwives to undertake the role of supervisor of midwives, the supervisors of midwives have held awareness raising sessions in midwives annualised training days. The supervisors of midwives have also encouraged midwives to nominate midwives who they think would be good supervisors of midwives. This strategy has met with some success as five midwives are due to undertake the preparation programme in September 2009. The supervisors of midwives report that being nominated by their peers has encouraged midwives to take on the role. One midwife has been appointed to the role of supervisor of midwives in July 2009 and two midwives are currently undertaking the preparation programme.

It is anticipated that if there are no further resignations there should be a ratio of 1:14 by July 2009. Active recruitment will take place in the spring of 2010 in readiness for the next preparation programme in September 2010.

3.3 There have been no removals or suspensions from the role of supervisor of midwives.

3.4 Supervisors of midwives are appointed in accordance with the LSAMO Forum UK Guidance for the selection and appointment of supervisors of midwives. Midwives either self nominate or are nominated by their peers. They are then interviewed by a panel which includes a peer, a supervisor of midwives, an educationalist and the LSAMO. If they are successful at interview they will then undertake the preparation programme to become a supervisor of midwives. Following successful completion of the course they will then be appointed as a supervisor of midwives to the LSA. When appointed to the LSA all supervisors of midwives are mentored for a minimum of three months.

4. *Details of how midwives are provided with continuous access to a supervisor of midwives*

4.1 Each midwife in the LSA NHS Ayrshire and Arran has a named supervisor of midwives. All midwives are allocated a supervisor of midwives. Midwives are sent letters asking them to choose their supervisor of midwives. However if they cannot have the supervisor of midwives of their choice for example if the preferred supervisor of midwives case load is to full, they are offered the opportunity to have another supervisor of midwives of their choice. This was evidenced in the audit process and by speaking to midwives during the LSA audit. There is also a list of all supervisors of midwives in each ward and department.

4.2 There is 24 hour access to a supervisor of midwives through an on call rota. The LSA audit identified that in both sites midwives knew their supervisor of midwives and knew how to contact a supervisor of midwives over a 24 hour period. The supervisors of midwives provided evidence of an on call rota in the audit and this was also verified by staff in focus groups.

4.3 It was identified in the LSA audit that midwives generally contacted a supervisor of midwives for advice and support usually in relation to Intrapartum care. No issues were identified in the LSA audit to indicate that there was a problem with response times between midwives and supervisors of midwives or women and

supervisors of midwives. This included Arran which is an island with midwives working in isolation from the mainland. Since the previous audit the midwifery service in Arran has amalgamated with the main service in the Ayrshire maternity unit and the midwives have become single duty registrants. They felt the change had greatly improved their role as they could now concentrate solely on their role as a midwife. They felt closer to the midwives on the main land and felt this improved communication and they felt supported in their practice as midwives. They knew how to contact a supervisor of midwives on the main land.

- 4.4** An audit tool to audit the response times from supervisors of midwives to requests from midwives has been developed. This will be used in conjunction with a survey and focus groups in the LSA audit of 2009-2010.
- 4.5** It was identified in previous LSA audits that not all midwives have been meeting with their supervisor of midwives for an annual review. Midwives have been reminded of the importance of this in the sessions run by supervisors of midwives and supervisors report that most midwives are now meeting their supervisor of midwives. Full compliance is anticipated by the LSA audit cycle in 2009-10.
- 4.6** All supervisors of midwives have a lanyard denoting that they are a supervisor of midwives. This helps to ensure they are easily identifiable to midwives and members of the public.
- 4.7** Student midwives are also allocated a supervisor of midwives from the supervisors of midwives in the University of West of Scotland. This is due to change shortly and students will be allocated supervisors of midwives from the NHS Board. During the LSA audit the student midwives could identify with the role of the supervisor of midwives generally. All students reported that if they had a problem in practice they would meet with their personal lecturer in the first instance.

5.0 *Details of how the practice of midwives is supervised*

To enable effective supervision of midwifery practice, a number of methods of communication are deployed. This ensures a consistent approach to supervision of midwifery practice across the UK and within the region. A variety of forums are held that ensure there is strategic direction for supervisors of midwives, that guidance is in place to support them in their roles and trends and themes from serious incidents can be shared to ensure lessons are learnt and practice issues are addressed in practice.

