



**Excellent
care** with
compassion

Student Midwives Welcome Booklet - Clinical Placements at LTHTR



Introduction

Hi Student Midwives!

Welcome to the life of a Student Midwife. The next 2 or 3 years is going to be both rewarding and yet challenging at times but you will get through it with the help of; other students, Qualified Midwives on your clinical placements, the Clinical Placement Support Team and University.

This booklet has been created with the aim of providing you with guidance and support and to reduce any nerves you may have, prior to starting your clinical placements.

This handbook is for you to gain an understanding of what to expect on your clinical placements at Lancashire Teaching Hospitals NHS Foundation Trust and will go through a range of information to help you on your journey to becoming a Qualified Midwife. Enjoy!



Trust Values

At Lancashire Teaching Hospitals, trust values are at the forefront of care we provide for women, babies and families throughout their maternity care.

These include:

- Caring and Compassionate – We treat everyone with dignity and respect, doing everything we can to show we care.
- Recognise Individuality – We respect, value and respond to every person's individual needs.
- Seeking to Involve – We will always involve you in making decisions about your care and treatment and are always open and honest.
- Team Working – We work together as one team and involve patients, families and other services to provide the best care possible.
- Taking Personal Responsibility – We each take personal responsibility to give the highest standards of care and deliver a service we can always be proud of.

Confidentiality

Students are reminded that all information regarding women, babies and their families are confidential and as such should not be divulged to anyone who does not have the right to this information. Students are referred to their NMC “The Code” and “Midwives rules and standards”. **Please also note guidelines with regards to the use of social networks. Please do not post pictures of yourself in uniform or input information on social media that relates to work or women in your care. This is a disciplinary action if found to do so.**

Uniform Policy

It is important that whilst in any clinical area you wear your student uniform/scrubs (depending on the area you are working in). If you do not adhere to the uniform policy it may be likely that you will be challenged by a member of staff, the Clinical Placement Support Team or other students. You will only be given one warning and after that you will be sent home from placement and will be required to make up your clinical placement hours that you missed.

You will be given 4 tunics and 3 pairs of trousers which is organised by the University.

If a student becomes pregnant, they must contact their Course Leader at their University who will provide details of who to contact regarding obtaining a maternity uniform.

Student uniforms are to be worn in all areas.

Uniform Dress Code:

- Appropriate black footwear – black, flat, enclosed toes, lace up/ slip on type, wipe clean or washable. (If ordering footwear via Alexandra UK, students are entitled to University of Bolton's discounted price).
- Hair **must** be kept clean, neat and tidy and kept off the shoulders at all times. Facial hair must be well groomed.
- Make up should be kept discreet – false eyelashes are **not permitted**.
- Jewellery; earrings must be plain studs whilst wearing only 1 pair, plain wedding band with no stones.
- Only a fob watch can be worn.
- Nails must be kept short and clean. Nail varnish and false nails are **not permitted**.
- Trust ID badges containing photo **must** be worn and be visible at all times.
- Cardigans/sweatshirts may be worn for warmth; however, they **must be removed** when carrying out any clinical duties.
- Full length coat to be worn when on community placement to cover up uniforms.
- Due to infection control risks, especially since the beginning of the Covid-19 pandemic, uniforms are **ONLY** to be worn on shift. You are required to arrive on shift in your own clothes and change into your uniform at the hospital. On finishing your shift, you are required to change back into your own clothes. If you fail to do so you may be challenged.

- There is a changing room on the 1st floor between the Birth Centre and Maternity A.
- Uniforms should be washed on their own following manufactures guidelines
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- For learners on a community placement please see below advice on uniform.
- If the midwife is working in the community it is accepted that they will start and finish their day from home and in uniform and will wear this in and out of many homes/community venues, they must ensure use of PPH for each contact put on prior to entry into a home and removed on exit. If they come into the unit for any reason they are expected to use PPE like anyone else.
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- On completion of the working day the midwife should remove her uniform as soon as in the house and wash it..

Smoking or vaping on the University or NHS Trusts premises is **not permitted**. Although there are designated areas, please note that cigarette smoke odours can be offensive to others. Any breach of either the University or NHS Trusts policies will lead to disciplinary procedures.

A professional appearance must always be maintained as you are both an advocate for the women and families you are caring for and an ambassador for your University.

ID Badges

- Your ID badges should be issued at Trust induction. If you do not receive your ID badge please contact the Clinical Placement Support Team.
- It is important that when you obtain your ID badge you wear it in accordance with the Trust Policy.
- Your ID badge must be worn at every shift with photograph and written details visible.
- DO NOT lend your ID badge to anyone else or allow anyone else to use it.

- You will need to contact the Maternity Managers or Matrons to give you access via you badge for areas within the Sharoe Green Unit as it is a secure area.

Transport

As a student, you organise your own placement allocated at either (RPH) or Chorley



will be required to transport to your allocation. You may be Royal Preston Hospital (RPH) or Chorley Hospital (CDH).

Public Transport

Number 23 & 19 buses run from Preston Bus Station to RPH. The Stagecoach number 125 bus runs from RPH to CDH. Please visit: www.prestonbus.co.uk and www.stagecoachbus.com for local bus timetables.

10% discounted Preston Bus weekly and monthly Easirider bus passes are available from the General Office at RPH on the production of your Trust ID badge. This is situated at the front of the hospital (near the blood clinic).

Alternatively, you can apply for a Preston Bus Pass from Preston Bus Station. The current cost is £90 per term. These can only be purchased from the Travel Office at Preston Bus Station from 9.00 am to 5.00 pm, Monday to Friday. Please ensure you adhere to social distancing and face-covering guidelines when attending.

You are required to provide a 'letter of proof' to receive the discounted pass which your Year Co-ordinator will be happy to provide by emailing UndergradSTAPS@LTHTR.nhs.uk. These letters can also be requested for landlords, bank/building societies, etc.

Weekly discounted bus vouchers for travel on Stagecoach Chorley Network are available from the General Office at CDH on the production of your Trust ID badge.

Car Parking

As with any busy organization, car parking can be problematic. There is a car parking scheme, which you can join, and passes are allocated according to the type of placement hours you are working. If you require Car Parking you can email the Car Park Help Desk at CarparkHelpdesk@lthtr.nhs.uk

Free secure bicycle bins are available to all who wish to travel via bicycle.

Shuttle Bus

The Trust provides a free shuttle bus service between RPH and CDH. The bus stops are at the Gordon Hesling Block entrance at RPH and the main entrance at CDH.

It is important you are not in uniform when getting on the shuttle bus. If you are then you will be refused regardless of what time it is. This incidence will be reported to a member of the clinical placement support staff and the University.

