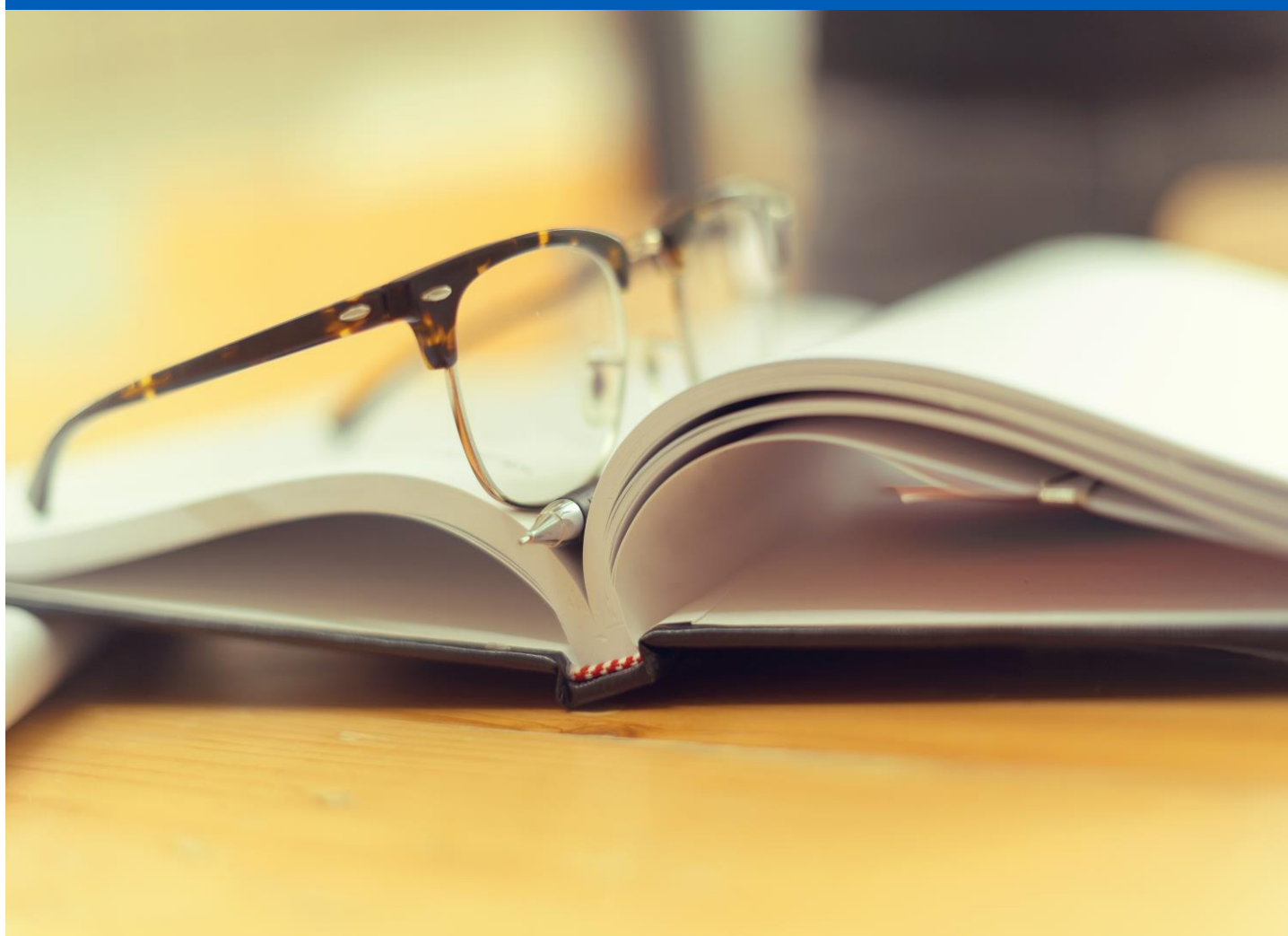


# Advanced Practice in Midwifery Implementation Guide



# Advance Practice in Midwifery Implementation Guide

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## 1.0 Scope and purpose

The intended audience for this implementation guide is maternity service providers and people in strategic teams who are supporting workforce planning and development. It has been written by an expert group comprising advanced practitioners in midwifery, representatives from the Nursing and Midwifery Council (NMC), Higher Education Institutions (HEIs), regional and national strategic leaders, and Regional Faculties for Advancing Practice Leads, all of whom are supporting the development and implementation of roles aligned to this level of practice.