5.1 *Methods of communication with supervisors of midwives*

To facilitate effective communication each supervisor of midwives is able to contact the LSAMO by mobile or by email. The LSAMO will also meet with a supervisor of midwives if requested.

The following forums facilitate a communications network to ensure consistency in the supervision of midwifery practice:-

The NMC/LSA Strategic Reference Group

One of the main functions of this group is to assist in advising the Midwifery Committee on any proposals to make, amend or revoke rules relating to the supervision, practice and education of midwives. The LSAMO is a member of the group and attends any meetings that are held.

The Local Supervising Authority Midwifery Officer Forum UK (LSAMO Forum UK)

This forum meets every 2 months and was established to provide all the LSAMOs with support and to ensure that supervision of midwifery practice is developed and delivered in a consistent manner across the UK.

There are 16 LSAMOs throughout the UK and together they have developed a cohesive strategy for the statutory function, with shared principles and the implementation of a common approach to achieving the NMCs standards. The published strategy describes the plan of achievements for the Forum for the next three years. This document can be viewed on <http://www.midwife.org.uk/>. Through the strategy the Forum aim to ensure that midwives working in any part of the UK can expect the same standard of supervision of midwifery practice.

LSAMO meeting with Heads of Midwifery in West of Scotland

The LSAMO meets with Heads of Midwifery in the West of Scotland throughout the year to provide updates on the strategic direction of supervision of midwifery practice and to discuss any other local issues.

West of Scotland Link Supervisor of Midwives (WOSLSM) Forum

This is held every three months. Supervisors of midwives from each NHS Board, and the University of the West of Scotland (UWS) are represented on this forum. This promotes cohesiveness in the strategic approach and planning of supervision from both a clinical and educational perspective.

The forum considers national strategies and directives from the NMC, Scottish government, or other relevant bodies. Supervisory issues are reviewed and discussed and the forum is used as a platform to implement the strategic direction for supervision of midwifery practice across the West of Scotland. The forum is also used for the sharing of best practice and working through any challenges that may arise. NHS Ayrshire and Arran supervisors of midwives are represented on this forum by Laura Muir.

The link supervisors feed information back to their local meetings. They also assist the LSAMO in both implementing and undertaking the LSA audit across the region and contribute to ensuring an effective communication network.

Supervisor of Midwives Forum in LSA Ayrshire and Arran

There is a local forum in Ayrshire and Arran and the supervisors of midwives meet every month. Feedback is given from the West of Scotland link supervisor of midwives meeting and local issues are discussed. The meetings are chaired by a supervisor of midwives and this position is rotated across the supervisors of midwives on a six monthly basis. This enables each supervisor of midwives to have an opportunity to chair the forum and prepare papers and helps to develop leadership skills amongst supervisors of midwives.

The supervisors of midwives also hold an annual away day, where they have invited speakers on relevant topics and develop work plans for the forthcoming year.

LSAMO and Supervisors of Midwives in HEI

The LSAMO also meets with supervisors of midwives in the HEI to develop systems and processes to support supervised practice and reflective activities between supervisor of midwives and midwives. As these are developed they will be disseminated to all supervisors of midwives.

Scottish LSAMOS

The three LSAMOs based in Scotland meet regularly to discuss any issues arising from a Scottish perspective.

5.2 *How the practice of midwifery is supervised*

The NMC (2004) Midwives rules and standards set out in Rule 12 how the practice of midwives is supervised. Rule 12 stipulates that a local supervising authority shall ensure that

- Each practising midwife within its area has a named supervisor of midwives
- At least once a year each supervisor of midwives meets each midwife for whom she is the named supervisor to review the midwife's practice and to identify her training needs
- All supervisors of midwives within its area maintain records of their supervisory activities including any meeting with a midwife
- All practising midwives within its area have 24 hour access to a supervisor of midwives

Each of these standards is now audited annually in a LSA annual audit through a self assessment tool and by questioning supervisors and midwives about their experiences in relation to these standards.