Arrival/Departure Points

- Chorley & South Ribble Hospital - Main Entrance (near General Office).
- Royal Preston Hospital - Outside Gordon Hesling Block entrance.
- **(No arrival or departure from PCT at Royal Preston Hospital)**

Key: Staff Service ONLY Staff, Patients & Visitors Service
Children must be accompanied by parent or guardian at all times and use a seat belt or an appropriate child car restraint / booster cushion

Timetable Mondays to Fridays (Except Bank Holidays)

Depart from Royal Preston	Arrive at Chorley
7.20am	7.40am
8.15am	8.45am
9.20am	9.45am
10.15am	10:35am
11:05am	11:25am

Depart from Chorley	Arrive at Royal Preston
7:45am	8.10am
8.50am	9.15am
9.50am	10.10am
10:40am	11:00am
11:30am	11:50am

11:55am	12:15pm
12:45pm	1.10pm
Deleted*	Deleted*
2.30pm	2.50pm
3.20pm	3.40pm
4.10pm*****	4.30pm
5.00pm	5.25pm
5.55pm	6.15pm

12:20pm	12:40pm
1.15pm	1:35pm
Deleted*	Deleted*
2.55pm	3.15pm
3.45pm*****	4.05pm
4.35pm	4.55pm
5.30pm	5.50pm
6:20pm	6:40pm

Royal Preston Hospital



- Bus Stop 1 Orbit Bus 88A, C, Hospital Bus 19
- Bus Stop 2 Bus 22, 23, 210, 211
- Bus Stop 3 Bus 22, 23, 210, 211
- Bus Stop 4 Bus 19, 22, 23, 210, 211
- Bus Stop 5 Bus 19, 22, 23, 210, 211
- Bus Stop 6 Bus 22
- Bus Stop 7 Bus 32, 40(M), 44, Garstang Rd North
- Bus Stop 8 Bus 32, 40, 41, 44, Garstang Rd South

Sharoe Green unit:
 -Maternity A & B
 -Clinics
 -Ultrasound
 -PBC
 -Neonatal
 -Gynae
 -Delivery Suite
 -Gynae/Obstetric Theatres

HOW TO USE THIS MAP

To find your destination look at the A-Z index here and find your ward block. The ward block you are looking for is highlighted in the colour of the corridor your department is situated.

Most departments are on the ground floor except the following: The Ward block lifts are accessed at the end of Blue Street by lift and stairs. Grey Street is the lower ground level.

Key to symbols

- Entrance
- Cycle stand
- Bus stop
- Parking for patients and others only
- Disabled parking
- Health Academy parking only
- Staff parking only
- Toilet and changing facilities
- Lift and stairs to levels

1	ADMISSIONS DESK	15	CRITICAL CARE	27	EYE ASSESSMENT UNIT	37	NUCLEAR MEDICINE	49	PRE-OP ASSESSMENT	63	XRAY DEPARTMENT INTERVENTIONAL UNIT
2	APPOINTMENTS	16	C. T. SCANNER	28	GENERAL OFFICE	38	OCCUPATIONAL HEALTH	50	PRIMARY CARE CENTRE		
3	AUDIOLOGY	17	DAY CASE UNIT	29	GORDON HEALING BLOCK	39	OCCUPATIONAL THERAPY	51	PUBLIC HEALTH		
4	AVONDALE UNIT	18	DAY TREATMENT CENTRE	30	GUM	40	ORAL -	52	RENAL UNIT DIALYSIS		
5	BEREAVEMENT CENTRE	19	DISCHARGE LOUNGE	31	(GENITO URINARY MEDICINE)	41	MAXILLOFACIAL SURGERY	53	RESEARCH CENTRE		
6	BLOOD TEST	20	DRESSINGS CLINIC	32	INFORMATION	42	ORTHOPAEDIC & FRACTURE CLINIC	54	ROSEBERG CANCER CENTRE		
7	BOWLAND HOUSE HOTEL	21	EDUCATION CENTRE 1&2	33	MEDICAL REHABILITATION UNIT	43	OUTPATIENTS	55	SAFE CENTRE		
8	BURNS / PLASTIC SURGERY	22	EEG	34	BARTON WARD	44	PALS	56	SHAROE GREEN UNIT		
9	CAFE MAISON	23	EMERGENCY DEPARTMENT	35	BLEASDALE NRU	45	PATHOLOGY	57	SHOPS		
10	CARDIO RESPIRATORY	24	EMERGENCY DECISIONS UNIT	36	BROCK ASSESSMENT CENTRE	46	PET/CT CENTRE	58	SPECIALIST CARE DENTISTRY		
11	CHAPLAINCY CENTRE	25	ENDOSCOPY	37	FELL VIEW/ NRU	47	PHARMACY	59	SPEECH THERAPY		
12	CHARTERS RESTAURANT	26	ENT SUITE (EAR, NOSE, THROAT)	38	MORTUARY	48	PHYSIOTHERAPY	60	THEATRES RECEPTION		
13	CHEST CLINIC			39	MRI SCANNER		PRAYER ROOM/CHAPEL	61	VASCULAR ASSESSMENT		
14	CHILDRENS CLINIC			40	NEURO PHYSIOLOGY			62	WARD BLOCK		

P We operate an Automatic Number Plate Recognition (ANPR) system across our car parks

Get this map on your smartphone, scan here.

Welcome to
Royal Preston Hospital

Contacts

Absence

Please remember to follow Trust and the University Policy in reporting absence. Also, remember to document this on PARE.

Any absence must be reported to;

- Placement Area
- Maternity Manager/ Band 7 01772 524731
- Academic Assessor
- Placement Unit at the University
- Learner Absence (learner.absences@lthtr.nhs.uk)

You need to call every day for absences, unless you have stated it's for a full week. Please see back of booklet for Trusts Standardize Operational Procedures on attendance

Placement Areas:

Antenatal Ward (Maternity A) and Triage: 01772 524959

Postnatal Ward (Maternity B): 01772 524830

Delivery Suite: 01772 528294

Community: 01772 528223 or 524235

Preston Birth Centre: 01772 528223 or 524235

Chorley Birth Centre: 01257 525116

Home Birth:- 01257 525116

ESMT Teams: 01772 524027

Gynae: 01772 524231

Neonatal Unit: 01772 524242

Public Health:01772 52 1181

Tulip: 01772 52 4338

Eden Team: 01772 528223

Research: 01772 52 4628

Screening: 01772 52 4693

Critical outreach team:- 01772 52 1585/3388

Placement Support Team - STAPS

The Placement Support Team is a team of dedicated staff who work across all areas of the Trust. Their remit is to work on the quality of student experience and student learning. They are the experts and advocates for ensuring a positive learning experience. This team like to see students face to face to discuss anything they are concerned about. You can contact a member of this team if you need to discuss things such as; your placement area, untimely off duty, constructive feedback and information regarding becoming a Student Ambassador.

Email placement.support@lthtr.nhs.uk

Telephone: 01772 528111 (ext 8111)

Trust Email

Every student should have a trust email address. Please contact the Allocations Team to request one if you do not receive one.

Allocations@LTHTR.nhs.uk

Student ID

Please contact the Manager in your clinical placement area to request your student ID to allow access to changing rooms, wards and applicable clinical areas.