The implementation guide provides an overview of advanced practice in midwifery and offers insights into topics including education and training, workforce planning, governance, supervision, and career development. Links to other resources and case study examples are also included.

## 2.0 Introduction

NHS England's, 'Next Steps on the Five Year Forward View', (2017) clearly sets out the current challenges faced by the NHS, in terms of resources available to deliver safe, quality, effective care, and the patient and public demands and expectations in the way services are commissioned in the future. They signal how the national health service needs to change, arguing for a more engaged relationship with people and communities to promote well-being and prevent ill-health. This requires workforce transformation and a consistent approach to the expansion of new roles and new ways of working, which includes the development of advanced practitioner roles as set out in the *NHS long term plan*, (2019) and the interim *NHS people plan*, (2019).

A key driver for the implementation of advanced practitioner roles is to enable practitioners to reach their full potential and optimise their contribution to meeting population, individuals', families', and carers' needs through different models of service delivery and multi-disciplinary working.

Health Education England (HEE) Centre for Advancing Practice and the Regional Faculties for Advancing Practice have been established to lead, engage and promote advanced practitioners as part of the workforce solutions. They support service change and work with local systems to identify demand, commission high quality education and training and vitally to support the supervisory needs of learners. HEE acknowledges that by embracing the continued development of advanced practitioners across our organisations it will enable us to further improve the standards of care that we provide our patients by:

1. Building services and teams which meet the needs of the population and provide advanced skills which reflect patient demand.
2. Supporting career development and subsequent retention of skilled professionals.
3. Strengthening multi-professional teams, which in turn improve safety, patient experience, productivity, and the working lives of clinicians.

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4. Enabling improved outcomes for patients through the development of research, technology and practice delivered through advanced practitioners.
5. Increasing skill mix in multi-disciplinary teams.
6. Improving team working across professions.
7. Allowing advanced practitioners to strengthen leadership in clinical teams through a higher level of accountability and responsibility, and thereby leading to delivering more complex patient care.
8. Developing clinical decision making and partnership working within the multi-disciplinary team
9. Enabling holistic high-quality patient care delivery and improved outcomes.

Better Births, the *Five Year Forward View for Maternity Care* (NHS England, 2016), sets out a vision for a modern maternity service that delivers safer, more personalised care for all women and every baby. The rising levels of medical and social complexities requires different approaches to the delivery of maternity care and increased levels of skills and expertise. It is recognised that advanced practitioners could play a key role in achieving this vision, helping to improve outcomes and reduce inequalities.

### 3.0 What is advanced practice?

Advanced practitioners have been introduced successfully and the numbers continue to grow due to service needs and drivers. Historically, many of these roles have grown organically and this has often led to large variations in how organisations have deployed these roles including the practitioner's scope and level of practice. In recognition of this, HEE (2017) published the [Multi-professional framework for advanced clinical practice in England](#) which provides a clear definition of advanced practice.

*'Advanced practice is delivered by experienced, registered health and care practitioners. It is a level of practice characterised by a high degree of autonomy and complex decision making. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education, and research, with demonstration of core capabilities and area specific clinical competence.'*

*'Advanced practice embodies the ability to manage clinical care in partnership with individuals, families, and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcomes.'*

HEE's approach is focused on advanced practice as a level of practice, rather than a specific job role, developed and demonstrated by experienced regulated health and care professionals. It is underpinned by level 7 (Master's level learning) and characterised by a breadth of capabilities, which include engaging in complex clinical-reasoning and decision-making to manage high levels of complexity, uncertainty and risk within practitioners' own scope of practice.

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All health and care professionals working at an advanced practice level should have the knowledge, skills and behaviours to meet all the capabilities across the four pillars of advanced practice, as outlined in HEE (2017) [Multi-professional framework for advanced clinical practice in England](#).

In preparation for advanced practice, formal assessment is required of the individual's capability within their scope of practice. It is critical to the implementation, acceptance, and sustainability of advanced practice roles that health and care professionals working at this level are widely recognised as having a consistent level of capability within their scope of practice, which are relevant to their job role, practice environment and contribution to service delivery. This is essential for ensuring that advanced level practice safely, effectively and efficiently contributes to meeting patient care needs and delivers patient benefit.