The audit demonstrated that in NHS Ayrshire and Arran each midwife completes an Intention to Practise form and this is signed by the midwife's named supervisor of midwives and then submitted to the LSA Office. Details are then submitted on a data base within the LSA and then submitted to the NMC. In the year 2009-2010 the West of Scotland will subscribe to the National LSA database in line with other LSAs in the UK.

Each midwife has a named supervisor of midwives and there has been steady progress in the number of midwives meeting their supervisor of midwives for an annual review. It is anticipated that there will be full compliance with this standard by the next reporting year other than with midwives who are on long term sick leave or maternity leave.

The supervisors of midwives maintain records on their case load of supervisees. An aim in the future is to promote the use of reflection on practice between supervisor and supervisee.

All midwives have 24 hour access to a supervisor of midwives.

The LSA audit identified steady progress in achieving the LSA standards in 2008-09. No significant issues were identified. All the standards were either met or partially met.

5.3 *Safety of the Public*

The NMC (2004) Midwives rules and standards stipulate that the role of the supervisor of midwives is to protect the public by empowering midwives and midwifery students to practise safely and effectively. Therefore to ensure the safety of the public supervisors of midwives may also be required to undertake supervisory investigations following critical incidents to determine if there is any evidence of poor practice and then put in place relevant programmes to develop a midwife's practice through supervised practice or a programme of developmental support.

There is a supervisor of midwives on the clinical risk management group within the NHS Board and supervisors of midwives support other clinical governance strategies.

As a means of safeguarding the public the evidence base from the analysis of supervisory investigations will be fed back to both the local supervisors of midwives forum and the West of Scotland link supervisors of midwives forum. This will enable supervisors of midwives to share lessons learnt and assist them to put measures in place to prevent similar patterns emerging in the future.

Work is being developed between the University of West of Scotland and the LSAMO to develop a system for supervisors to undertake a formal reflection with a midwife following an investigation when supervised or supported practice has not been deemed a necessary outcome following the investigation. This will be implemented in 2009-2010.

The supervisors within the LSA are committed to supervision of midwifery practice and its remit in the protection of the public within the LSA. They work hard in both developing and achieving the standards of supervision. Where there are challenges in practice the supervisors of midwives agree actions seeking the support of the LSAMO when necessary.

5.4 *Intention to Practice Process and Annual Review*

Each supervisor of midwives receives an Intention to Practise (ITP) form from the midwives in their caseload and each supervisor of midwives undertakes an annual review with the midwife. The ITP is signed by the midwives supervisor of midwives and details are entered on a database and submitted to the NMC.

Each supervisor of midwives plans to meet with her supervisee to discuss learning needs, professional development needs and to discuss any concerns the midwife may have. To facilitate the annual review supervisors of midwives have made plans to meet with the supervisee over the year rather than the end of the practice year.

5.5 *Supervisors of Midwives as Leaders*

The LSA audit identified in 2008-9 that there is an increased awareness amongst staff of the role of supervision of midwifery practice. They saw the supervisors as a distinct and separate group from management and valued that

many of the supervisor of midwives now had clinical roles and worked in the clinical environment. The midwives present were not fully aware of what supervisors of midwives did in their meetings and felt it would be very useful to have information about supervisory activities on a regular basis. The supervisors of midwives do produce a newsletter in this area.

Supervisors of midwives attend a variety of forums. Forums where supervisors of midwives are represented are:-

- Clinical Incident Review Group
- Clinical effectiveness forums
- Maternity Service Provision Group
- Educational Curriculum Planning Forums

5.6 LSA Annual audit

A consistent process has been established across the West of Scotland over the past two years to ensure that standards for the supervision of midwifery practice are met in each of the four LSAs in the West of Scotland. A LSA audit takes place annually within the LSA of Ayrshire and Arran. The LSAMO Forum UK has produced an audit tool which is used by all LSAMOs to audit standards for the supervision of midwifery practice. This national audit tool also ensures a consistent approach in auditing the standards for the supervision of midwifery practice.

The standards depict the minimum standard of statutory supervision to be achieved. The LSA audit tool incorporates five LSA standards based on the five principles set out in the NMC (2004) Midwives rules and standards. The LSAMO Forum UK has developed a range of methodologies to audit the standards. This is to assist LSAMOs in deploying different approaches to enhance the audit process.

