

**Nursing and Midwifery Council report on the South West LSA  
Local Supervising Authority**

**Date of review: 20 to 23 September 2011**

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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 South West Local Supervising Authority. The NMC has a responsibility to assess that all the requirements regarding supervision of midwives are in place and monitored by the local supervising authority (LSA).

The South West LSA has been identified for review following consideration of the LSA annual report, quarterly quality monitoring reports and the date of the previous LSA review, 15 and 16 September 2009. Other areas such as Fitness to Practise referrals to the NMC and concerns raised by other regulators and members of the public will also be considered.

The review team also undertook a site visit to the Royal Cornwall Hospital (Treliske) to review new working arrangements within the maternity unit against compliance with Rule 6 (Midwives Rules and standards 2004) concerning the responsibility and sphere of practice for midwives

## **1.3 Review findings**

The review team identified that there were public protection issues relating to statutory supervision of midwifery practice in the South West LSA which relate to Rule 12 and Rule 13. The NMC consider six of the fourteen recommendations to be a priority. The review team were not able to confirm that the self assessment completed by the local supervising authority (LSA) was an accurate reflection of the current position. It has been established that the South West LSA meets 41 of the 54 standards, as set out in the NMC *Midwives rules and standards (2004)* with 6 standards being partially met and 7 standards not being met.

The review team found assurance concerning the new working arrangements for registered nurses who will be working within the maternity unit at the Royal Cornwall Hospital. There was a robust induction and training programme with appropriate levels of ongoing support and monitoring. The change in midwifery establishment does need to be monitored in terms of quality and safety of midwifery practice and availability for student midwives of appropriate numbers of midwife sign off mentors.

## **1.4 Recommendations**

We will publish this report on the NMC website at [www.nmc-uk.org](http://www.nmc-uk.org). As a priority the South West LSA is required to draw up a comprehensive plan for the actions required to meet our recommendations. We will publish the LSA action plan alongside this report. We will agree with the LSA, processes to monitor and review the outcomes of this report.

### **The LSA is recommended to as a priority ensure that:**

- all investigations undertaken by supervisors of midwives (SoMs) are reported to the LSAMO
- outcomes from supervisory investigations are agreed by the LSAMO prior to finalisation
- investigatory reports have appropriate interrogation and rigour
- investigations demonstrate: consistency of standard, quality, fairness and application to NMC rules and standards
- the LSA identify any outstanding annual audits for 1 April 2010 – 31 March 2011
- all audit visits that have been carried out are completed and reports returned to Trusts
- support for the LSAMO in the form of an additional midwife

### **Additional recommendations for the LSA**

- All further audit visits adhere to a robust framework for both formal and informal audit visits that meet NMC standards
- Service users are involved in annual audit visits with the LSAMO
- All records pertaining to the statutory supervision of midwives are stored safely and in accordance with LSA standards 3.3 and 3.4
- The current list of SoMs must be accurate and kept up to date
- The author of trust annual reports to the LSA must be a SoM
- Ensure that guidance and support are given to SoMs regarding completion of their annual reports to the LSA for consistency and quality
- For SoMs to demonstrate in their annual report to the LSA how supervisory activities promote safety of the public and effective midwifery practice

- There must be clear reporting systems for SoMs when identified time for supervision is not available
- That development in leadership skills are available for all SoMs
- To complete the analysis of the survey monkey concerning access to SoMs and to disseminate the findings

## 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 authorised to carry out these functions by the Nursing and Midwifery Order 2001 (the order)<sup>1</sup>.

The NMC has responsibility under the order for setting the rules and standards related to how LSAs carry out their function<sup>2</sup>. An overview of these LSA functions, along with a description and overview of the South West LSA can be found in annexe 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 (annexe 2) has been to examine the function of the South West LSA.

### 2.1 Acknowledgements

We acknowledge that the CEO NHS South of England has raised a concern relating to evidence that could have been presented had there not been a number of misunderstandings that prevented the LSA from demonstrating the evidence at the time of the visit.

Whilst we recognise the importance of accuracy of our report it is the responsibility of the LSA to provide evidence in an effective manner such that the review team can process it effectively.

We have agreed to review this additional evidence prior to our return visit in March 2012. This evidence will be commented upon separately from other information that concerns progress against our recommendations.

The NMC would like to thank everyone who participated in the review.

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<sup>1</sup> The Nursing and Midwifery Order 2001, SI 2002 NO253

<sup>2</sup> The Nursing and Midwifery Order 2001, Part V111, Articles 42 and 43

### **3 The NMC review of South West Local Supervising Authority**

#### 3.1 Reason for review

The purpose of this review has been to examine the function of the South West Local Supervising Authority. The NMC has a responsibility to assess that all the requirements regarding supervision of midwives are in place and monitored by the LSA.

The South West LSA has been identified for review following consideration of the LSA annual report, quarterly quality monitoring reports and the date of the previous LSA review, 15 and 16 September 2009. Other areas such as Fitness to Practise referrals to the NMC and concerns raised by other regulators and members of the public will also be considered.



## 4 Review findings

The review team identified that there were public protection issues relating to statutory supervision of midwifery practice in the South West LSA requiring urgent attention. The review team were not able to confirm that the self assessment completed by the local supervising authority (LSA) was an accurate reflection of the current position. From the evidence provided, the review team has established that the South West LSA meets 41 of the 54 standards, as set out in the NMC Midwives rules and standards (2004), with 6 standards being partially met and 7 standards not being met.

The review team established that the recommendation from the 2009 NMC review of South West LSA to appoint a full time administrative assistant has been met. The recommendation made concerning programmes of leadership development for SoMs has not been fully met.

It appeared that where evidence of leadership learning has been provided for the supervisory role, this was under the auspices of strong midwifery management systems rather than through supervisory systems. Although there are high quality clinically focused LSA workshops and conferences there is limited evidence to support how learning from these events has been embedded in practice.