It is important to note that some practitioners have been given the term 'advanced' in their job title and role descriptor but may not be working at this level of practice. This may be for various reasons. It is advised that organisations review their current advanced practice workforce and ensure that practitioners can map effectively against the multi-professional capabilities. If gaps are identified, practitioners should be supported, developed, and facilitated to develop their capabilities to practise across all four pillars of advanced practice where this fits with workforce development and deployment requirements. There are different ways in which practitioners can be supported to do this. Please see The Centre for Advancing Practice [website](#) for further information, including guidance on the [ePortfolio](#) (supported) route and [governance matrix](#).



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More information about advanced practice roles can be found here:

<https://www.hee.nhs.uk/our-work/advanced-clinical-practice/what-advanced-clinical-practice>.

## 4.0 Advanced Practice Midwifery Capabilities Framework

The advanced practice in midwifery capabilities should be developed and demonstrated by practitioners through formal level 7 education and training. This includes through practitioners maintaining a portfolio of evidence across the four pillars of advanced practice and demonstrating the integration of their academic and workplace-based learning and development, in line with the demands of level 7 and advanced level practice. This is achieved by practitioners' engagement with an advanced practice MSc programme that integrates workplace-based supervision, learning and assessment and that directly builds on the requirements of registration as a regulated healthcare professional and substantial clinical experience gained by practitioners beyond the point of their registration.

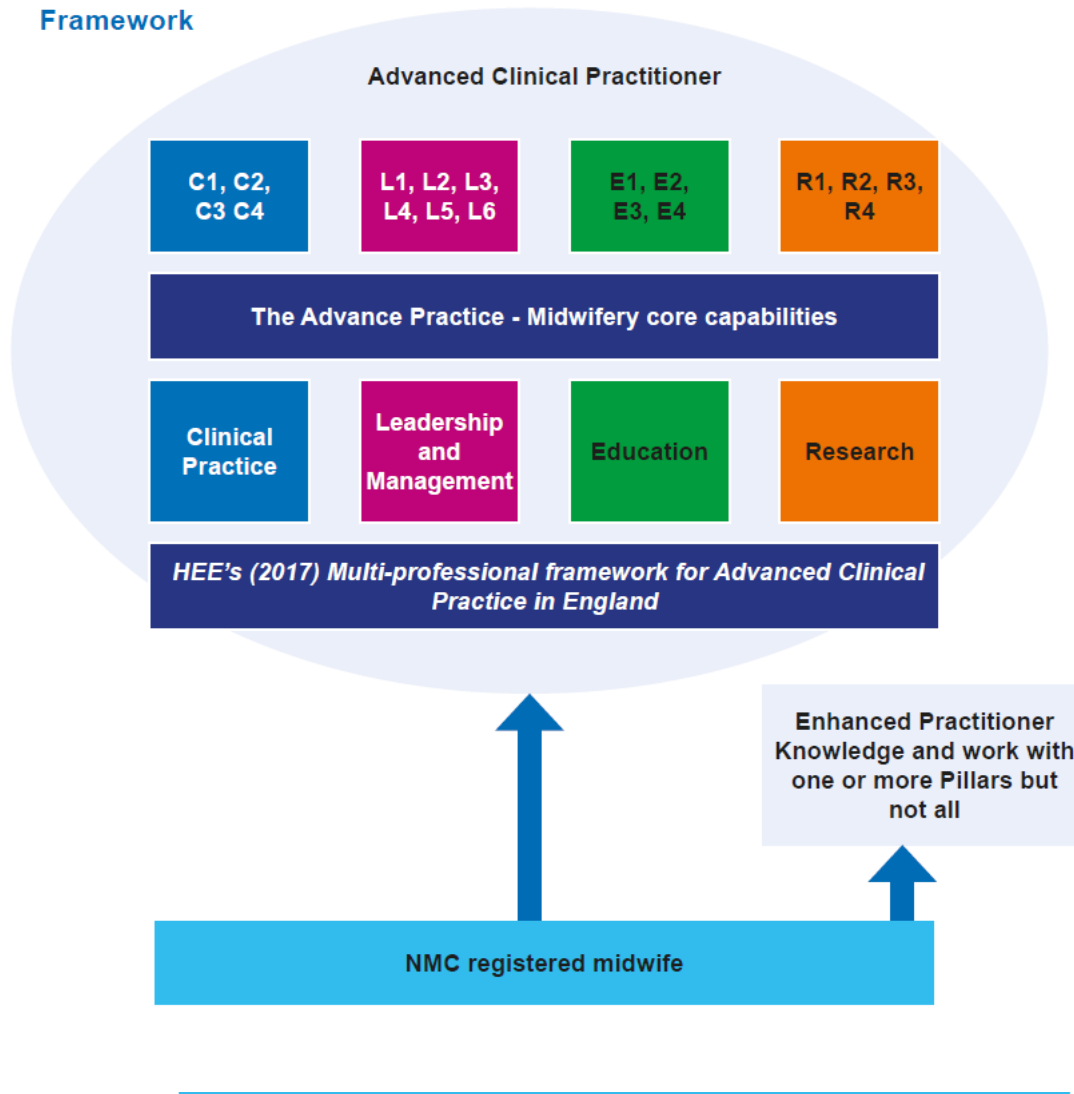
Advanced level capability in complex decision making in midwifery needs to be demonstrated and assessed across the four pillars of advanced practice.