Currently a model of peer assessment is being used in the West of Scotland to monitor the standards which involves an audit team comprising of:-

- two supervisors of midwives from other units or a HEI
- a service user
- the LSAMO
- student supervisors of midwives

The methodology used to audit the standards will be reviewed following the LSA audits of 2009-2010.

The LSA audit took place over two days on 10th and 11th September 2008. The LSA audit team visited the two units and also met with senior members of the midwifery management team.

Supervisors of midwives were asked to provide evidence prior to the LSA audit visit. Focus groups were also held with midwives, student midwives, service users and managers to triangulate the evidence. A questionnaire was also sent to all supervisors of midwives within the LSA prior to the audit with a good response rate. The findings from the survey, audit and focus groups were consistent. This was also found in the LSA audit of the preceding year. The

report of the LSA audit was then sent to the Chief Executive, Director of Nursing, Head of Midwifery and Supervisors of Midwives.

On the whole the 54 standards were met in the LSA NHS Ayrshire and Arran. Where they were not met or partially met the supervisors of midwives discuss the issues in their local meetings and update any local actions needed. There is also a West of Scotland Action Plan that is reviewed every six months in the West of Scotland link supervisors of midwives forum to take issues forward across the region as well as at a local level (Appendix 3).

As well as assessing whether the standards for the supervision of midwifery practice are met the LSA audit process contributes to raising the profile of supervision of midwifery amongst midwives, supervisors of midwives and women. The peer review method enables supervisors of midwives to share good practice with each other, and provides networking opportunities for them. The audit process also contributes to developing the supervision of midwifery practice further and is a positive learning experience for both supervisors of midwives and student supervisors of midwives who attend as observers on the audit team.

It can be demonstrated then that an audit process is in place to assess how the practice of midwives is supervised and that a continual process to identify challenges and to ensure continuous improvement is in place. This helps to ensure that supervision of midwifery practice is proactive and gives a framework for the protection of the public.

5.7 *Challenges to effective supervision*

One of the major challenges impacting on effective supervision is having enough time to undertake the function of the role of supervisor combined with their other roles. Supervisors in non clinical roles find this easier to manage than clinically based supervisors of midwives. The NHS Board supports supervisors of midwives having protected time for supervision and each supervisor is expected to monitor time spent on supervision and if she has difficulties should discuss this with her line manager.

The supervisors identify the promotion of normality as a challenge to their role and continue to be committed to the promotion of normality within the department and by contributing to national projects.

Other challenges identified by supervisors in this years audit were the need to continue raising the profile of supervision amongst midwives and women and to undertake an audit of record keeping and feed relevant issues back to staff.

6.0 *Evidence that service users have been involved in monitoring supervision of midwives and assisting the local supervising authority midwifery office with the annual audits.*

- 6.1** Service users were invited to take part in the LSA audit process. A training day was held to prepare service users to take part in the audit process this year. The programme for the training day is in the appendices (Appendix 4). Two training days were held and in total 10 service users attended the sessions and these

were evaluated well. A service user was part of the audit team in Ayrshire and Arran. The audit team also met with a group of service users who spoke highly about the local service. A number of women had delivered in maternity units in other parts of the UK and were very pleased with the service in this area in comparison to their previous experiences.

7. *Evidence of Engagement with higher education institutions in relation to supervisory input in midwifery education*

7.1 *The LSAMO and HEI*

The LSAMO attends meetings with the University of the West of Scotland on a regular basis to give advice or support and lectures on pre registration and preparation programmes for supervisors of midwives.

The UWS and LSAMO are jointly developing programmes for supervised practice which includes the development of a directory of competencies that supervisors and educationalists can use following supervisory investigations that recommend supervised practice. This work also involves the development of a process for midwives to undertake a formal reflection following a supervisory investigation when a period of supervised or supported practice is not required. This is to ensure that learning and reflection are used following any supervisory investigation.

The UWS also supports the LSAMO in creating training opportunities for supervisors of midwives and continues to work with the LSAMO in facilitating workshops.