The review team identified that the self assessment document completed prior to the review indicated that compliance would be demonstrated to comply with Rule 12 Midwives Rules and standards 2004: LSA standard 5.2 to *'Implement the NMC's rules and standards for supervision of midwives, through the LSA annual audits.'* However, the evidence submitted prior to the review did not demonstrate this compliance and a wider sample of LSA annual audit visits were reviewed during the visit. It was confirmed that during the audit visits the LSA database was not checked to ensure that it was being utilised correctly by SoMs. The LSA annual audit visit reports were found to be of a generally weak standard and failed to demonstrate that the LSA was meeting this standard.

The quality of annual reports submitted to the LSA by trust supervisors of midwives were generally of a weak standard in that they did not consistently demonstrate how supervisory activities provided clinical leadership, provided protection for the public, or how users informed supervisory activities. Some included management issues, such as the knowledge and skills framework (KSF) and described the annual supervisory review as being 'without structure'. Many did not comment on progress against objectives.

The review team identified that the list of SoMs provided in the evidence folder and the South West LSA annual report 2010-2011 to the NMC was not up to date. For example, the LSAMO is cited as a SoM when in fact the NMC has not permitted LSAMOs to continue in the role of SoM since 2007. In addition, the list did not identify the named author of one of the trust annual reports as being a SoM.

The review team also noted that whilst protected time for SoM was monitored, the SoMs present confirmed that some of their supervisory activities were undertaken in their own time.

The review team were not provided with the evidence that SoMs records, relating to the statutory supervision of midwives are kept for a minimum of seven years. Additionally the review team were not assured that at trust level records are stored securely for 25 years.

Evidence was heard by the review team that a head of midwifery 'commissioned' investigations by SoMs and had a full copy of their report which she also copied to the LSA. This contravenes Rule 12 Midwives Rules and standards 2004: LSA standard 5.13 '*Supervisors of midwives are directly accountable to the local supervising authority for all matters relating to the statutory supervision of midwives*'.

Rule 12 of the *Midwives rules and standards* clarifies that supervisors are directly accountable to the LSA for all matters relating to statutory supervision. Rule 13 (7) states '*that the LSAMO plays a pivotal role in clinical governance by ensuring that the standard of supervision of midwives and midwifery practice meets that required by the NMC*. Rule 15 refers to the need for the LSA to ensure that incidents that cause serious concern in its area relating to maternity care or midwifery practice are notified to the LSAMO. This is further supported by standard 1 in the *NMC Standards for supervised practice (2007)* clearly detailing the need for a supervisory investigation to be independent from a management investigation and that the LSAMO should be informed that a supervisory investigation has commenced '*The local supervising authority should be informed that a supervisory investigation has commenced*.'

A system for the reporting and monitoring of serious incidents and those investigations recommending supervised practice and referral to the NMC are notified to the LSA. This was evidenced by the LSA database and confirmed by the LSAMO and SoMs. However this system results in a lack of assurance for recommendations from investigations that find 'no further action' or developmental support' as they have not been independently scrutinised by the LSA.

This results in a lack of assurance of fairness, transparency and rigour for all supervisory investigations or that learning from all investigations are appropriately fed into trust governance systems.

It is the responsibility of the LSA to provide assurance to us that all investigations meet our standards and that midwives requiring referral to the NMC have been correctly identified. Without independent LSA scrutiny of all outcomes from investigations, this assurance is not possible.

Additionally, the investigatory reports viewed were found to be of poor quality lacking rigour and analysis of the facts to underpin the findings. The LSA must review and agree the outcomes from investigations prior to the report being finalised.

A survey of midwives to audit access to SoMs had been carried out by the LSAMO using survey monkey. Unfortunately the analysis had not been completed at the time of the review.

The review team noted that the LSA annual report (2010-2011) to the NMC stated that each NHS Foundation Trust within the LSA was visited annually for either a formal or informal audit visit. Additionally, the audit visits schedule in the annual reports 2009-2010 and 2010-2011 both detail visits scheduled on a calendar year basis (January-December) rather than 1 April-31 March which is the reporting the period required by the NMC.

This led the review team to seek further clarification as to how many trusts in the region were at foundation status level and how the audit visits were managed.

Annexe 1 in the South West LSA annual report 2010/2011 submitted to the NMC indicates that not all trusts are at foundation level. It was therefore necessary to secure further assurance that all audits had been undertaken in accordance under Rule 13 Midwives Rules and standards 2004: LSA standard 6.5 *'Arrange for the local supervising authority midwifery officer to complete an annual audit in the practice and supervision of midwives within its area to ensure the requirements of the NMC are being met.'* Subsequently the review team established that the full cycle of LSA audits had not been completed and that some of the audit reports had not been written up and fed back to the respective trusts.

The review team had further concerns in respect of the methodology used for the audit visits in that the format for both the formal and informal visits were the same and both appeared to have an informal agenda. There were self-assessment forms completed by SoMs but many lacked commentary from the LSAMO and it was therefore unclear whether there was agreement about the self-assessment. There was little evidence of a follow up of the previous year's recommendations. There was a lack of underpinning evidence for the recommendations made by the LSA. The reports also appear to show that the LSAMO undertook the audits on her own without the input from SoMs from other trusts in the LSA or service user involvement which is seen as best practice by the NMC. This was corroborated by the SoMs, midwives and service users.

As a result of our visit there is a priority to identify whether there are any outstanding annual audit visits for the period 1 April 2010-31 March 2011. All further audits need to have a robust framework for both formal and informal visits that meet our standards and provide assurance about the activities of supervisors of midwives.

On a positive note there have been consistent improvements to the ratio of SoMs to midwives throughout the region and there are now no trusts that do not meet the recommended 1:15 ratio. This is an excellent achievement.

The review team recognised that the South West LSA has particular challenges with regard to the size and geography of the region. There are good practices employed by SoMs to take into account the geographical area and the diversity of working environments, these include group supervision and supervision surgeries.

Student midwives and a service user confirmed that SoMs were approachable and accessible.

We received feedback that the local supervising authority midwifery officer (LSAMO) has established good collaborative working arrangements with universities and is considered to be very approachable, enthusiastic and supportive.

## 5 Recommendations

We will publish this report on the NMC website at [www.nmc-uk.org](http://www.nmc-uk.org). As a priority the South West LSA is required to draw up a comprehensive plan for the actions required to meet our recommendations. We will publish the LSA action plan alongside this report. We will agree with the LSA processes to monitor and review the outcomes of this report.