The three requisites for advanced practice in midwifery are shown in Figure 3:

1. Current registration as a midwife on the Nursing and Midwifery Council Register.
2. Fulfilment of the generic capabilities identified across the four pillars of advanced practice, as defined in HEE (2017) [Multi-professional framework for advanced clinical practice in England](#), namely clinical practice, leadership and management, education and research.
3. Fulfilment of the advanced clinical practice in midwifery core capabilities, available in the [Advanced Clinical Practice in Midwifery: Capability Framework](#)

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Figure 3 Advanced Clinical Practitioner in Midwifery Capability Framework



## 4.1 Why is there a requirement for advanced practice in Midwifery?

Currently, limited career progression pathways exist for midwives who want to remain clinical, rather than progressing into a managerial role. It has been evidenced that advanced practice roles can provide highly skilled practitioners the opportunity of a career 'at the bedside' (Goemaes et al., 2018), and a role in which leadership, clinical expertise, research and educational skills can be fully utilised, (Hamilton et al., 2015). Advanced practice roles have also been shown to improve patient outcomes, increase levels of patient satisfaction, reduce lengths of stay in hospital, improve continuity of care, and increase capability in healthcare (Coyne et al., 2016; Goemaes et al., 2018). The development of advanced practice roles also has the potential to aid retention of senior staff and improve job satisfaction.

In England, there are currently advanced midwifery practitioners working across all areas of maternity including, but not limited to, triage and day assessment unit, maternal medicine, perinatal mental health, community hubs, postnatal services and perinatal and pelvic health.



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Effective multi-disciplinary team working is essential to the success of advanced practice roles and The Royal College of Obstetricians and Gynaecologists (RCOG) have recently provided a position statement expressing their support for further implementation of midwifery advanced practice roles.

## 4.2 Delivery of the Framework

In response to Better Births (2016), the Health Education England Maternity Programme established a project to develop midwifery standards via a framework relating to advanced practice in midwifery to support the high-quality care envisioned in Better Births. This [report](#) describes an analysis of the way advanced practice has been developing in maternity services in England conducted by the University of East Anglia and commissioned by Health Education England.

The capabilities framework should be used by HEIs to inform their curriculum design within their advanced practice MSc programmes. The MSc should usually be offered for completion on a part-time basis over three years by practitioners who are in a full-time advanced practice midwifery trainee role.

HEIs can deliver the capabilities framework either via their generic (multi-professional) advanced practice programme or by developing a midwifery-specific study route through their advanced practice MSc provision. Delivery of the framework will therefore vary between HEIs, depending on their programme structure and curriculum design. The framework (either through generic provision or an area-specific study route) can also be delivered via the Advanced Clinical Practitioner Apprenticeship, providing that provision meets the specific requirements for this.

All delivery of the framework should enable practitioners to develop and demonstrate fulfilment of the midwifery-specific capabilities, in addition to the generic advanced practice capabilities in HEE (2017) [Multi-professional framework for advanced clinical practice in England](#)

It is recommended that organisations when looking at implementing advanced practice roles contact their local HEI's for information relating to current advanced practice provision, or contact the Regional Faculties for Advancing Practice for further advice and support, (contact details can be found in Section 10 of this document). The [Centre for Advancing Practice's website](#) provides a list of MSc programmes that have received Centre accreditation.