Further opportunities for the development of supervisors of midwives will be based on learning needs identified by supervisors either through LSA audit or evaluation of conferences/workshops.

The LSAMO also attends any monitoring visits, such as those by the NMC, and curriculum planning meetings.

There are five educationalists currently supervisors of midwives in the UWS. Another educationalist and a practice education facilitator are due to undertake the preparation programme in September 2009.

7.2 *Supervisor of midwives engagement with HEI*

NHS Ayrshire and Arran receive students from University of West of Scotland. Supervisors of midwives contribute to the development, teaching and assessment programmes of education leading to registration and continuous professional development. Supervisors of midwives are on curriculum planning teams and undertake lectures on pre registration and post registration programmes. They also ensure that midwives remain updated.

7.3 *Supervisors of midwives supporting student midwives*

Each student midwife is allocated a supervisor of midwives from supervisors of midwives within the HEI. This is due to change shortly and supervisors will be allocated supervisors working with in the NHS Board. Student midwives were

part of focus groups during the LSA audits and it was evident that they were conversant with the role of the supervisor of midwives in protection of the public.

7.4 The clinical learning environment for pre-registration student midwives

During the LSA audits focus groups are held with student midwives. They are asked about their clinical placements during this session. No significant issues were identified. If significant issues are identified they would be fed back to the Lead Midwife for Education directly by the LSAMO.

7.5 Preparation of Supervisor of Midwives Programmes

The programme for the preparation of supervisors of midwives is based at the University for the West of Scotland and is based on the NMC (2006) Standards for the Preparation and Practice of Supervisors of Midwives (2006). The programme runs in February and September of each year dependent on local need. The aim of the programme is to prepare midwives for the statutory role and to help them to understand critique and evaluate the role and the significance of self regulation of the profession for public protection. Only NMC approved educational institutions can deliver the preparation programmes and the University of the West of Scotland was validated by the NMC in 2008. Following validation programmes are monitored annually through the NMC quality assurance processes.

To recruit new supervisors adverts listing the skills required to be a supervisor of midwives are circulated throughout the LSA. Any midwives who are nominated or would like to become a supervisor of midwives may contact the LSAMO directly for information. The applicants then go through the selection process as set out in the LSAMO Forum UK guidance.

The student supervisors have a supervisor mentor during the preparation programme who assesses their competencies. The programme is comprised of two modules; one theory and the other practice based. Students must successfully complete both components. When they have successfully completed the programme the LSAMO is informed by the Lead Midwife for Education (LME) they are then appointed by the LSAMO as a supervisor of midwives to the LSA. The newly appointed supervisor will be provided with a period of preceptorship for a minimum of three months as per NMC (2006) standards.

During the programme the LSAMO meets regularly with the module leaders who keep her updated with the student's progress on the programme. If any issues are identified they are discussed with the LSAMO. The LSAMO is advised if students are not successful on the programme.

University of West of Scotland

The preparation programme starts place in either February or September and is run as a part time module at level 6 (degree) and level 7 (masters). The LSAMO is involved in the planning of the modules, as part of the teaching team and in the evaluation.

Programme leader – Maria Pollard

Module Team -Maria Pollard, Madge Russell, LSAMO and other relevant external speakers

7.6 Challenges

Challenges were identified in the previous year by supervisors of midwives in relation to supervisory investigations and supervised practice. These included

- a need to have training in how to conduct a supervisory investigation
- how to write a report
- standardised programmes for supervised practice that include identified learning outcomes for the individual practitioner

The LSAMO has worked closely with the UWS to develop workshops on conducting supervisory investigations. These were developed in conjunction with the LSAMO from East of England who acted in an advisory capacity and conducted a workshop in this area which is subsequently being run every quarter in the West of Scotland. The workshop is also part of the theoretical module on the preparation programme for student supervisors of midwives. This ensures consistency of approach amongst supervisors of midwives. Work is also being developed on supervised practice programmes and the development of a directory of competencies.

7.7 Ongoing Education for Supervisors of Midwives

The LSAMO has established an annual conference for supervisors of midwives in the West of Scotland and runs workshops based on training needs which are identified through evaluation forms.