Main Hospital

Royal Preston Hospital - Tel: 01772 716565

Chorley and South Ribble Hospital - Tel: 01257 261222

Bleep System

- Dial 66 and listen for instruction to enter bleep number (the person you want to contact)
- This is followed by the extension number you are calling from (number is normally on the phone)
- Listen for instruction to replace handset

Emergency calls - Do you know what to do?

Please ensure you are familiar with correct procedure for contacting OBSTETRIC and NEONATAL TEAMS. **WHEN AN EMERGENCY OCCURS IT IS IMPERATIVE THAT CORRECT INFORMATION IS GIVEN.**

Phone: **2222**

State what the emergency is -eg Obstetric/Neonatal/Security

State where you are-eg Maternity Ward Sharoe Green Unit, Birth Centre Sharoe Green Unit

State where the patient is eg, Bay 1 Bed 2



Clinical Placement Areas: What will you learn?

Maternity A & Triage

Maternity A is the Antenatal Inpatient Unit. Women are admitted for induction of labour, assessment for reduced fetal movements and any antenatal complex health needs that need monitoring.

You can expect to start to gain and develop skills around the following areas:

- Observations
- CTG's
- Medicines management particularly around the use of anti-hypertensives, analgesia and prostaglandin's
- Communication skills
- SBAR
- Abdominal palpation
- Documentation skills
- Antenatal top to toe assessment
- Admitting and discharging
- Venepuncture
- Holistic care of the woman and her family
- MDT working

Maternity B

Maternity B is the Postnatal Inpatient Unit caring for women and their babies. Here, you will be caring for women and their families after the birth of their baby. This will include assisted deliveries and caesarean sections. Some women may be re-admitted due to complexities postnatally.

You can expect to start to gain and develop skills around the following areas:

- Observations
- NOTT's
- NAS
- Wound care
- Communication skills
- Documentation skills
- Admitting and discharging

- Venepuncture
- Holistic care of the women and her family
- MDT working
- Breast feeding support
- Post-surgical care
- Medicines management particularly around analgesia and antibiotics
- Newborn baby check
- Postnatal check
- Catheter care

Delivery Suite

Delivery Suite care for women and their families during labour and in the early postnatal period. Women may be induced or come to our Delivery Suite already in labour. Delivery Suite can be a very clinical environment; however, steps can be taken to make the environment less intimidating and more calming by utilising the mood lighting and candles available on the unit. Delivery Suite can be very fast paced. You will work closely with Theatres, Registrars, Anaesthetists, the Neonatal Team and Paediatricians. You can expect to gain and develop skills in the following areas: **Please find another student book on HA website with additional information**

- Observations
- Care in labour
- Medicines management (particularly around oxytocin, analgesia and magnesium sulphate)
- Newborn checks
- CTGs
- Antenatal check
- Postnatal check
- NAS – Neonatal Abstinence Syndrome
- NOTTS -
- MDT working
- Catheter care
- FBS – Fetal blood sampling
- Stages of labour
- Assisted births
- Caesarean sections
- Theatres – scribing, scrubbing
- Complex care
- Suturing
- Documentation
- Admissions

- ARMs – artificial rupture of membranes
- Vaginal examinations
- Management of women who have had epidurals

Birth Centre – Preston and Chorley

Preston Birth Centre is located on the first floor of the Sharoe Green Unit. Changing rooms are located on the same floor at the side of the Maternity Ward. Chorley Birth Centre is located within Chorley Hospital grounds (please see map). Prior reading for this placement is required so that you can gain a better understanding of the placement area and the different stages you will see.

On these placements you will be able to gain experience and knowledge in a variety of different things such as;

- Normality
- Care of women in labour
- Medicine management
- Obstetric Emergencies
- Immediate Care of the newborn
- Communication Skills
- Water birth
- Aromatherapy
- NIPE
- Breastfeeding support

Community

Midwives travel around the areas of Preston, Chorley and South Ribble. You will be visiting women in their own homes, covering Clinics and may also cover shifts at the Birth Centres. You will care for women in the antenatal, intranatal and postnatal stages and the newborn. You can develop your skills by further reading prior to this placement and during it you will witness and conduct a variety of care such as;

- Booking appointments
- Antenatal Care – observations, urinalysis, auscultation
- Postnatal Care – breastfeeding advice, safe sleep advice,
- Midwife led clinics
- Safeguarding
- Newborn checks
- PKU- Phenylketonuria
- TCB- transcutaneous Bilirubinometry
-

Public Health

Public health is defined as ‘the art and science of preventing disease, prolonging life and promoting health through the organised efforts of society’ (Acheson, 1988). It seeks to identify risks to health and find the best ways to minimise them, in order to give everyone the best chance of leading a healthy life (RCM 2017).

To provide specialist public health care to women with during antenatal, intrapartum and postnatal period, as well as neonatal care to the infant in the postnatal period.

Students Midwives have the following learning opportunities whilst on a placement with the Public Health Team

To provide specialist public health care to women with during antenatal, intrapartum and postnatal period, as well as neonatal care to the infant in the postnatal period, working under the supervision of a Practice Supervisor or Practice Assessor.

- This links to Student Midwife competencies across the PRIMARY - PRACTICE - PROFICIENCY levels for clinical assessments including KNOWLEDGE & SKILLS, COMMUNICATION and MEDICINES MANAGEMENT (Clinical Assessment Documents / CADS).

All aspects of care, is provided within an XXXX setting (? Home, as well as hospital-setting).

- Under supervision, student midwives will be able to providing holistic care from a specialist public health focus, within a range of care settings following and working within the remit of the Midwife, and following the appropriate at risk care pathway, recognizing deviations from the norm and referring to Obstetric Team and working within the wider MDT as appropriate.

Potential learning opportunities include under the supervision of the Practice Supervisor / Practice Assessors:

- Communication skills, risk assessments, history taking and routine assessments, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care and discharge to HV Team and GP and other Public Health Specialist Practitioners as required.
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods.

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively

- Practice Safety
- Promote Professionalism and Trust

EU's – unsure yet as to what the Public Health will involve, e.g. providing clinical care.

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Care of Healthy Newborn Infants
- Birth Witness
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Episiotomy & or Suturing
- Supervision and Care of Women at Risk (AN, IN, PN)
- Breech Birth
- Women with Pathological Conditions of Obstetrics & Gyane
- Care of at Risk Newborn Infants

Tulip

To provide continuity of care to women with gestational or type 1 or type 2 diabetes and their newborn infants during the antenatal, intrapartum and postnatal period, as well as neonatal care to the infant in the postnatal period

Learning Opportunities on Tulip Diabetes case loading team:-

- This links to Student Midwife competencies across the PRIMARY - PRACTICE - PROFICIENCY levels for clinical assessments including KNOWLEDGE & SKILLS, COMMUNICATION and MEDICINES MANAGEMENT (Clinical Assessment Documents / CADS).

All aspects of antenatal, intrapartum and postnatal care of all types of diabetic pregnant, labouring or postnatal women and their newborn infants, is provided within an XXXX setting (? Home / GP, as well as hospital-setting).