## 5.0 Workforce planning

Advanced practice in midwifery is an emerging concept and lacks the parity of esteem in comparison to advanced practice in nursing e.g., Advanced Neonatal Nurse Practitioners. Health Education England, (2019) *Maternity Workforce Strategy*, highlighted the complexity and number of services provided in maternity care. To support population health needs there is recognition of the requirement for new roles, and possibly new levels of practice within midwifery. To support the transformation of maternity services HEE, (2022) [The Advanced Clinical Practice in](#)



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[Midwifery Capabilities Framework](#) has been produced to support the development of advanced practice capability and capacity within midwifery.

The development of advanced practitioner roles should initially be driven by an analysis of service need and scrutiny of the capabilities and capacity of the existing and available workforce. Improving population health, experience, and outcomes, tackling unequal access to services, enhancing productivity and value for money are priorities for Integrated Care Boards (ICB). The partnership between health and care organisations will allow the development of joined up services, improving the health of the local population.

Designing and developing services, and the workforce within them, allows us to co-design and co-produce efficient solutions to existing skills gaps. To do this effectively, the current workforce needs to be analysed to take into consideration the different skill sets and levels of practice e.g., preceptor, enhanced, advanced and consultant level practice.

The development of an advanced practice role should be inextricably linked to workforce development plans, business intelligence and workforce commissioning. All working collaboratively with local organisations, patients with experience, professional groups, higher education institutions, workforce transformation leads, workforce planning and the ICB. Crucially, expectations regarding the level of practice and the specific capabilities are key to competence and capability assessment.

It is advised that the following documents should be held by NHS organisations to provide an audit trail of local decision-making:

- Job description and rationale/business case for the post. It is important to note that although a job description will need to be in place for the trainee/advanced practitioner, advanced practice is a level of practice and not task focused.
- Matching or locally evaluated summary report for the post.
- Local record of those posts for which the use of the advanced practice title is approved by the Trust board.
- Nature and number of advanced practice posts to be reflected in the Trust/organisation workforce plan.
- Evidence that appropriate clinical and educational supervisors have been identified to support the advanced practitioners. HEE guidance around workplace supervision for advanced practice roles can be found here: <https://www.hee.nhs.uk/workplace-supervision-advanced-clinical-practice>.

There are additional roles and responsibilities that clinicians can undertake with further training in Midwifery. These do not form part of the advanced practitioner training.

### 5.1 Business case development

#### **Key indicators that should be evidenced in a robust business case:**

- What outcomes are expected from the advanced practice role?

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- When will these outcomes be achieved and how will these be measured pre and post implementation?
- What risks and unintended consequences might there be to the introduction of this role and how may they be mitigated?
- What resources and support are required for role development (clearly include any work based and educational supervision requirements) and succession planning?
- Is the workforce optimised e.g., Support workers and nursing colleagues, to ensure clinical and financial benefits are maximised?
- How will on-going competence and capability be reviewed and enabled?
- What reporting and line management structure will be in place?
- What processes will identify gaps in performance and/ or shortfalls in implementation and how will these be addressed?
- Has a quality assurance model been considered to measure this e.g., CQC 5 key lines of enquiry which will support inspection?

The advanced practice lead within each organisation will have oversight of those working in advanced practice roles. They will support managers to understand the potential impact of advanced practitioners in developing and transforming service delivery. In order to establish advanced practice roles, the organisation will need to articulate the business case for this investment, in collaboration with your advanced practice lead, to consider population and system need. Role profiles/job descriptions should be mapped to HEE (2017) [Multi-professional framework for advanced clinical practice in England](#) .

An example Job description and role specification criteria can be found in [Appendix 2](#), job plans should include time for clinical supervision and be representative of the four pillars of advanced practice. Job descriptions should reflect the level of practice and not be task focused.

It is advised that organisations who currently employ, or are considering employing advanced practitioners, undertake the Advancing Practice Readiness Checklist ([Appendix 4](#)), and [The Centre for Advancing Practice Governance Maturity Matrix](#)

### 6.0 Recruitment

Advanced practice embodies the ability to manage care in partnership with individuals, families, and carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance people's experience and improve outcome. Therefore, the recruitment process for trainee/advanced practitioner posts should be robust, and evidence supports that the success of advanced practitioner roles is synonymous with a well-prepared candidate. It is recommended that the recruitment process should include the necessary stakeholders, i.e., HEIs, advanced practice leads and directors, or heads of midwifery.

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Essential requirements to apply for a trainee advanced practice post are:

- Hold current NMC registration.
- Extensive experience post registration and in the relevant specialty area
- Evidence of effective people management and leadership skills
- Evidence of extensive professional /clinical knowledge in the relevant specialty
- