

Minutes

Midwifery Panel

Held 13 March 2024, 23 Portland Place, London, W1B 1PZ

Attending		
Name	Role	Organisation
Angela Graves	Head of School of Healthcare, University of Leeds	Council of Deans of Health
Anna van der Gaag	Midwifery Panel Chair	Visiting Professor in Ethics and Regulation, member of the International Ethics Observatory team, University of Surrey
Caroline Keown	Chief Midwifery Officer	Department of Health Northern Ireland
Gloria Rowland	Director of Nursing	African Medical Centre of Excellence
Gwendolen Bradshaw	Emeritus Professor	University of Bradford
Jacqui Williams	Senior Midwifery Adviser (Education)	NMC
Justine Craig	Chief Midwifery Officer	Scottish Government
Karen Jewell	Chief Midwifery Officer	The Welsh Government
Nicky Clark	Chair, Lead Midwives for Education Strategic Reference Group	University of Hull
Tracey MacCormack	National Maternity Improvement Adviser	NHS England

Verena Williams	Senior Midwifery Adviser (Policy)	NMC
Apologies received		
Name	Role	Organisation
Agnes Agyepong	Lay member	Founder and CEO of Global Black Maternal Health Institute
Ruth May	Chief Nursing Officer	NHS England
Kate Brintworth	Chief Midwifery Officer	NHS England
Kerri Eilertsen-Feeney	Lead Midwife	NHS England
Sascha Wells-Munro	Deputy Chief Midwifery Officer	NHS England
Cath Broderick	Lay member	Independent Consultant, Patient and Public Engagement, We Consult
Janice Sigsworth	Chief Nurse	Imperial College Healthcare NHS Trust
Janaki Mahadevan	Lay member	Joint Chief Executive, Birthrights
Shanthi Gunesekera	Lay member	Joint Chief Executive, Birthrights
Maria Pollard	Deputy Director	NHS Scotland
Mary Renfrew	Professor Emerita	University of Dundee
Natalie Whyte	Lay member	Service User Representative National Maternity Voices, Leicester, and Rutland

Wendy Olayiwola	National Maternity Lead for Equality	NHS England
Gill Walton	Chief Executive	Royal College of Midwives
External observers		
Name	Role	Organisation
Sara Irlanda	Student midwife	Robert Gordon University (on elective placement at the NMC)
Michelle Poole	Student midwife	University of Coventry (on elective placement at the NMC)
Sandra Smith	Deputy Regional Chief Midwife, Midlands	(Shadowing Kate Brintworth Chief Midwifery Officer, NHS England)
Margaret McGuire	Registrant Council member	NMC
Elif Ege	Policy and Campaigns manager	Birthrights
NMC colleagues in attendance		
Name	Role	Role in the meeting
Andrea Sutcliffe	Chief Executive and Registrar	Presenter
Sam Foster	Executive Director, Professional Practice	Presenter
Anne Trotter	Assistant Director, Education and Standards	Co presenter
Simon Grier	Strategic Communications Manager	Co presenter

Noita Sadler	Assistant Director, Stakeholder Engagement	Attendee
Julie Bliss	Senior Nursing Education Adviser	Attendee
Gabrielle Jones	Stakeholder Engagement Manager	Event coordinator
Melissa McLean	Senior Public Engagement Officer	Event coordinator
Georgina Hargrove	Senior Stakeholder Engagement Officer	Event coordinator
Grace Batterham	Senior Stakeholder Engagement Officer	Event coordinator

Agenda items

1 Welcome and introduction

- 1.1 The Chair welcomed everyone to the meeting, including observers.
- 1.2 The Chair also noted the CQC Maternity Survey will open for responses in April.
- 1.3 The Chair reflected on the negative perceptions of maternity services in the media, but also highlighted the Midwifery panel's focus on the positive. An example of innovation in the sector is that led by SBRI Healthcare, an Accelerated Access Collaborative initiative, in partnership with the Health Innovation Network. This has awarded £2.5m to five innovative [companies](#) helping to narrow inequalities in maternity care.

2 Minutes and actions of the previous meeting

- 2.1 The Chair confirmed with members that they were satisfied the minutes from December's meeting were an accurate representation of the discussions held.