### **The LSA is recommended to as a priority ensure that:**

- all investigations undertaken by supervisors of midwives (SoMs) are reported to the LSAMO
- outcomes from supervisory investigations are agreed by the LSAMO prior to finalisation
- investigatory reports have appropriate interrogation and rigour
- investigations demonstrate: consistency of standard, quality, fairness and application to NMC rules and standards
- the LSA identify any outstanding annual audits for 1 April 2010 – 31 March 2011
- all audit visits that have been carried out are completed and reports returned to Trusts
- support for the LSAMO in the form of an additional midwife

### **Additional recommendations for the LSA**

- All further audit visits adhere to a robust framework for both formal and informal audit visits that meet NMC standards
- Service users are involved in annual audit visits with the LSAMO
- All records pertaining to the statutory supervision of midwives are stored safely and in accordance with LSA standards 3.3 and 3.4
- The current list of SoMs must be accurate and kept up to date
- The author of trust annual reports to the LSA must be a SoM
- Ensure that guidance and support are given to SoMs regarding completion of their annual reports to the LSA for consistency and quality
- For SoMs to demonstrate in their annual report to the LSA how supervisory activities promote safety of the public and effective midwifery practice
- There must be clear reporting systems for SoMs when identified time for supervision is not available

- That development in leadership skills are available for all SoMs
- To complete the analysis of the survey monkey concerning access to SoMs and to disseminate the findings

## 6 Conclusion

The review team's conclusions and recommendations are based on the documentary evidence presented at the event and meetings with key stakeholders.

The review team identified that there were public protection issues relating to statutory supervision of midwifery practice in the South West LSA that require immediate attention. The review team were not able to confirm that the self assessment completed by the local supervising authority (LSA) was an accurate reflection of the current position. It has been identified that the South West LSA meets 41 of the 54 standards with 6 being partially met and 7 not being met for the LSA as set out in the NMC Midwives rules and standards (2004).

As a priority, the LSA is required to draw up an action plan to address the recommendations in this report and have processes in place to monitor and review the outcomes of our report.

The review team acknowledged the particular challenges with regard to the geography faced by the South West LSA and welcomed the LSAs support in respect of the recommendation that the LSAMO receives assistance in fulfilling the role.

In view of the public protection issues identified, the South West LSA will be formally reviewed again before the end of this reporting year in March 2012. In the meantime, the NMC will agree a process for a monthly review with the LSA to discuss the progress made against the recommendations.

This report will be published on the NMC website

## 7 Evidence of standards being met or not met

### 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	South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a> LSAMO National Forum website <a href="http://www.midwife.org">www.midwife.org</a> Guideline K “Guidelines for completion of the Intention to Practise form by a registered midwife Viewed email sent to all SoMs
1.2 publish annually the date by which it must receive intention to practise forms from midwives in its area	Standard met	South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a> LSAMO National Forum website Guideline K “Guidelines for completion of the Intention to Practise form by a registered midwife Viewed email sent to all SoMs
1.3 ensure accurate completion and timely delivery of intention to practise data to the NMC by 20 April each year	Standard met	South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a> LSAMO National Forum website Guideline K “Guidelines for completion of the Intention to Practise form by a registered midwife Confirmed by NMC

#### Rule 4 – Notifications by local supervising authority

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**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
1.4 ensure intention to practise notifications, given after the annual submission, are delivered to the NMC by the twentieth of each month.	Standard met	<i>LSA database</i>
<b>Review team commentary</b>  The review team received written, verbal and electronic evidence to say that the standards in this Rule have been met.		
<b>Recommendations for rule 4</b>  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
<b>2.1</b> publish how it will investigate any alleged impairment of a midwife’s fitness to practise	Standard met	LSAMO National Forum website Guideline L “ Guideline for an investigation of a midwife’s fitness to practise by a SOM on behalf of the LSA” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
<b>2.2</b> publish how it will determine whether or not to suspend a midwife from practice	Standard met	LSAMO National Forum website Guideline I “Guidance for Supervisors of midwives on Suspension from practice” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
<b>2.3</b> publish the process for appeal against any decision	Standard met	LSAMO National Forum website Guideline L “ Guideline for an investigation of a midwife’s fitness to practise by a SOM on behalf of the LSA” Guideline I “Guidance for Supervisors of midwives on Suspension from practice” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
<b>2.4</b> ensure that midwives are informed in writing of the outcome of any investigation by a local supervising authority.	Standard met	LSAMO National Forum website Guideline L “ Guideline for an investigation of a midwife’s fitness to practise by a SOM on behalf of the LSA” Guideline I “Guidance for Supervisors of midwives on Suspension from practice” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a> Electronic evidence seen

## Rule 5 – Suspension from practice by a local supervising authority

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**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
<p><b>Review team commentary</b></p> <p>The review team have received written, verbal and electronic evidence to say the standards in this Rule have been met.</p>		
<p><b>Recommendations for rule 5</b></p> <p>No recommendations</p>		

## 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
<b>3.1</b> publish local procedures for the transfer of midwifery records from self-employed midwives	Standard met	LSAMO National Forum website Guideline H “Procedure for the transfer of midwifery records from self-employed midwives” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
<b>3.2</b> agree local systems to ensure supervisors of midwives maintain records of their supervisory activity	Standard met	LSAMO National Forum website Guideline B “Guidance for retention and transfer of records relating to statutory supervision” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a> Use of national database enhances secured environment
<b>3.3</b> ensure supervisors of midwives records, relating to the statutory supervision of midwives, are kept for a minimum of seven years	Partially met	LSAMO National Forum website Guideline B “Guidance for retention and transfer of records relating to statutory supervision” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>

## Rule 9 – Records

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**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
<b>3.4</b> arrange for supervision records relating to an investigation of a clinical incident to be kept for a minimum of 25 years	Partially met	Written and electronic records stored centrally by LSAMO
<b>3.5</b> publish local procedures for retention and transfer of records relating to statutory supervision.	Standard met	LSAMO National Forum website Guideline B “Guidance for retention and transfer of records relating to statutory supervision” Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>