- Under supervision, student midwives will be able to follow the diabetic woman / pregnant person wherever they choose to birth and receive care throughout the pregnancy continuum, providing holistic care within a range of care settings following the continuity model and working within the remit of the Midwife,

and following the appropriate at risk care pathway, recognizing deviations from the norm and referring to Obstetric – Diabetic Team or Neonatal Team, and working within the wider MDT as appropriate.

Potential learning opportunities include under the supervision of the Practice Supervisor / Practice Assessors:

- Communication skills, risk assessments, history taking and routine assessments, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care and discharge to HV Team and GP with a specific focus on Diabetes.
- Antenatal, Intrapartum, Postnatal and Neonatal Clinical Skills, including care in labour and facilitating normal birth and immediate postnatal and neonatal care with a specific focus on Diabetes.
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods, with the additional specialist focus on Diabetes.

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively
- Practice Safety
- Promote Professionalism and Trust

EU's - unsure yet as to what the Diabetes Team will involve. e.g. how much they provide clinical care.

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Care of Healthy Newborn Infants
- Birth Witness
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Episiotomy & or Suturing
- Supervision and Care of Women at Risk (AN, IN, PN)
- Breech Birth
- Women with Pathological Conditions of Obstetrics & Gyane
- Care of at Risk Newborn Infants

Home Birth:

To provide continuity of care to women during antenatal, intrapartum and postnatal period who indicate they would like homebirth as their place of birth. The woman is given a named midwife who provides 70% of their care with support from the on-call team if required. All learners work under the supervision of a Practice Supervisor or Practice Assessor.

Learners need to be a car owner and have business insurance, they will be provided with a sky guard during this placement for security purposes as part of the lone worker policy; however the learner will not be a lone worker.

Out of hours working will be undertaken on this placement

Learning Opportunities -

All aspects of antenatal, intrapartum and postnatal care and neonatal care, (including home early-labour assessments), is provided either at the home / GP centres.

- Under supervision, student midwives will be able to follow the woman / pregnant person throughout the pregnancy continuum, providing holistic care within a home birth setting and the continuity model, working within the remit of the Midwife. Recognizing deviations from the norm and referring to Obstetric Team and working within the wider MDT as appropriate (e.g. GP HV, Infant Feeding Services).

Potential learning opportunities include under the supervision of the Practice Supervisor / Practice Assessors:

- Communication skills, risk assessments, history taking, informed consent and routine assessments, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care and discharge to HV Team and GP.
- Antenatal, Intrapartum, Postnatal and Neonatal Clinical Skills, including care in labour and facilitating normal birth and immediate postnatal and neonatal care.
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods.

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively
- Practice Safety
- Promote Professionalism and Trust

EU's

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Care of Healthy Newborn Infants
- Birth Witness
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Episiotomy & or Suturing
- Supervision and Care of Women at Risk (AN, IN, PN) – if presents unplanned
- Breech Birth – if unplanned
- Care of at Risk Newborn Infants – if presents at birth (unplanned)

Eden:

To provide continuity of care to women during antenatal, intrapartum and postnatal period. Antenatal and postnatal care is provided at home. Intrapartum care is provided either at Preston Birth Centre or on Delivery Suite. Student midwife will be able to follow their ladies wherever the women choose to birth. We also provide home assessments for women that are query labour.

Learning Opportunities -

Students Midwives have the following learning Opportunities whilst on a placement with the Eden Continuity Team

To provide continuity of care to women during antenatal, intrapartum and postnatal period, as well as neonatal care to the infant in the postnatal period, working under the supervision of a Practice Supervisor or Practice Assessor

- This links to Student Midwife competencies across the PRIMARY - PRACTICE - PROFICIENCY levels for clinical assessments including KNOWLEDGE & SKILLS, COMMUNICATION and MEDICINES MANAGEMENT (Clinical Assessment Documents / CADS).

All aspects of antenatal, intrapartum and postnatal care and neonatal care, (including home early-labour assessments), is provided either at the home, Preston Birth Centre or on Delivery Suite.

- Under supervision, student midwives will be able to follow the woman / pregnant person wherever they choose to birth and receive care throughout the pregnancy continuum, providing holistic care within a range of care settings following the continuity model and working within the remit of the Midwife, recognizing deviations from the norm and referring to Obstetric Team and working within the wider MDT as appropriate (e.g. GP HV, Infant Feeding Services). This is a shared care service.

Potential learning opportunities include under the supervision of the Practice Supervisor / Practice Assessors:

- Communication skills, risk assessments, history taking, informed consent and routine assessments, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care and discharge to HV Team and GP.
- Antenatal, Intrapartum, Postnatal and Neonatal Clinical Skills, including care in labour and facilitating normal birth and immediate postnatal and neonatal care.
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and

advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods.

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively
 - Practice Safety
 - Promote Professionalism and Trust

EU's

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Care of Healthy Newborn Infants
- Birth Witness
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Episiotomy & or Suturing

Research

Midwifery:- Basic concept of research in Health within the midwifery sector.

Learning Opportunities

Within this placement you will gain the following skills and knowledge:-

* Will gain an awareness of ethical and legal considerations related to consent and recruitment of vulnerable participants into clinical research.

- * Will develop an understanding of the resources involved and their allocation relating to the delivery of clinical research
- * To develop an understanding of the underlying principles applied to data management in clinical research.
- * To develop an understanding of the requirements for data entry, secure data storage, transfer and archiving of data as part of the research process.
- * To gain an understanding of the principals involved in the safe handling, processing and storage of biological samples
- * To develop an understanding of the key aspects of managing investigational medical products (IMP)
- * To have an understanding of the overall role of the NIHR and NIHR Office for Clinical Research Infrastructure (NOCRI), Chief Scientist Office (CSO) and Health and Care Research Wales
- * To describe what is meant by Patient and Public Involvement and why it is important to research
- * Develop a broad understanding of the basic principles of clinical research
- * To develop an understanding of the processes involved in obtaining informed consent in clinical research including legal, ethical, good practice and communication considerations, looking at capacity and the mental capacity act.
- * To develop an understanding of recruiting participants into clinical research.
- * Blood analysing and processing of samples, human tissue act.
- * COVID trails- swabbing
- * Venepuncture and Cannulation
- * ANTT
- * Basic Life Support
- * Moving and Handling
- * Datix reporting and AE + SAE reporting, corrective and preventive action reports.

Midwifery:-

- Overview of the role of a research midwife
- Clinical research facilitate
- Knowledge of the wider Research team
- Good Clinical Practice certificate in place for 3 years once qualified
- Tours of the clinical Lab with the spinning samples
- Get involved in current programme and projects

Students Midwives have the following learning opportunities whilst on a placement with the Research Team

To contribute to the research projects ongoing within the hospital of a Practice Supervisor or Practice Assessor. This links to Student Midwife competencies across the PRIMARY - PRACTICE - PROFICIENCY levels for clinical assessments including KNOWLEDGE & SKILLS, COMMUNICATION and possibly MEDICINES MANAGEMENT (Clinical Assessment Documents / CADS).

- Under supervision, student midwives will be able to providing holistic care from a, working within the remit of Research Midwife, and following the appropriate research design methods and adhering to ethical considerations and any relevant governance mechanisms.

Potential learning opportunities include under the supervision of the Practice Supervisor / Practice Assessors:

- Communication skills, informed consent, risk assessments, history taking, audit, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care to other appropriate practitioners.
- Audit / Local and national reporting, investigations and governance mechanisms
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods and specialist medications part of the research study if relevant.

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively
- Practice Safety
- Promote Professionalism and Trust

EU's –

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Healthy Newborn Infants
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Episiotomy & or Suturing
- Supervision and Care of Women at Risk (AN, IN, PN)
- Breech Birth
- Women with Pathological Conditions of Obstetrics & Gynae
- Care of at Risk Newborn Infants

Screening

To provide specialist antenatal and newborn screening advice and care to women with during antenatal, intrapartum and postnatal period, as well as neonatal care to the infant in the postnatal period with routine and additional screening needs, working under the supervision of a Practice Supervisor or Practice Assessor.

This links to Student Midwife competencies across the PRIMARY - PRACTICE - PROFICIENCY levels for clinical assessments including KNOWLEDGE & SKILLS, COMMUNICATION and MEDICINES MANAGEMENT (Clinical Assessment Documents / CADS).

Specialist routine and additional / complex screening advice and diagnostic counselling provided within a hospital-setting.

- Under supervision, student midwives will be able to providing holistic care from a specialist screening focus, working within the remit of the Specialist Screening Midwife, and following the appropriate screening / diagnostics pathway within the wider Obstetric and Neonatal (and when needed Bereavement) MDT.

- Communication skills, informed consent and screening counselling, risk assessments, history taking and routine assessments, creation of screening care pathways, audit, referral and emergency care as per the Midwife's remit across the AN, IN, PN and neonatal period, transfer of care to other appropriate practitioners (e.g. Fetal Medicine Specialists)
- Antenatal, Intrapartum, Postnatal and Neonatal Clinical Skills, including care in labour and facilitating normal birth and immediate postnatal and neonatal care.
- Medicines management around medicines such as (but not exclusively), PGDs, advice to women and administration of prescribed medications and the side effects / contraindications for the woman or her baby (e.g. Vitamin K) and advice on pharmacological and non-pharmacological pain relief options during the AN, IN and PN periods.
- Audit / Local and national reporting and screening governance mechanisms

As per NMC The Code (Professional standards of practice and behaviour for nurses, midwives and nursing associates), the student midwife will be able to experience the NMC standards in action:

- Prioritise People
- Practice Effectively
- Practice Safety
- Promote Professionalism and Trust

Students will be able to work towards the following EU's during this placement:

- Prenatal (Antenatal) Women
- Postnatal Women
- Care of Healthy Newborn Infants
- Care in Labour
- Facilitated Births
- Care where you were present but did not facilitate the birth
- Supervision and Care of Women at Risk (AN, IN, PN)
- Women with Pathological Conditions of Obstetrics & Gyane
- Care of at Risk Newborn Infants

Shift Times

Community:

Day – 08.30 – 16:30

Long Day – 08:30 – 20:30

Comm long- 08:30 – 20:30

(long shift may include a community shift and clinic straight after)

PBC, CBC, Maternity A, Maternity B, Delivery Suite

Early – 07:30 - 15:30

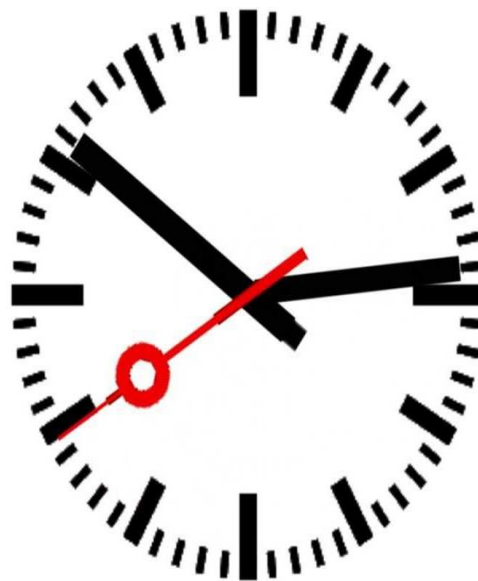
Late – 12:30 – 20:30

Long day – 07:30 – 20:30

All placement profiles can be found on the Trust Health Acadmia webpage for each placement area which will give you further guidance of the shift pattern that the placement area are likely to work.

Off duty

Your off duty is now and guidance on how Trust Induction E-needs to be arranged directly with the



provided via Health Roster to use this system is in the Learning. Make up time via your University and not placement areas.

CLiP (Collaborative Learning in Practice)

CLiP is an approach to mentorship and teaching on placement where students work in small teams, supporting each other with a Midwife as a Coach (Mentor) supporting the small team, to care for women and families. This approach is used really successfully across Nursing. Please find more information by following the link and logging into your ELearning.

<https://elearning.lthtr.nhs.uk/course/view.php?id=591>

The illustration depicts a progression of learners in a clinical setting. At the top left is a pink outline of a hand. Below it are several panels showing different scenarios: a woman holding a baby, a woman sitting with a baby, a woman breastfeeding, and a woman holding a baby. In the center, a tall figure in blue scrubs is labeled 'Final year'. To the left, a shorter figure in blue scrubs is labeled '1st year'. To the right, a shorter figure in green scrubs is labeled '1st year'. At the bottom, the text 'CLiP in Action' is written in large white letters. On the right side, there is a blue box with the word 'DO' in yellow, followed by a list of actions:

- Learners provide care
- Coach supports learners direct/indirect
- Observe, demonstrate
- Facilitate workload/learning
- Consider GROW and reflective conversations
- Guide, coordinate and facilitate learning in action

Midwifery



Gain organisational agreement

System-wide discussion.
Gain organisational agreement & identify clinical learning environments.
3-6 months before introduction

STEP 1



Assess the learning environment

Visit the identified learning environment/s. Complete a learning environment assessment. Update clinical audit schedule. Agree implementation plan & schedule. Assess level of support (e.g. ward manager, staff, M&A).
8 weeks before CLiP begins

STEP 2



Inform everyone

Share CLiP posters, information leaflets and discuss at team meetings.
Disseminate CLiP coaching resources

STEP 3



Prepare for CLiP

Train-the-trainer with CLiP leaflets. Coach development sessions with midwife supervisors and assessors (e.g. coaching conversations, reflection logs, mini-CLiP Q & A sessions).
4-6 weeks before induction
Allocation of learners. Learner inductions to CLiP.
2-3 weeks before placement start

STEP 4



Support CLiP in action

Day 1 of placement learner/coach induction.
Ongoing support for learners and coaches (supervisors & assessors) throughout the placement.