This year the sessions were as follows:-

Learning Opportunity	Total Number Attending
West of Scotland Annual Conference Supervision in Action – Midwifery Leadership Making it Happen	56
West of Scotland Annual Conference Supervision in Action – Midwifery Leadership Making it Happen	73
Conducting a Supervisory Investigation	27

Conference fliers can be found in the appendices (Appendix 5).

8. Details of any new policies related to the supervision of midwifery practice

8.1 Guidance for supervisors of midwives

To support supervisors of midwives in their role in supervising midwives practice national guidance has been produced by the LSAMO Forum UK. This National Guidance gives a framework for supervisors of midwives to undertake a consistent approach across the UK in supervising midwives practice. This consistent approach to statutory supervision of midwifery practice contributes to

promoting the safety of maternity services through the protection of the public. The supervisors of midwives in the West of Scotland formally adopted the LSAMO Forum UK guidance on February 1st 2009. This guidance can be accessed on www.midwife.org.uk and also www.midwiferysupervision-woslsa.scot.nhs.uk. Each supervisor of midwives has also been issued with a file of the National Guidance.

8.2 West of Scotland Guidance

The LSAMO has also established a guidance group for supervisors of midwives to develop local guidance for supervisors of midwives in the West of Scotland which is being adapted for use for from the North West of England with permission from the LSAMO there. Supervisors of midwives in Ayrshire and Arran are represented on this group. These are under review at present. When the first guidelines have been ratified they will be able to be accessed on www.midwiferysupervision-woslsa.scot.nhs.uk.

Supervisors of midwives in NHS Ayrshire and Arran also contribute to developing local guidelines for midwifery practice that are used within their service.

8.3 Reflection

The LSAMO is currently undertaking work in conjunction with UWS to develop systems to support midwives in undertaking reflection with supervisors of midwives. A process is also being developed to initiate a formal reflection between a midwife and the investigating supervisor of midwives following involvement in a critical incident when supervised practice or developmental supports have not been deemed necessary.

9. Evidence of developing trends affecting midwifery practice in the local supervising authority

9.1 Public Health Issues

NHS Ayrshire and Arran covers a wide geographical area covering rural areas and densely populated towns. There are high levels of deprivation in the area and high levels of addiction. There are also reports of some immigrants from Eastern Europe in the communities which bring challenges such as late booking for maternity services, poor health status and language difficulties. All these issues pose risk to women and their children.

9.2 NHS Ayrshire and Arran have a number of specialist roles. These midwives work closely with staff and contribute to developing the service to meet the needs of these vulnerable groups.

9.3 An Infant Feeding Advisor has also been established in the area. This role is aimed at having a positive impact on practice and also to contribute to increasing breastfeeding rates.

9.4 Clinical Activity

NHS Ayrshire and Arran covers a population of approximately 367,140 and on average there are 3773 births per annum. There were only slight variations in the number of births since the previous year therefore there was no significant impact to the service. Staffing levels remain consistent in the area. The midwives undertake water births and a small number of home births. There is a midwife led unit within the maternity unit and midwives promote midwife led care. 57% of women were booked under the care of a midwife in the reporting year. An overview of birth trends and clinical outcomes can be found in the appendices (Appendix 6).

9.5 NHS Ayrshire and Arran monitors future birth trends on a regular basis. They also undertake work force planning by looking at skill mix and the age profile of midwifery staff.

9.6 The RCM recommends a midwife to birth ratio of 1:28 in maternity services. The midwife to birth ratio in Ayrshire and Arran is 1: 26.

9.7 Methods of Data Collection

Data is collated within the maternity department. This year an electronic maternity system has been implemented called eCclipse. It is anticipated that this system will provide more robust data.

The maternity unit has participated in the national Nursing and Midwifery Workload and Workforce planning project and have undertaken Birth-rate Plus and a Professional Judgement Workforce planning tool. This work has led to the establishment of a short life working group in Scotland to develop a tool to assist in determining staffing requirements for women with complex needs and for the remote and rural areas unique to Scotland. This work will be used in conjunction with findings from Birth rate plus analysis.