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**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
<p><b>Review team commentary</b></p> <p>The review team were not provided with the evidence that SoMs records, relating to the statutory supervision of midwives, are kept for a minimum of seven years. Additionally the review team were not assured that at trust level records are stored securely for 25 years.</p> <p>Lack of evidence to support local secure storage arrangements for records.</p> <p>Assurance not provided by SoM records of local arrangements.</p>		
<p><b>Recommendations for rule 9</b></p> <ul style="list-style-type: none"><li>• All records pertaining to the statutory supervision of midwives are stored safely and in accordance with LSA standards 3.3 and 3.4</li></ul>		

## Rule 11 – Eligibility for appointment as a supervisor of midwives

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**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	LSAMO National Forum website Guideline C “Guideline for the nomination and, selection and appointment of SoMs Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
4.2 maintain a current list of supervisors of midwives	Not met	List within LSA annual report to the NMC not current Printed list provided as evidence to the review was not correct
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	LSA annual report Conference and workshop events Verbal evidence that all SoMs receive a minimum of 15 hours in each registration period Confirmed by SoMs at review

## Rule 11 – Eligibility for appointment as a supervisor of midwives

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**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><b>Review team commentary</b></p> <p>The review identified that the current list of SoMs in the evidence provided and in the annual report was not up to date and included the LSAMO as a SoM and furthermore did not identify the named author of one of the annual reports submitted to them from a trust.</p> <p>The current list of SoMs, appointed to the LSA must be updated without delay and reported correctly in future annual reports to the NMC. As the annual report concerns the activities of SoMs, the LSAMO must ensure that the author of the trusts annual reports to the LSA is a SoM.</p>		
<p><b>Recommendations for rule 11</b></p> <ul style="list-style-type: none"><li>• The current list of SoMs must be accurate and kept up to date</li><li>• The author of trust annual reports to the LSA must be a SoM</li></ul>		

## 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	LSAMO National Forum website Guideline J Confirming Midwives Eligibility to Practise Accessible via South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
5.2 implement the NMC's rules and standards for supervision of midwives	Not met	LSA Audits had not been fully completed prior to writing the LSA annual report to the NMC  The review team have concerns regarding the quality and content of LSA annual audit visit reports and SoM annual reports to the LSA
5.3 ensure that the supervisor of midwives to midwives ratio reflects local need and circumstances (will not normally exceed 1:15)	Standard met	LSA annual report Confirmed by SoMs, newly appointed and student SoMs



## 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
5.4 set up systems to facilitate communication links between and across local supervising authority boundaries	Standard met	LSAMO attendance at National Forum UK meetings Biannual National Conference
5.5 enable timely distribution of information to all supervisors of midwives	Standard met	Contact SoM distribution list viewed Direct communication distributions from LSAMO to all SoMs via email
5.6 provide a direct communication link, which may be electronic, between each supervisor of midwives and the local supervising authority midwifery officer	Standard met	Electronic communication via emails Confirmed by SoMs present

## 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><b>5.7</b> 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 of meetings of local SoMs reflecting LSAMO attendance – viewed minutes Confirmed by SoMs Ongoing programme of workshops, annual conferences, information cascade on serious untoward incidents and points of note</p>
<p><b>5.8</b> monitor the provision of protected time and administrative support for supervisors of midwives</p>	<p>Standard met</p>	<p>LSA Audits Confirmed by SoMs and contact SoMs</p>
<p><b>5.9</b> promote woman-centred, evidenced-based midwifery practice</p>	<p>Partially met</p>	<p>LSA annual audit visits SoMs annual conference programme – viewed, lacked impact analysis Lack of evidence presented to demonstrate compliance; service users were not able to provide assurance in relation to this standard.</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><b>5.10</b> ensure that supervisors of midwives maintain accurate data and records of all their supervisory activities and meetings with the midwives they supervise</p>	<p>Not met</p>	<p>Not demonstrated in LSA audit visits and SoM annual reports to the LSA LSA national database not utilised correctly Not consistently confirmed by attendees at review</p>
<p><b>5.11</b> supervisors of midwives are available to offer guidance and support to women accessing maternity services</p>	<p>Standard met</p>	<p>Information given to all women booking for maternity care within the South West, confirmed by SoMs NMC leaflet use - confirmed by SoMs</p>
<p><b>5.12</b> supervisors of midwives give advice and guidance regarding women-centred care and promote evidence-based midwifery practice</p>	<p>Standard met</p>	<p>Programmes for workshops and conferences viewed</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><b>5.13</b> supervisors of midwives are directly accountable to the local supervising authority for all matters relating to the statutory supervision of midwives</p>	<p>Not met</p>	<p>LSAMO National Forum website            Guideline C “Guideline for the nomination and, selection and appointment of SoMs            South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>            One head of midwifery confirmed she had commissioned supervisory investigations and received the report as a manger            Only serious incidents and those investigations recommending supervised practice or referral to the NMC are notified to the LSAMO – LSA database viewed, confirmed by LSAMO and SoMs            Poor quality investigatory reports that lack rigour and analysis</p>
<p><b>5.14</b> supervisors of midwives provide professional leadership</p>	<p>Partially met</p>	<p>SoMs provided with leadership learning opportunities under a management framework but nothing specific identified from LSA - confirmed by LSAMO, SoMs and midwives            Confirmed by midwife who underwent a supervised practice programme</p>
<p><b>5.15</b> supervisors of midwives are approachable and accessible to midwives to support them in their practice.</p>	<p>Standard met</p>	<p>On call rotas available            Confirmed by midwives, student midwives and a service user            Survey Monkey carried out and viewed but analysis not available at review</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><b>Review team commentary</b></p> <p>The review team identified that the self assessment document completed by the LSAMO prior to the review indicated that compliance would be demonstrated through the LSA annual audits. However the evidence submitted prior to the review did not demonstrate this compliance and a wider sample of LSA audits were viewed. These audits were generally of a weak standard and did not demonstrate that the LSA was fully meeting this standard. The quality of Trust annual reports to the LSA was also of a weak standard with several including management issues such as the Knowledge and Skills Framework (KSF) and one describing the annual supervisory review as being without structure. Furthermore the LSAMO confirmed that she did not check that the LSA database was being utilised correctly by SoM's during the audit visits.</p> <p>The review team also noted that whilst protected time was monitored, the SoMs present highlighted that some of their supervisory work was in fact carried out in their own time.</p> <p>In addition whilst good quality workshops and conferences were being carried across the LSA there was limited evidence to suggest that changes in practice were embedded as a result.</p> <p>Evidence was heard by the review team that that a head of midwifery 'commissioned' investigations by SoMs and had a full copy of their report which she also copied to the LSAMO. SoMs are directly accountable to the LSA for all matters relating to statutory supervision. All concerns relating to maternity care or midwifery practice must be notified to the LSAMO. The NMC 'Standards for supervised practice' states that a supervisory investigation needs to be independent from a management investigation and that the LSAMO should be informed that a supervisory investigation has commenced.</p> <p>The review team noted that only serious incidents and those investigations recommending supervised practice or referral to the NMC are notified to the LSAMO. This was borne out by the LSA database and confirmed by the LSAMO and SoMs. The investigatory reports viewed were seen to be of poor quality and lacked interrogation of the facts and rigour.</p> <p>SoMs need to demonstrate leadership independent of the management framework and not as a consequence to their substantive management role.</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><b>Recommendations for rule 12</b></p> <p>As a priority ensure:</p> <ul style="list-style-type: none"> <li>• all investigations undertaken by supervisors of midwives (SoMs) are reported to the LSAMO</li> <li>• outcomes from supervisory investigations are agreed by the LSAMO prior to finalisation</li> <li>• investigatory reports have appropriate interrogation and rigour</li> <li>• investigations demonstrate: consistency of standard, quality, fairness and application to NMC rules and standards</li> </ul> <p>Ensure that guidance and support are given to SoMs regarding completion of their annual reports to the LSA for consistency and quality</p> <p>For SoMs to demonstrate in their annual report to the LSA how supervisory activities promote safety of the public and effective midwifery practice</p> <p>Promote statutory supervision within the LSA to ensure that supervisory activities demonstrating safety of the public and effective midwifery practice are evidenced by supervisors of midwives in their annual reports to the LSA</p> <p>That development in leadership skills are available for all SoMs</p> <p>To complete the analysis of the survey monkey concerning access to SoMs and to disseminate the findings</p> <p>There must be clear reporting systems for SoMs when identified time for supervision is not available</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	LSAMO would be appointed as per NMC Standards Confirmed by NMC
6.2 involve a NMC nominated and appropriately experienced midwife in the selection and appointment process	Standard met	LSAMO would be appointed as per NMC Standards Confirmed by NMC
6.3 manage the performance of the appointed local supervising authority midwifery officer	Standard met	Directly accountable to CEO Performance managed by Nurse Director. Confirmed by LSAMO and Nurse Director