STEP 5



Evaluation of learning



Peer Learning benefits



“We always made sure if we learnt a new experience, we would pass it on”

[CLiP Pilot, learner]

Experienced learners

Forming professional relationships

(Ford et al., 2018)

Solidify knowledge

(Naeger et al., 2013)

Increased sense of accountability, motivation and purpose

(Naeger et al., 2013)

Improved confidence in own skills

(Loke & Chow, 2007)



New learners

Role models

(Christiansen & Bell, 2010)

Ability to learn

(Naeger et al., 2013)

Relate to the language and social experience of peers

(Ford et al., 2018)

Encourages active participation

(Han et al., 2015)

Reduced anxiety

(Sprenkel & Job, 2004)

Long Course Student's

Standards for Student Supervision and Assessment (SSSA)



Documentation Requirements

PARE

- You need to ensure you get your PARE timesheets signed daily when on shift by your practice supervisor or practice assessor
- You need to also get your days off signed by your practice supervisor or practice assessor
- You need to get your PARE timesheets signed weekly by your practice supervisor or practice assessor
- At the end of your placement, once all of your weeks are signed, either your practice supervisor, practice assessor or your academic assessor will sign your overall timesheet
- It is your responsibility to ensure you get your timesheets signed each day and weekly before your return to theory. If you choose not to do this and return to theory, your practice supervisor's assessments are very unlikely to be willing to sign these and you will therefore miss these clinical hours, in order to meet the course requirements, which will need to be made up at weekends and holiday (please note you are unable to work clinically during allocated theory time)
- You must deduct your lunch break from your total hours in the day
- You can have up to 1.5 hours per week in clinical practice to complete your My Progress documentation (please document this on your clinical placement timesheet)
- If you are missing out clinical hours, this needs to be documented on your 'make-up' hours timesheet. Please note you are unable to work clinically during allocated theory time, but you can make up clinical hours on weekends and holidays (not clinical study time) up to maximums of 19.5 hours. You can only work a maximum of 48 hours per week when in theory or practice. It is should please discuss with your 'Year Tutor'

MyPROGRESS

- You need to complete your ongoing record of achievement as per the SSSA flowchart (Page 1)
- Your clinical assessment documentation will be completed at the end of your academic year in line with the SSSA at a triplicate meeting between yourself, your practice assessor and academic assessor
- To inform you and of your clinical assessments, it is essential that you collect quality, meaningful practice supervisor feedback electronically on My Progress
- Without the provision of quality, meaningful practice supervisor feedback, your practice assessor and academic assessor will not be able to complete your end of year assessment and you will therefore fail this component of the module. It is your responsibility to collect this feedback via My Progress electronically
- You will also document all your EUs as below

EU DOCUMENTATION

- Please see Page 3 for the EU course requirements, which you must meet prior to your student placement
- You can include one woman in several EU categories. For example, someone you care for and facilitate the birth you may complete an antenatal check on admission, care for her in labour, facilitate the birth, she may be at risk in labour, observe an under/late suturing, complete a postnatal check, complete a newborn check, provide feeding support (BF)
- In line with contemporaneous record keeping, all EUs must be updated and signed by your practice supervisor or assessor ideally on the same shift and within 1 week of the event
- Only your practice supervisor or assessor is permitted to sign your EUs (their signature constitutes their email address and name)
- No member of academic staff can sign or move your EU documentation (unless this is following a simulated clinical skills session, such as breach or suturing)

Produced by UCLan
Industry Team

EU Documentation Requirements

Mandatory Practice	Number Required	Category	Examples (not exhaustive)
Supervision and care (including examinations) of at least 100 postnatal women	100	Essential	Any antenatal examination which you complete
Care in labour	40	Essential	Caring for any women in labour
Facilitated birth (after completing 1 witness)	40	Essential	Term women including completion of 3rd stage
Care of women where you were present at birth, but did not facilitate the birth	20	Essential if only 20 postnatal deliveries	Vaginal Forceps, CS, MACEP, Perineatal births
Involved with breech births	No set number	Simulated Active	
Epileptology and suturing	No set number	Simulated Performance	
Supervision and care of women at risk in pregnancy, labour or postnatal period	40	Essential	Women at risk antenatally, in labour, postnatally
Supervision and care of postnatal women	100	Essential	Any postnatal check which you complete
Supervision and care of healthy newborn infants	100	Essential	Any newborn check which you complete
Observation and care of the newborn requiring special care including those born pre-term, post-term, underweight or ill	No set number	Observation Care	
Care of women with perineal conditions in the fields of gynaecology and obstetrics	No set number	Care	Examples can be used from your placement and from your maternity placements
Care of women in the field of medicine and surgery	No set number	Care	Unwell women, surgery
Baby friendly initiative: Clinical record of breastfeeding support	20	Essential	
Baby friendly initiative: Clinical record of formula feeding support	15	Essential	

Produced by UCLan
Industry Team

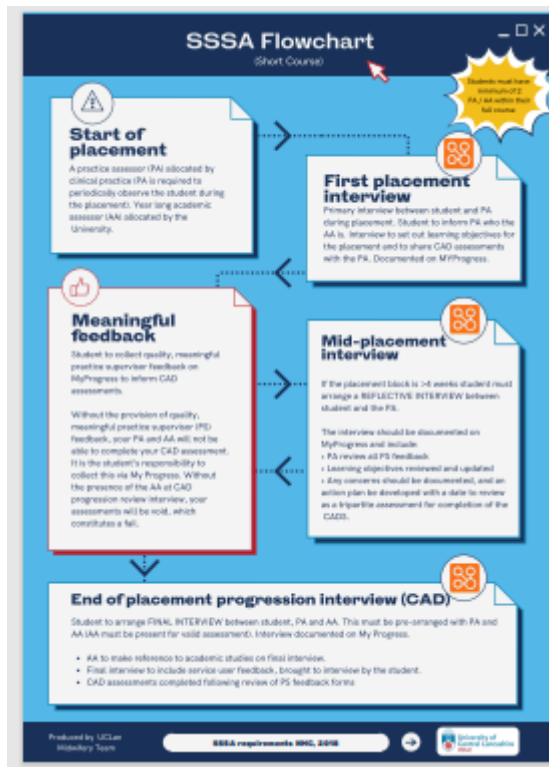
SSSA set out the NMC expectations for the learning, support and supervision of students in the practice environment. They also set out how students are assessed for theory and practice.