9.8 Serious Incident Escalation Policy

Incidents are reported via the Clinical Risk reporting system Datix. These incidents are reviewed by the Clinical Risk Management Group with recommendations and actions undertaken. A Serious Untoward Incident Policy has been implemented within NHS Ayrshire and Arran in the past year.

There is West of Scotland guidance for supervisors of midwives on reporting and investigating serious untoward incidents. It is the role of the supervisor of midwives to advise the LSAMO if there has been a serious untoward incident. Within the unit serious incidents are reported to the risk manager and then reviewed by the clinical risk management team. A supervisor of midwives sits on this forum and would feed back any concerns to the local supervisors of midwives forum.

9.9 Unit Closures

There have been no unit closures within NHS Ayrshire and Arran in the reporting year. The Ayrshire Maternity Unit has never had to close and is the

only maternity unit in the area. If problems are identified with capacity or staffing levels in times of peak activity, the workload is assessed by the management team and contingency arrangements made such as delaying non essential admissions for induction of labour or ensuring that women who are fit to be discharged home are reviewed timeously.

9.10 *Keeping Childbirth Dynamic and Natural*

There has been much developmental work undertaken to keep childbirth natural and dynamic throughout Scotland. All areas have appointed Consultant Midwife posts to support this project at local levels. A consultant midwife has been appointed in NHS Ayrshire and Arran. A key aspect of her post is to support midwives in maximising normal birth and promoting the role of the midwife as a lead professional.

9.11 *Collaborative working with other organisations that have a safety remit.*

Ayrshire and Arran has representation on the NHS Scotland Clinical Governance and Risk Management Network which facilitates and enables sharing of experiences, lessons, challenges and solutions. This organisation aims to create a network of experts committed to sharing knowledge across organisational boundaries. This group comes under the auspices of Quality Improvement Scotland (QIS)

Ayrshire Maternity Unit contributes to the Scottish Confidential Audit of Severe Maternal Morbidity (SCASSM) by reporting events that are requested by the SCASSM trigger list. This information is collated and fed back to units.

Ayrshire and Arran also participates in the national audits co-ordinated by UKOSS (United Kingdom Obstetric Surveillance System).

10. *Details of the number of complaints regarding the discharge of the supervisory function*

There were no complaints in this reporting year regarding the discharge of the supervisory function. With the adoption of the LSAMO Forum UK Guidance in January 2009 the process that is now being used to address a complaint against a supervisors of midwives or the LSAMO is set out in Guideline G 'Policy for the notification and management of complaints against a Supervisor of Midwives or an LSA Midwifery Officer, including appeals'. Complaints against the LSAMO are dealt with through the complaints procedure within NHS Ayrshire and Arran as this is the host Board of the LSAMO.

The appeals process is also set out in Guideline G. The guideline can be accessed on www.midwife.org.uk. and www.midwiferysupervision-woslsa.scot.nhs.uk.

11. *Reports on all local supervisory investigations undertaken during the year*

- 11.1** The LSAs in the West of Scotland have guidance in place for supervisors of midwives on the reporting and monitoring of serious untoward incidents. Each supervisor of midwives has a copy of this guidance. The guidance acts as a reference for supervisors and includes a section to give a guide on what incidents or issues involving midwifery practice should be referred to the LSA. These include the following examples:-
- All maternal deaths
 - All investigations of midwifery practice being undertaken by SOM, irrespective of outcome
 - Significant changes in service configuration that may have the potential for adverse impact on women and babies,
 - Sustained deficits in midwifery staffing
 - Midwives reported to the NMC
 - Unexpected intrauterine or neonatal deaths
 - Unexpected Intra-partum death
 - Unexpected significant morbidity of a mother or baby
- 11.2** The supervisor of midwives should advise the LSA of any issues involving midwifery practice that are of serious concern. The West of Scotland guidance specifies that this list is not exhaustive and that where there are uncertainties the LSAMO should be contacted for advice.
- 11.3** It is essential that the team of supervisors be notified of all serious untoward incidents that involve midwifery practice. This means that there should be a link between the supervisors of midwives and the risk management structures within the NHS Board. In NHS Ayrshire and Arran a supervisor of midwives sits on the clinical risk management forum.
- 11.4** A supervisor of midwives should undertake an investigation where circumstances suggest that there may have been poor midwifery practice. This function cannot be delegated to anyone else. The LSAMO is always available to provide advice and support to the supervisors of midwives.
- 11.5** In addition to the above, guidance there is LSAMO Forum UK National guideline and is called 'Investigation into a midwife's fitness to practise'. It gives clear guidance on how to conduct a supervisory investigation, a template for documenting the investigation and a checklist of considerations whilst undertaking a supervisory investigation.