## Rule 13 – The local supervising authority midwifery officer

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**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><b>6.4</b> provide designated time and administrative support for a local supervising authority midwifery officer to discharge the statutory supervisory function</p>	<p>Standard met</p>	<p>Confirmed by LSAMO Confirmed by administrative officer</p>
<p><b>6.5</b> 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>Not met</p>	<p>Not all annual LSA audits undertaken within practice year April 1 2010-March 31 2011 Not all LSA annual audit reports available in documented format Those annual audit reports that were written up were of a weak standard and there was no distinction between formal and informal audits No involvement of SoMs from other trusts within the LSA or service users to support the LSAMO in undertaking formal audits</p>



## Rule 13 – The local supervising authority midwifery officer

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**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><b>Review team commentary</b></p> <p>The review team identified that the annual report stated that each NHS Foundation Trust was visited for either a formal or informal visit. Review of the evidence raised concerned about how many of the seventeen trust audit visits were undertaken and how many audit reports were completed and returned in a timely manner to the trusts. The LSAMO confirmed that the full cycle of LSA audits had not been completed and some of the audits reports had not been written up.</p> <p>In addition the review team had further concerns in respect of the methodology used for the audit visits. The format for both the formal and informal visits was the same with both appearing to have an informal agenda. Self-assessment forms completed by SoMs lacked commentary from the LSAMO with no clarity regarding agreement of the recommendations. The reports also appear to show that the LSAMO undertook the audits without SoMs from out with the area, which is seen as best practice by the NMC.</p>		
<p><b>Recommendations Rule 13</b></p> <p>As a priority:</p> <ul style="list-style-type: none"><li>• the LSA to identify any outstanding annual audits for 1 April 2010 – 31 March 2011</li><li>• all audit visits that have been carried out are completed and reports returned to Trusts</li></ul> <p>All further audit visits adhere to a robust framework for both formal and informal audit visits that meet NMC standards</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
<p><b>7.1</b> develop mechanisms with NHS authorities and private sector employers to ensure that a local supervising authority midwifery officer is notified of all such incidents</p>	<p>Partially met</p>	<p>South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>            LSAMO National Forum website            Guideline L “ Guideline for an investigation of a midwife’s fitness to practise by a SOM on behalf of the LSA            LSA database only holds supervisory investigation information relating to serious adverse events or investigations recommending supervised practice or referral to the NMC.            Evidence heard that not all investigations are reported to LSAMO by SoMs, only those with a serious adverse clinical outcome or recommending supervised practice or referral to NMC            No mechanism for a near miss to be identified and reported</p>
<p><b>7.2</b> publish the investigative procedure</p>	<p>Standard met</p>	<p>LSAMO National Forum website            Guideline L “ Guideline for an investigation of a midwife’s fitness to practise by a SOM on behalf of the LSA Guideline</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
7.3 liaise with key stakeholders to enhance clinical governance systems	Standard met	Attendance of LSAMO at Clinical Governance meetings Confirmed by risk managers and clinical governance leads Joint working with the Centre for Maternal and Child Enquiries (CMACE) – agenda viewed
7.4 publish the process for the notification and management of complaints against any: - local supervising authority midwifery officer - supervisor of midwives	Standard met	LSAMO National Forum website Guideline G “Process for the notification and management of complaints against a SoM or an LSAMO including appeals” South West website <a href="http://www.southwest.nhs.uk">www.southwest.nhs.uk</a>
7.5 publish the process for removing from appointment a: - supervisor of midwives - local supervising authority midwifery officer	Standard met	LSAMO National Forum website Guideline D “Guidance for Poor Performance South West SHA Disciplinary process – policy viewed