More information can be found here:

[student-supervision-assessment.pdf \(nmc.org.uk\)](https://www.nmc.org.uk/student-supervision-assessment.pdf)

Short Course Student's

Standards for Student Supervision and Assessment (SSSA)



EU Documentation Requirements

Mandatory Practice	Number Required	Category	Examples (not exhaustive)
Supervision and care (including examination) of at least 100 postnatal women	100	Essential	Any antenatal examination which you complete
Care in labour	40	Essential	Caring for any woman in labour
Facilitated births (after completing 5 witness)	40	Essential	Three women including completion of 2 nd stage
Care of women where you were present at birth, but did not facilitate the birth	20	Essential if any 30 postnatal activities	Vaginal Forcible CVS, MARG, Pre-eclampsia births
Involved with breech births	No set number	Simulated / Actual	
Episiotomy and suturing	No set number	Simulated / Performed	
Supervision and care of women at risk in pregnancy, labour or postnatal period	40	Essential	Women at risk antenatally, in labour, postnatally
Supervision and care of postnatal women	100	Essential	Any postnatal check which you complete
Supervision and care of healthy newborn infants	100	Essential	Any newborns check which you complete
Observation and care of the newborns requiring special care including those born pre-term, post-term, underweight, or ill	No set number	Observation / Care	
Care of women with perineal or conditions in the fields of gynaecology and obstetrics	No set number	Care	Examples can be seen from and gynaecology placement and from post maternity placements
Care of women in the field of medicine and surgery	No set number	Care	Unwell women, surgery
Baby friendly initiative: Clinical record (of breastfeeding support)	20	Essential	
Baby friendly initiative: Clinical record of formulae feeding support	10	Essential	

Produced by UCLan
Institute Team

SSSA requirements NMC, 2018

University of Central Lancashire

SSSA set out the NMC expectations for the learning, support and supervision of students in the practice environment. They also set out how students are assessed for theory and practice.

More information can be found here:
[student-supervision-assessment.pdf \(nmc.org.uk\)](https://www.nmc.org.uk/student-supervision-assessment.pdf)

FACT SHEET: STUDENT AND LEARNER SUPPORT IN PRACTICE NMC CHANGES

Fact Group 1: What will the changes mean for mentorship?

The current NMC standards will cease to apply (with exception to Midwifery, they will continue until September 2020). The term 'mentor will no longer be used and the traditional role of a mentor will change. The sign-off mentor and practice teacher role will cease to exist in its current form Practice learning and support of students will be the responsibility of **every** registered practitioner.

The 40% mentor-student contact requirements will be removed. Triennial review will no longer be a requirement

Registered practitioners will be prepared for their roles in supervising/assessing students and will be required to keep these skills up to date in line with NMC local practice policies. It is possible to be a practice supervisor and a practice assessor-but not for the same student. A national Practice Assessment Document will be introduced for nursing & nurse associate undergraduate programmes

Fact Group 2: New roles will exist to support students in the practice setting (NMC Standards for Student Support and Assessment)

Practice Supervisor	Practice Assessor	Nominated Person
Discusses learner needs and contributes to setting realistic goals to achieve these	Undertakes own preparation or evidences previous relevant experience to undertake role	(Title may vary between practice areas)
Supports learner to seek learning opportunities to achieve skills and practice learning outcomes	Receives feedback from Practice Supervisors/Service Users on student performance to inform assessment	Promotes a quality practice learning environment
Uses coaching skills/skilful questioning to support student learning	Observes aspects of student's practice	Ensures students are allocated to a Practice Supervisor and Practice Assessor
Collects and documents evidence of student performance	Undertakes and records summative assessment/grading as appropriate	Actively support students and address student concerns
Provides verbal and written formative feedback to learner and practice assessor	Uses NMC Code (2018) to inform all decisions	Acts as a point of contact for Practice Supervisors and Practice Assessor
Support students who may have protected time or be supernummary	Discusses student performance with Academic Assessor, mutually agreeing progression on programme and proficiency	
Actively supports students and addresses their concerns	Required to have appropriate experience in relation to the field or area of practice e.g. NMP prescribers are required to be a prescriber	
		Academic Assessor
		This university role liaises with the Practice Assessor to discuss and agree student progression/completion

Fact Group 3: What remains the same?

- ✓ Students will be supernumerary or have protected time depending on the programme and will require the support of a registered practitioner
- ✓ Induction, learning contracts, mid-point (formative) assessment, action plans and summative assessment will continue
- ✓ Students will receive continuous feedback to inform their progress
- ✓ Raise and respond to student competencies, concerns, safeguarding

Acknowledgement to Anglia Ruskin University and University of Essex

Achieving excellence in learning and care...



Placement Charter

This Charter demonstrates the Placement's commitment to provide a safe and high quality learning environment for all learners to prepare them for their future roles working collaboratively in multi-professional teams. The 'Placement Pledges' and the 'Rights, Roles and Responsibilities of learners' instil the values embedded within the NHS Constitution (DH 2013) and Health Education England's NHS Education Outcomes Framework (DH 2012).

Placement Pledges	Rights, Roles and Responsibilities of learners
Ensure all learners are welcomed, valued and provided with an inclusive, safe, stimulating and supportive learning experience.	Prepare adequately for the placement, including contact with the placement in advance. Disclose any health or learning needs that may impact on the placement, or the achievement of learning outcomes.
Promote a healthy and 'just' workplace culture built on openness and accountability, encouraging all learners to raise any concerns they may have about poor practice or 'risk', including unacceptable behaviours and attitudes they observe at the earliest reasonable opportunity. Respond appropriately when concerns are raised.	Raise any serious concerns about poor practice or 'risk', including unacceptable behaviours and attitudes observed at the earliest opportunity. Be clear who to report any concerns to in order to ensure that high quality, safe care to patients / service users and carers is delivered by all staff.
Provide all learners with a named and appropriately qualified / suitably prepared mentor / placement educator to supervise support and assess all learners during their placement experience.	Actively engage as an independent learner, discuss learning outcomes with an identified named mentor / placement educator, and maximise all available learning opportunities.
Provide role modelling and leadership in learning and working, including the demonstration of core NHS 'values and behaviours' of care and compassion, equality, respect and dignity, promoting and fostering those values in others.	Observe effective leadership behaviour of healthcare workers, and learn the required NHS 'values and behaviours' of care and compassion, equality, respect and dignity, promoting and fostering those values in others.
Facilitate a learner's development, including respect for diversity of culture and values around collaborative planning, prioritisation and delivery of care, with the learner as an integral part of the multi-disciplinary team.	Be proactive and willing to learn with, from and about other professions, other learners and with service users and carers in the placement. Demonstrate respect for diversity of culture and values, learning and working as part of the multi-disciplinary team.
Facilitate breadth of experience and inter-professional learning in placements, structured with the patient, service user and carer at the centre of care delivery. e.g. patient care pathways and commissioning frameworks.	Maximise the opportunity to experience the delivery of care in a variety of practice settings, and seek opportunities to learn with and from patients, service users and carers.
Adopt a flexible approach, utilising generic models of learner support, information, guidance, feedback and assessment across the placement circuit in order to support the achievement of placement learning outcomes for all learners.	Ensure effective use of available support, information and guidance, reflect on all learning experiences, including feedback given, and be open and willing to change and develop on a personal and professional level.
Offer a learning infrastructure and resources to meet the needs of all learners, ensuring that all staff who supervise learners undertake their responsibilities with the due care and diligence expected by their respective professional and regulatory body and organisation.	Comply with placement policies, guidelines and procedures, and uphold the standards of conduct, performance and ethics expected by respective professional and regulatory bodies and organisations.
Respond to feedback from all learners on the quality of the placement experience to make improvements for all learners.	Evaluate the placement to inform realistic improvements, ensuring that informal and formal feedback is provided in an open and constructive manner.