The LSAMO holds workshops for supervisors of midwives on how to conduct a supervisory investigation.

11.6 *Investigations*

There was one investigation undertaken within the year by supervisors of midwives from the LSA. The investigation involved a medication error and a midwife was placed on a period of developmental support. A serious incident review also took place and the supervisor of midwives on this review produced a report that recommended that four midwives undertook a formal reflection with a supervisor of midwives. The panel of the serious incident review made a series of recommendations for the organisation.

- 11.7** The LSAMO is maintaining a database on trends and themes identified in supervisory investigations across the four local supervising authorities. As supervisors of midwives undertake supervisory investigations so trends and themes are becoming evident, these are now being shared with supervisors of midwives across the region. This will enable supervisors of midwives to establish strategies to ensure learning takes place within the work place to help prevent repeated incidents.
- 11.8** The supervisors of midwives strive to ensure lessons are learnt in the work place. Plans are in place to ensure that risks identified in the clinical risk management forums are discussed in the supervisor of midwives forum and strategies developed to prevent similar occurrences in practice.
- 11.9** There have been no concerns identified in relation to the competence of newly qualified midwives or in their place of training during this reporting year.
- 11.10** The NMC is contacted for advice on midwifery practice on individual cases as they arise. This could be by telephone, by email, face to face contact or by letter.

11.11 *Maternal Deaths*

The definition of maternal death defined by as defined by the Confidential Enquiry into Maternal and Child Health (CEMACH) is the death of a woman while pregnant or up to one year after abortion, miscarriage or birth. Indirect deaths are those relating from previous existing disease. Direct deaths are those resulting from Obstetric complications during pregnancy, labour and the postnatal period.

Supervisors of midwives notify the LSA MO if there has been a maternal death and also advise the LSAMO if there have been any midwifery practise issues. During this period there have been no reported maternal deaths in Ayrshire and Arran.

12.0 *Conclusion*

This report has demonstrated the steady progress made in NHS Ayrshire and Arran during this reporting year.

Supervisors of Midwives demonstrate commitment to achieving the standards of practice in relation to statutory supervision of midwifery practice and in raising the profile of statutory supervision of midwifery practice within the service. The supervisors support the LSAMO in embedding a strategic and consistent approach for supervision of midwifery practice across the West of Scotland. This contributes to ensuring a safe service for women and their families and also the provision of safe learning environments student midwives.

12.1 *LSA Priorities for 2009-2010*

- Continue to monitor and reduce risks as set out in the NMC risk register
- Ensure standards of supervision are met and where they are not develop action plans

- Undertake an annual audit of record keeping
- Support leadership development of supervisor of midwives
- Continue to raise the profile of supervision amongst midwives
- Engage with service users
- Develop new guidance for supervisors of midwives as required to support them in their role
- Ensure midwives meet with supervisors of midwives on an annual basis.
- Continue to ensure the safety of the public receiving maternity care through the monitoring of serious untoward incidents.

12.2 The LSAMO will continue to provide education and support for supervisors where required as for example in training supervisors in conducting a supervisory investigation and supervising a midwife's practice. Learning needs will continually be identified by supervisors of midwives from evaluations from training days or conferences or as identified in meetings. The ultimate aim is to ensure the protection of the public through the effective supervision of midwifery practice through meeting the needs of supervisors of midwives and women and their families at both local and national levels.

12.2 In conclusion the LSAMO will continue to support and develop the supervisors of midwives in their role and champion statutory supervision of midwifery practice in influencing services and ensuring the safety of the public.

Wai Yin Hatton
Chief Executive NHS Ayrshire and Arran

Joy Payne
Local Supervising Authority Midwifery Officer




Signed _____

Signed _____