CONTINUING EDUCATION OF SUPERVISORS OF MIDWIVES

Guideline produced by: West of Scotland Supervisors of Midwives Guideline Development Group

Consultation process:

Current version (1) Reviewed by the West of Scotland Supervisors of Midwives Guideline Development Group and all Supervisors of Midwives via Link Supervisors and Heads of Midwifery

Approved by: Supervisors of Midwives Guideline Development Group and the Local Supervising Authority Midwifery Officer

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Review Date: June 2012



CONTINUING EDUCATION OF SUPERVISORS OF MIDWIVES

Background

Standard 4.2 of the NMC Standards for the preparation and practice of supervisors of midwives requires all Supervisors of Midwives to undertake at least 6 hours of relevant learning in each year of appointment, specifically relating to supervision. This is in addition to the 35 hours required every 3 years to renew their midwifery registration.

Following the philosophy of PREP, Supervisors will be able to identify their learning needs, select activities to meet these needs, and plan the relevant experience/study.

As this updating forms part of the study specified in PREP legislation for maintaining professional registration, the time frame cannot be extended.

Arrangements for the West of Scotland LSAs

- 1. When Supervisors complete their Notification of Practise on reregistration with the NMC, they must submit to the LSA Midwifery Officer evidence of the study/updating activities undertaken in the previous 3 years. A form has been devised to standardise this information and is included as **LSA 1**.
- 2. Each Supervisor of Midwives should include in every three year period the preparation and presentation of supervisory reflective practice. Other activity will allow Supervisors freedom to explore ways of meeting personal identified development needs, but must satisfy NMC standards. A form has been devised for this information and is included as LSA 2.
- 3. Appropriate annual study days and conferences will be arranged by the LSA and approved by the LSA will be identified advertised as such. Those attending will be issued with a certificate of attendance. Details of activities attended should be documented on the reverse side of **LSA 1**.
- 4. In addition to formal events, other learning opportunities that may contribute to the hours required can include; attendance and/or undertaking a presentation at meetings of West of Scotland Supervisors of Midwives with the LSA Midwifery Officer, attendance at of presentations by student Supervisors undertaking the Preparation of Supervisors of Midwives course and undertaking the role of Peer Auditor at West of Scotland LSAs audits.
- 5. If Supervisors attend courses/study days or other activities in an LSA outside the West of Scotland, evidence must be provided that the updating was appropriate and recorded on the LSA 1.



WEST OF SCOTLAND LOCAL SUPERVISING AUTHORITIES

CONTINUING PROFESSIONAL DEVELOPMENT FOR SUPERVISORS

NOTIFICATION OF COMPLETING 6 HOURS PER YEAR OF RELEVANT LEARNING

Notification should be made to the Local Supervising Authority (LSA), using this form, by the month in which the Supervisor's periodic registration fee is requested by the NMC, every three years.

The form should be returned to the LSA Office

NHS Board:
Name of Supervisor (your name):
PIN:
NMC registration expiry date:
Date appointed as a Supervisor in the West of Scotland:
Date of Preparation Course for Supervisors of Midwives:

<u>ALL</u> Supervisors of Midwives must complete this form every three years.



LSA 1 (continued)

Details of attendance at 6 hours per year LSA approved Courses/Study Days/Conferences/other approved sessions:

DATE	TITLE	ORGANISING BODY	NUMBER OF HOURS	
Signature of Supervisor:		Dat	Date:	
Signature of Named Supervisor:		Dat	Date:	
To be completed for study/updating activity				

For administration use only:

Meet requirements of Rule 11? Yes / No

Date of receipt of form:

Date LSA database updated:



LSA 2

WEST OF SCOTLAND LOCAL SUPERVISING AUTHORITIES

CONTINUING PROFESSIONAL DEVELOPMENT FOR SUPERVISORS

REFLECTIVE LEARNING

Name:

NHS Board:

Title of activity/study undertaken:				
Organising Body:				
Date undertaken:	No. of hours:			
Aim of the activity/study:				
Anticipated outcomes:				



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LSA 2 (continued)

Outcomes achieved:			
Has your supervisory practice changed as a result, if so how?			
Signature of Supervisor:	_ Date:		
Signature of Named Supervisor:	_ Date:		

This form is for the supervisors own records