## 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><b>7.6</b> publish the process for appeal against the decision to remove:</p> <ul style="list-style-type: none"> <li>- an officer</li> <li>- a supervisor of midwives</li> <li>- a local supervising authority midwifery officer</li> </ul>	Standard met	South West SHA Disciplinary process – policy viewed LSAMO National Forum website Guideline G “Process for the notification and management of complaints against a SoM or an LSAMO including appeals”
<p><b>7.7</b> 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"> <li>- local supervising authority midwifery officer</li> <li>- supervisor of midwives.</li> </ul>	Standard met	South West SHA Disciplinary process – policy viewed LSAMO National Forum website Guideline G “Process for the notification and management of complaints against a SoM or an LSAMO including appeals”

## Rule 15 – Publication of local supervising authority procedures

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**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><b>Review team commentary</b></p> <p>The review team were concerned that there was no mechanism for identifying a near miss and that only investigations involving supervised practice or referral to the NMC were reported to the LSAMO and this is linked to the findings in standard 5.13 of this report.</p>		
<p><b>Recommendations for rule 15</b></p> <p>As a priority ensure:</p> <ul style="list-style-type: none"><li>• all investigations undertaken by supervisors of midwives (SoMs) are reported to the LSAMO</li><li>• outcomes from supervisory investigations are agreed by the LSAMO prior to finalisation</li><li>• investigatory reports have appropriate interrogation and rigour</li><li>• investigations demonstrate: consistency of standard, quality, fairness and application to NMC rules and standards</li></ul>		

## 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	LSA annual report
8.2 details of how midwives are provided with continuous access to a supervisor of midwives	Standard met	LSA annual audits
8.3 details of how the practice of midwifery is supervised	Partially met	LSA annual report April 1 2010-March 31 2011 to the NMC is based on weak evidence Weak and incomplete information in supervisors annual reports to the LSA Lack of external scrutiny in the annual audit visits (lack of user representation, external SoM) Annual LSA audit visits, the framework is not robust and lacks LSA analysis including reflection on past achievements, challenges and forward planning

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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
<b>8.4</b> evidence that service users have been involved in monitoring supervision of midwives and assisting the local supervising authority midwifery officer with the annual audits	Not met	Users are not routinely involved in LSA annual audit visits Information supplied by SoMs in their annual reports to the LSA do not demonstrate evidence that users are informing or monitoring local supervisory activity The role of service users is not evidenced in LSA annual audit reports Verbal evidence given by SoMs and service users do not provide assurance that this standard was met
<b>8.5</b> evidence of engagement with higher education institutions in relation to supervisory input into midwifery education	Standard met	LSA Annual Report LSAMO teaches on programmes Confirmed by lead midwives for education
<b>8.6</b> details of any new policies related to the supervision of midwives	Standard met	LSA Annual Report Currently under review No available on 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
8.7 evidence of developing trends affecting midwifery practice in the local supervising authority	Standard met	LSA Annual Report
8.8 details of the number of complaints regarding the discharge of the supervisory function	Standard met	LSA Annual Report
8.9 reports on all local supervising authority investigations undertaken during the year	Not met	LSA database only holds supervisory investigation information relating to serious adverse events or investigations recommending supervised practice or referral to the NMC. This was confirmed by LSAMO and SoMs Evidence heard that not all investigations are reported to LSAMO by SoMs, only those with a serious adverse clinical outcome or recommending supervised practice or referral to NMC No mechanism for a near miss to be identified and reported are notified to the Viewed poor quality investigatory reports that lack analysis and rigour



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**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><b>Review team commentary</b></p> <p>The review team noted that the audit reports appear to show that the LSAMO undertook the annual audits without service user involvement and this was corroborated by the SoMs, midwives and service users.</p> <p>As in Standard 5.13 the review team noted that only serious incidents and those investigations recommending supervised practice or referral to the NMC are notified to the LSAMO. This was borne out by the LSA database and confirmed by the LSAMO and SoMs. The investigatory reports viewed were seen to be of poor quality and lacked interrogation of the facts and rigour</p>		
<p><b>Recommendations for rule 16</b></p> <ul style="list-style-type: none"><li>• Service users are involved in annual LSA audit visits with the LSAMO</li></ul>		

## 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](http://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.

## **The South West LSA**

The South West has the largest area of the nine English regions at 23,837 sq km – more than 18% of England.

The South West peninsula extends over 350 km from the south-western tip of Cornwall to the northern border of Gloucestershire and the eastern borders of Dorset and Wiltshire and has extremely varied geology and topography.

Even though the distance is slightly further, it takes almost an hour less to travel by car from the north of the region to Scotland than it does to travel from the north of the region to the tip of Cornwall.

The region has the highest percentage of rural land of any English region, with around three quarters of the total land area being part of an agricultural holding.

The South West has over 60% of the heritage coast of England. Almost a third of the region is within an Area of Outstanding Natural Beauty and the two National Parks of Dartmoor and Exmoor make up 7% of the land area.

The South West has a total population of just over five million which is approximately 10% of the English total. It has the lowest population density of any English region - 211 persons per sq km. The English population density is 387 persons per sq km. There is a great variation in population density across the region, ranging from Bristol - 3,621 persons per sq km to West Devon district - 44 persons per sq km.

Between 1998 and 2008, the South West had one of the fastest growing populations among the English region at 6%, almost one and a half times the 4.2% growth of England over the same period. The population increase is largely due to people moving into the region.

A higher percentage of the South West population live in rural districts than in any other English region - about 56%. These 31 districts have seen a higher recent rate of population growth than the 14 urban districts in the region, increasing by 7.5% between 1995 and 2005, more than twice the percentage rise for South West urban districts - 3.7%. The South West has the lowest percentage of people living in urban settlements of any English region. It has the most people, and highest percentage of people, living in villages, hamlets or isolated dwellings and in remote locations.