- 'Learner' refers to all health, education and social care students, trainees, hosted learners.
- 'Placement' relates to all learning environments / work based learning experiences.
- 'Mentor' / 'placement educator' relates to all trainers / supervisors / coordinators appropriately qualified / suitably prepared to support learners.
- 'Professional and regulatory body and organisation' relates to standards required to ensure patient and public safety, and professional behaviours.

Key changes to the Standards for Pre-Registration Nurse Education

Standard supervision & assessment

The new standards separate out supervision and assessment, and students are assigned to a practice supervisor, practice assessor and an academic assessor.

Practice supervisors can be any registered health and social care professional and can contribute to the student's record of achievement.

Practice assessors obtain feedback from practice supervisors and others to assess the student. Academic assessors liaise with the practice assessor to agree practice assessment decisions.

There are revised definitions of supernumerary status, and the level of supervision can decrease as the student's proficiency and confidence increases. Students can undertake clinical procedures to provide person-centred care without direct oversight once they are proficient.

Supervisors and assessors will be required to self-declare against the NMC standards, and there will be a range of resources available to upskill staff to meet the outcomes. Organisations will assign appropriate professionals to carry out each of these roles within practice placements. Organisations will monitor and provide ongoing support for persons undertaking these roles.

The future nurse

The Nursing & Midwifery Council (NMC) has reviewed and updated the standards of proficiency for nurses and the standards for education and training. These reflect the changing needs for the role nurses will play in future healthcare services. Midwifery standards will also be developed in the near future.



The new standards have a greater emphasis on leadership, multi-disciplinary working and working across different settings.

All programmes offered by all Approved Education Institutions (AEIs) must be aligned to the new standards by September 2020. AEIs in the North West plan to adopt these new standards from September 2019.

Programme content

The Future Nurse standards apply across all four fields and all care settings. All registered nurses are expected to be able to meet the person-centred, holistic care needs of people at any stage of life who may have a range of mental, physical, cognitive or behavioural health challenges.

Students on all four fields will be required to meet annexe A: communication and relationship management skills. A greater depth of knowledge and more advanced skills are required to care for people in the students chosen field of practice.

Students on all four fields will be required to meet annexe B: nursing procedures. This includes venepuncture, ECGs, mental health assessment/exposure, chest auscultation and interpreting results from these. A greater depth of knowledge and more advanced skills are required to care for people in the students chosen field of practice.

Newly qualified registrants can access the community practitioner nurse prescribing course (V150) straight away if seen as an organisational service need. Qualified nurses will be able to access the independent/supplementary prescribing programme (V300) after one years' experience.

The new standards have seven platforms:

1	2	3	4	5	6	7
Being an accountable professional	Promoting health and preventing ill health	Assessing needs and planning care	Providing and evaluating care	Leading and managing nursing care and working in teams	Improving safety and quality of care	Co-ordinating care

Student Midwifery Standard Operating Procedure for requesting make up time for students on Healthroster

A student is requesting to complete make up time In the block of placement they are currently in

A student requires a new placement request to make up hours in a specific placement area.

A student can request to make up an extra 37.5 hours on one placement in advance as long as the placement has capacity to facilitate this and the student adheres to the European Working Directive - not exceeding more than 48 hours (this is including any paid or voluntary work that the student does)

This type of request needs to be submitted by HEI to the Allocations Team 4 weeks in advance so that the relevant arrangements can be created.

Any request to make up more than 37.5 hours in one placement needs to be made by the HEI to the Allocations Team. The Allocations Team requires a minimum of 2 weeks' notice to arrange make up placements

The Allocations Team will then arrange for the student to move onto healthroster for that period of time.

Once approved, a request to healthroster will be submitted by the Allocations Team and both the student and the placement area will be informed.

Only when the student has had a confirmation email from the Allocations Team or HEI, should contact with the clinical placement staff be made.

If there is no capacity for the student to complete make up time during this period, the Allocations Team will liaise directly with HEI to discuss the options available and HEI will liaise with the student.

If the information the student requires is time sensitive, they need to ring and speak with the midwife in charge. For non-urgent matters, please use email.

Student Midwifery Standard Operating Procedure for reporting sickness and absence

Student sickness and absence reporting	Placement sickness and absence reporting
Student who is reporting in sickness or absence from placement	Midwife in charge who has taken the phone call to follow local guidance of reporting this sickness as well as emailing learner.absence@lthtr.nhs.uk
Student is to ring and speak to the Midwife in charge and report sickness or absence	who will monitor students pattern of sickness/absence and will arrange the additional support meetings as required
They are to do this on a daily basis until they are fit to resume	To follow the above step on a daily basis
They need to ring and speak with the Midwife in charge and resume back from sick	Any student who has been off sick cannot request to make that sickness up on your placement without this being approved with HEI, this will be picked up at a later stage.
You are to document your sickness on PARE and in the comment box document who you spoke to and at what time	
If your sickness is longer than 3 working days then you need to inform your Academic Assessor	
Report your sickness on day one to your HEI and everyday afterwards until resuming	

Report your sickness to learner.absence@lthtr.nhs.uk who will monitor your sickness or absence and if required arrange a meeting with yourself to offer additional support



HEI will advise you further of making up your additional time, however it is not expected that you will make this time up on this placement.



This will be documented on Healthroster



Student Midwifery Standard Operating Procedure for Did Not Attend, Attended on wrong day and Childcare and other commitments

Student and Placement guidance on Did Not Attend for placement	Student and Placement guidance on turning up for the wrong shift	Student and placement guidance on placement hours
Did not attend shift	Student will be asked to go home	Student are expected to be given 4 weeks of off duty 2 weeks prior to placement commencing
Document on both PARE and Healthroster that student DNA	Placement hours will be recorded as per hours worked	Student will be given the full 24 hour shift pattern to work depending on their placement type
Send email to the following placement.support@lthtr.nhs.uk and learner.absence@lthtr.nhs.uk who will monitor and arrange the relevant meeting with both HEI and student and offer support and guidance	If this becomes a pattern email to be sent to placement.support@lthtr.nhs.uk, learner.absence@lthtr.nhs.uk and their Practice Assessor to be informed and an action plan put in place	student have committed to these condition at interview prior to commencing their placement
If this becomes a pattern of behaviour to inform the students Practice Assessor who will generate an action plan and inform placement.support@lthtr.nhs.uk who will inform HEI	Learner support will arrange a meeting to offer additional support to the student	Childcare arrangements needs to be arranged prior to commencing placements, however reasonable requests will be facilitated where possible
If this continues with action plan in plan student is highly likely to fail their year.	Clinical Placement Support team will inform HEI of the action plan and continue to offer both placement and student support.	You are allowed 3 request in a working 28 days via healthroster within the timeframe that is set with the Trusts healthroster deadlines, see https://intranet.lthtr.nhs.uk/healthroster



If this continues with action plan in plan student is highly likely to fail their year.

Other employed commitments needs to be worked around your placement commitments