3 Chief Executive reflections on recent developments

- 3.1 Concerns raised about the NMC
 - Ijeoma Omambala KC has been appointed to investigate the NMC's fitness to practise (FtP) role and our response to the whistleblower's initial enquiry to

us. Nazir Afzal and Rise Associates will undertake the investigation into the NMC's culture.

- She voiced her confidence in Nazir Afzal's ability to undertake a thorough and independent investigation and reassured the panel that the recommendation and the NMC's actions in response to these will be made public and open to discussion at a Midwifery panel meeting.
- The Terms of Reference of both investigations are available on the NMC's website, and the results of Ijeoma's report is anticipated to be at the end of May and Nazir's report in June.
- The NMC are committed to agility in improving its processes, particularly in the case of FtP which will be monitored over the next 3-6 months. However, the NMC are mindful of the investigations impact on its operations.

3.2 Lucy Letby Case

- It was confirmed that the Letby FtP case had concluded, with Letby struck off the register.
- The NMC are continuing to work on contributing to the Thirlwall Inquiry, with hearings expected in Autumn 2024.
- **Action: the panel agreed on a future item on Thirlwall Inquiry. It may have ramifications for Wales and will be of interest to the wider UK.**

3.3 NMC plans for 2024/25

- Preparations are underway for the new financial year, with the NMC's Corporate Plan, budget and FtP Improvement Plan due at Council on 27 March. Papers will be available on our website a week before Council.

3.4 NMC's fitness to practise guidance library

- We are updating our FtP interim order guidance by introducing a more holistic way of considering whether an Interim Order is required or not, previously we relied on prima facie guidance. Similar way of working to the General Medical Council (GMC).
- **Action: to circulate the FtP Interim Order guidance to Midwifery panel members.**
- We have published our guidance in relation to concerns raised about the professionals on our register outside of practice e.g. in cases of sexual misconduct, safeguarding and domestic abuse. This links back to our work on freedom of expression guidance which launched in October 2023.

4 Spotlight on Wales' key maternity priorities

4.1 Discussion began with a focus on the diverse localities of Wales and how this influences how and where pregnant women access services.

4.2 The priorities of 'A Five-Year Vision for the Future' of maternity services in Wales, and the priorities of 'The Maternity and Neonatal Safety Support Programme in Wales' were discussed, as was the introduction of the 'Strategic Perinatal Workforce Plan'.

4.3 This Plan involves working with multiple sector partners including Health Education and Improvement Wales and third sector stakeholders with the aim of ensuring career progression in neonatal and maternity practice, with options for consultant midwife and consultant nurses.

- 4.4 The Welsh Chief Nursing Officer and the Chief Midwifery Officers are also looking at the NHS Workforce Race Equality Standards and are planning to develop this in 2025, as there is an awareness of the lack of diversity in the Welsh midwifery profession and the need to consider applicants to universities, versus those accepted onto courses.
- 4.5 NHS Wales are introducing cultural competence training at Health Boards and working with careers teams to develop a pack for maternity and neonatal career options. There is also a need to understand how international recruits are joining the Welsh workforce – this includes those trained overseas or in Wales or England.
- 4.6 Work as part of Digital Maternity Cymru Programme involves all Welsh Health Boards having electronic data systems and putting together a national data set for consistency, with implementation due in 2024/25.
 - However, there are difficulties in provision of up-to-date data e.g. consideration of maternal health outcomes.
 - The NMC's data resources were also flagged as helpful to aiding understanding of diversity on the register in particular locations.
- 4.7 Panel members agreed on the importance of collegiate working to assert importance of midwifery profession.
- 4.8 The tensions between midwives and other members of multidisciplinary maternity teams were also highlighted.
 - **Action: future item on the importance of other roles in the multi-disciplinary maternity team, including Advanced Neonatal Practitioners.**

5 Senior Midwifery Advisers update

- 5.1 Verena Wallace discussed our approach to freebirthing and unregulated people; Articles 44 & 45 and links to regulatory reform were highlighted. In discussion, the Panel members comments were:
 - Recommendation that the NMC work with local government to get data, for example on birth before arrival at hospital.
 - There needs to be an understanding of why women choose to freebirth and how trust is rebuilt in midwifery profession.
 - How might the NHS ensure choice in the birthing experience?
 - How can midwives be supported alongside doulas? Potential joint letter to midwives to reassure them on this – this could be done in collaboration with a variety of partners.
 - Context of midwifery staff not attending home births due to operational challenges.
 - If midwives try and attend home birth and are denied entry, there is a reluctance to call the police.
 - London Ambulance Service is the second highest provider of maternity care, and they need the right support and training.
 - What are Integrated Care Boards and four nation equivalents doing about this?
 - Next steps:
 - Draft statement is being developed, commissioned by the DHSC.