The main urban areas in the South West are Bristol, Bournemouth and Poole, Plymouth, Swindon, Gloucester, Torbay, Cheltenham and Exeter. These eight areas include more than a third of the population of the region. Bristol Urban Area has a population of more than half a million people and is the ninth largest urban area by population in England and Wales. The Bournemouth Urban Area, which includes Poole and Christchurch is the 13th largest.

According to the Office of National Statistics projections, the population of the South West is expected to grow by almost half a million people between 2003 and 2018 and by another 325,000 by 2028.

### **Profile of the South West LSA**

There are 17 acute units with 15 stand alone midwifery units.

These are:

- Dorset County Hospital NHS Foundation Trust
- Gloucestershire Hospitals NHS Foundation Trust (St Paul's Cheltenham and Stroud)
- Great Western Hospitals NHS Foundation Trust
- North Bristol NHS Trust (Southmead)
- Northern Devon Healthcare NHS Trust
- Plymouth Hospitals NHS Trust
- Poole Hospital NHS Foundation Trust
- Royal Cornwall Hospitals NHS Trust (Helston and Penrice)
- Royal Devon and Exeter NHS Foundation Trust (Tiverton, Okehampton and Honiton)
- Salisbury NHS Foundation Trust
- South Devon Healthcare NHS Foundation Trust (Newton Abbot)
- Taunton and Somerset NHS Foundation Trust (Mary Stanley Wing)
- (The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust)
- University Hospitals Bristol NHS Foundation Trust
- (Weston Area Health NHS Trust)
- Yeovil District Hospital NHS Foundation Trust
- Royal United Hospital Bath NHS Trust (Chippenham, Frome, Paulton, Shepton Mallet, Trowbridge)

Additional contractual arrangements for Guernsey and Jersey Boards of Health  
Brackets indicate stand alone midwifery led facilities.

## **Maternity services in the South West LSA**

The total number of babies born in the South West in 2010/11 was 59,065 compared to 57,681 in 2009/10.

The largest NHS Trust hospitals, St Michael's Bristol, Southmead Hospital Bristol and Derriford Hospital Plymouth provide facilities for 20,000 births per year. The smallest maternity units in Shepton Mallett, Frome and Helston provide care for 300 births per year. The area has a combination of urban and rural settings covering a large geographical area.

A total of 3,430 midwives notified their intention to practise within the boundary of NHS South West Local Supervising Authority during 2010/2011.

There were 25 midwives who notified their intention to practise as self employed during 2010/11.

## **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](http://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: Vanessa Shand

Role in review team: Midwife registrant and report author

Other roles:

Name: Mary Vance

Role in review team: LSAMO

Other roles: LSAMO North of Scotland

Name: Claire Bonnet

Role in review team: Lay reviewer and chair

Other roles: Solicitor

Name: Helen Pearce

Role in review team: NMC representative

Other roles: NMC Midwifery Adviser



**Key people met during the review**

- SHA Chief Executive Officer
- SHA Director of Patient Care, Nursing and Workforce
- LSAMO
- Contact Supervisor of Midwives
- Supervisors of Midwives
- Assistant Director Quality and Patient Safety Improvement
- Associate Director of Workforce
- Associate Director of Nursing
- Trust Chief Executives
- Trust Directors of Nursing
- Trust Divisional Managers
- Heads of Midwifery
- Lay representatives
- Midwife Principles
- Lead Midwives for Education
- Trust Business Manager
- Trust Clinical Director
- Mentor assessors
- Risk Managers
- Midwives
- Clinical Governance team
- Risk Managers
- Independent midwives

## Programme for the review

### NMC review framework

#### South West LSA

Wednesday 21 September 2011

### Programme

(Tuesday 20 September at 16.00 – Val Beale and NMC Panel, meeting at the Holiday Inn, Taunton)

Time	Activity	Attendance	Contact
09.15	Refreshments and introduction from the NMC Panel to the Local Supervising Authority		
09.30 10.00	Introduction from NHS South West LSA to the Review Team Meet with Liz Redfern CBE, Director of Patient Care, Nursing and Workforce Meet with Sir Ian Carruthers, Chief Executive Officer	Sir Ian Carruthers OBE Liz Redfern CBE Val Beale	
10.30	Contact Supervisor of Midwives	Vicky Tinsley (Royal United Hospital Bath NHS Trust) – <b>attending in person</b> Faye Doris (Royal Devon and Exeter NHS Foundation Trust) – <b>attending in person</b> Lyn Grant-Jones (Dorset County Hospital NHS Foundation Trust) – <b>attending in person</b> Belinda Cox (University Hospitals Bristol NHS Foundation Trust)	
11.30	Refreshments		

11.45	Meet with Supervisors of Midwives	Jane Podkolinski (Salisbury NHS Foundation Trust) – <b>attending in person</b> Frances Williamson (Salisbury NHS Foundation Trust) – <b>attending in person</b> Cathy Molloy (Gloucestershire Hospitals NHS Foundation Trust) – <b>attending in person</b> Sue Dennett (Stroud Maternity Unit) – <b>attending in person</b> Jo Hartley (Dorset County Hospital NHS Foundation Trust)	
12.45	In camera session NMC panel only		
13.15	Lunch		
13.45	Meet with the South West Strategic Health Authority:  Assistant Director Quality and Patient Safety Improvement Associate Director of Nursing	Paul Smith  Phil Potter	<b>Both attending in person</b>
14.15	Link to various staff groups at Weston Area Health NHS Trust	Chief Executive – Peter Colclough Director of Nursing (TBC) Divisional Manager – Kath Roberts Head of Midwifery – Alison Deakins Supervisors of Midwives Midwives Lay rep	<b>All attending by telephone.</b>  <b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
14.45	Links to Lay representatives, MSLC chairs, additional contact supervisors and midwives	Carol Axon (Royal Devon and Exeter NHS Foundation Trust) – <b>by telephone</b> Sally Loven (Poole Hospital NHS Foundation) – <b>by telephone</b> Jackie Oxborrow (Poole Hospital NHS Foundation) – <b>by telephone</b> Telephone contact with: additional Contact SOMS and MSLC chairs and lay reps	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
15.15	Refreshments		

15.30	In camera session NMC panel only		
16.00	Meet with LSA Midwifery Officer – review of additional evidence and questions.	Val Beale	

## NMC review framework

### South West LSA

Thursday 22 September 2011

#### Programme

Time	Activity	Attendance	Contact
09.00	Refreshments  Meet with Midwife Principles and Lead Midwives for Education	Faye Doris (University of Plymouth) – <b>by telephone</b> Julie Hobbs (University of the West of England) – <b>attending in person</b> Jen Leamon (Bournemouth University) - <b>by telephone (also covering Midwife Teachers in this session)</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
09.30	Meet with Student Midwives	Student Midwives x six (two from each University) – <b>by telephone</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
09.45	Meet with South West Strategic Health Authority Associate Director of Workforce	Christine Whitehead	<b>Attending in person</b>
10.00	Telephone contact with Midwife Teachers	Sheena Payne (University of the West of England) – <b>by telephone, to be contacted on 07732 555820</b> Jen Leamon (Bournemouth University) – to be covered in 09.00 session.	

10.15	Refreshments		
10.30	Meet with Mentor Assessors/Midwife that has undergone supervised practice	Annie Reid and Patricia Heal (Royal Devon and Exeter NHS Foundation Trust) – <b>attending in person</b> Sue Dawe and Poole Hospital NHS Foundation Trust team - <b>by telephone</b> Judy Atkin (Yeovil District Hospital NHS Foundation Trust) – <b>attending in person</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
11.00	Newly Designated Supervisors of Midwives	Allison Crabbe (Dorset County Hospital NHS Foundation Trust) - <b>by telephone</b> Sandra Scott (Dorset County Hospital NHS Foundation Trust) – <b>by telephone</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
11.30	Midwives plus Mentor assessors	Christina Rattigan (Great Western Hospital NHS Foundation Trust) – <b>by telephone</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
12.00	Assistant Programme Manager for Children, Young People and Maternity (Safeguarding Lead)	Ian Tucker	<b>Attending in person</b>
12.15	Lay representatives	Claire Williams (Dorset County Hospital NHS Foundation Trust) - <b>by telephone</b> Julie Backholer (South Devon Healthcare NHS Foundation Trust) - <b>by telephone</b>	<b>Dial in: 0844 473 7458</b> <b>Pin: 047608</b>
12.40	Presentation on statistical dashboard	Helen Saad (South Devon Healthcare NHS Foundation Trust)	<b>Attending in person</b>
13.00	Lunch		
13.30	In camera session NMC panel only		

14.00	Independent Midwife	Sue Learner (Independent Midwife) – <b>by telephone, to be contacted on 0117 927 6131</b>	
14.00	Risk Managers	Janet Pollard (University Hospitals Bristol NHS Foundation Trust) – <b>by telephone, to be contacted on 0117 342 5559</b> Sarah Merritt (Royal United Hospital Bath NHS Trust) – <b>attending in person</b>	
14.20	Telephone contact with: Director of Nursing Services  Business Manager  Clinical Director	Liz Childs (South Devon Healthcare NHS Foundation Trust) Peter Adey (Royal Devon and Exeter NHS Foundation Trust) Ann Remmers (North Bristol NHS Trust) – discussion to take place at HOMS meeting.	
14.40	CTG Interpretation Training and Assessment	Alison Thoburn (South Devon Healthcare NHS Foundation Trust)	<b>Attending in person</b>
15.00	Refreshment  In camera session NMC Panel only		
15.30	Feedback from Review Team to LSA		

## Day Three – Friday 23 September 2011

Visit to Royal Cornwall Hospital NHS Trust

Meetings with Chief Executive, Divisional Manager, Clinical Governance team, Risk Manager, Head of Midwifery, Supervisors of Midwives, Midwives, Student Midwives, Service Users and Lay Representatives.

## **Evidence viewed**

### **Annual Audit Reports**

- NHS Gloucestershire Northern Devon Healthcare NHS Trust
- Plymouth Hospitals NHS Trust
- Poole Hospital NHS Foundation Trust
- Royal Devon and Exeter NHS Foundation Trust
- States of Guernsey
- States of Jersey
- The Royal Bournemouth
- Weston Area Health NHS Trust

### **Annual Reports to NMC**

- 2009-2010
- 2010-2011

### **CMACE**

- CMACE – Saving Mothers Lives Conference Glasgow programme
- CMACE Chapter 13.

### **Emails**

- timely distribution of information to SoMs
- information re content of Annual Trust reports
- LSA audit dates
- notification of serious incident to LSAMO
- Patient Safety Action Team Meetings for 2010

### **HEI reports**

- Plymouth AEI Nursing and Midwifery Annual Report 2011

### **LSA database**



- list of supervisors of midwives
- number of midwives by Trust
- SoM by age profile by Trust

### **Minutes**

- LSAMO National Forum

### **NMC report on the review of the South West LSA**

- 16/10/2009
- action plan re NMC Recommendations following review of South West LSA

### **PowerPoint presentations**

- Presentation from Director of Patient Care, Nursing and Workforce
- Presentation from LSAMO
- Presentation on statistical dashboard
- Strategic Executive Information System (STEIS)

### **Programmes**

- Conference
- seminars
- workshops

### **RCOG**

- Launch of Fetal Monitoring

### **Record keeping Audit 2010**

- Royal Cornwall Hospitals – SoMs

### **SoM on call Rota**

- Royal Cornwall Hospitals

### **South West LSA**

- Competencies for Supervisors of Midwives South of England LSA's
- Draft proforma for reporting of supervisory investigations
- Key Facts

- LSA self assessment form
- Risk Register
- SHA process for performance management
- Supervisory investigations
- Survey Monkey questionnaire

### **Trust annual reports**

- St Michaels Hospital Bristol
- Royal Cornwall Hospitals
- The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
- Weston Area Health Trust

Trust Nurse Executive attendance list

Websites

- [www.midwife.org](http://www.midwife.org) for national guidelines
- [www.southwest.nhs.uk](http://www.southwest.nhs.uk) for policies and links