- We've had two exploratory discussion meetings with stakeholders and there is potential for further work across the maternity system.
- 5.2 The NMC hosted the South-East Safeguarding Midwives Forum, and the senior midwifery advisers presented at the recent Midlands Midwifery International Recruitment celebration and a Public Policy Exchange event.
- 5.3 The NMC are considering research findings from internationally educated professionals on the register, and an update was given on next steps. The update also included considerations being given to the context of European midwifery education – including programme length changes in France, with possible changes to the EU Directive. This is important as the NMC have always said we want to maintain synchronicity with EU prescriptions, particularly given the land border between Northern Ireland and the Republic of Ireland.
- 5.4 The NMC appreciates the concerns and work that led to the publication of the recent [Saynotobullyinginmidwifery](#) report. It reinforces that bullying in midwifery is a longstanding and ongoing issue.
- 5.5 Other updates included the context of the Irish Government funding of student places at Queen's University Belfast and that considerations are being given to issues in professionals registering with both the NMC and the Nursing and Midwifery Board of Ireland.

6 Fitness to practise improvement plan

- 6.1 The NMC's FtP improvement plan was discussed, with reference to the workstreams leading the projects, which include:
 - Referrals - involves working with employers and referrers to ensure that the quality of referrals is improved and ensure local processes – rather than NMC FtP processes - are followed where appropriate.
 - Risk based Interim Order review – reviewing a selection of Interim Order cases to ensure application of guidance is appropriate and public protection and fairness for registrants is upheld.
 - Safeguarding and clinical expertise – review the application clinical and safeguarding advice across FtP to support high quality decision making.
 - Supporting stakeholders through the NMC's processes – providing a more supportive and tailored approach to stakeholders.
- 6.2 The Panel were informed on the impact of the work led by the different workstreams, including the need to build public trust and confidence in FtP, for maternity services to have consistency of FtP approach, and for midwives to apply just culture and fairness in FtP processes.
 - Feedback was sought from the Panel on the engagement plans and what specific areas would the Panel like to revisit and the frequency. In response, the Panel felt that data needs to consider 10-year history of FtP – going back to Morecambe Bay, as well as consider nature of newer concerns.
 - **Action: the NMC to consider the suggestions to consider 10-year history of FtP in its improvement plans, and keep the Panel updated on the plans progress.**

- 6.3 The Panel asked how we effectively the NMC triages referrals, as there is a need to understand where data has come from and consider whether the NMC is a victim of its own success in awareness of our role.
- The NMC does provide this level of detail in its annual report, but it was highlighted there has been a rise in referrals since September 2023, also observed by other healthcare regulatory counterparts.
 - The NMC also highlighted the work of its public referral programme, though did flag there is no set format for the submission of referrals. There was acknowledge of the need to learn from other regulators' approach such as the Parliamentary Health Service Ombudsman (PHSO).
- 6.1 A Panel member felt it might be helpful to consider if below the surface of employer referrals there were wider issues, this would help the NMC understand the motive of the referral. There was a short discussion on how the NMC triages low risk FtP cases.
- 6.2 There was broad consensus that the Plan was moving things in the right direction, and it should be revisited at a later date so members can ask questions.

7 Review of nursing and midwifery practice learning

- 7.1 Perception that stakeholders want us to go further and faster in terms of looking at practice learning.
- 7.2 Council has committed the NMC to reviewing practice learning – need to focus on quality and not just the 'numbers' or skills.
- 7.3 Equally there is a need to factor in current pressures for the workforce throughout the four nations e.g. Wales' consideration of national nursing apprenticeships.
- 7.4 Scope of the review:
- UK wide review of practice learning
 - International practice placement learning models and approaches
 - Identify and pilot innovative approaches to supporting practice learning
 - The use of technology for student supervision and assessment (SSSA).
- 7.5 Stakeholder engagement: involves setting up of community of interest as well as student and public engagement forums.
- 7.6 There will be learning from the NMC's quality assurance activity, namely:
- Annual self-reporting
 - Programme approval and monitoring
 - Evaluation of simulated practice (nursing only)
 - Considering pilot sites for innovative approaches to SSSA
 - Link to England's Workforce Training and Education.
- 7.7 *Questions to Panel:*
- *What makes practice learning effective for student midwives?*
 - *How could practice learning be enhanced for student midwives?*

- 7.8 A Panel member asked how the NMC will consider drop-out rates for midwifery courses – need to not reinvent wheel on practice learning. Equally there's a need to consider short courses for nurses converting to midwifery qualification.
- 7.9 The experience of current students was highlighted:
- For Year 1s: colleagues feel bullied and that their supernumerary status isn't respected.
 - Students on courses are particularly interested in transferability of their degree to practise overseas
 - Discrepancies around individual Approved Education Institutions interpretation of NMC standards
 - Issue around language and lack of respect among midwifery professionals and for women and their families
 - Lack of understanding of position of midwifery students from perspective of more senior midwives.
- 7.10 A Panel member clarified the need to understand what is already 'good' in terms of provision and practice supervisors.
- 7.11 It was flagged that students enjoy their studies when they have good peer relationships, particularly when working with community midwives. Need to consider these relationships:
- Need to consider data from IPSOS National Student Survey for nursing and midwifery students and understand where support for practice learning comes from for students – particularly if they have a disability such as dyslexia – and wider support mechanisms like peers and library services.
- 7.12 Next steps:
- March 2024: the NMC will publish details of provider for independent research
 - Establish a steering group, public advisory and student advisory group
 - Finalise process for identification of innovative practice learning for pilot activity
 - Set up dedicated webpage for those seeking to join community of interest
 - The panel were asked to share any feedback on the NMC's Review of nursing and midwifery practice learning.

8 NMC Maternity and leadership campaigns update

- 8.1 An overview was given of the NMC's maternity campaigns:
- First campaign: aimed at the public – support them and professionals to work together for treatment and care and increase public understanding of what midwives do.
 - Second campaign - aimed at professionals which runs in parallel with the first campaign. Helping to embed standards with positive and inspirational tone.
 - Leadership campaign - aimed at all professions, to show what good leadership looks like and how that links to the care that people receive.
- 8.2 Reach and feedback:
- Public campaign reached over 1.38 million people
 - Professional campaign: 24k+ reach
 - Printed material has gone down well at in-person events
 - Great feedback from the Professional Standards Authority and from the webinar.

- 8.3 Reflections – enthusiasm from stakeholders extended our reach. However, changing behaviour takes time, so the NMC will continue the momentum, through:
- Our Code campaign aimed at students
 - Holistic care campaign with nurses
 - Scoping a joint campaign with GMC about multidisciplinary teams
 - Continue to support the professionals on our register, using data to focus on what will have the most impact.

9 Reflections

- 9.1 A previous Midwifery panel session on work to embed the Standards of Proficiency for Midwives in practice as well as in education, has resulted in a leaflet being created.
- **Action – to send the draft leaflet on the future midwifery standards to Panel members’ feedback.**
- 9.2 A Panel member commented that they appreciated the in-person meeting, but it would be good to have a longer session in future, potentially starting pre-lunch.
- 9.3 The Chair reflected that for remote meetings, three hours is right but in person more time should be allocated.
- **Action: NMC colleagues to look into opportunity for longer in-person meeting.**
- 9.4 Chair remarked that “regular meetings help to build trust” – thanks to those who organised the session, particularly Johnnet Hamilton.
- 9.5 The next meeting will be held on 19 June, 10:00-13:00, online via Teams.

Action Log

Action	By whom	When
To circulate the FtP Interim Order guidance to Midwifery panel members	NMC	When available
Future item advanced in the maternity space – including advanced neonatal Practitioners	NMC	September/December Panel meeting (dependent on when advanced practice work is launched)
Future item on Thirlwall Inquiry and its impact for the wider UK	NMC	December Panel meeting (Thirlwall publication anticipated in Autumn 2024)

To consider the suggestion to revisit 10-year history of FtP in NMC's improvement plans, and keep the Panel updated as improvement plan progresses	NMC	Ongoing (update will be given by Chief Executive & Registrar when workstream progress report is available)
Send feedback to the NMC on draft leaflet on using the Standards of Proficiency for Midwives in practice	Midwifery Panel	Completed
NMC colleagues to look into opportunity for longer in-person meeting	NMC	Under consideration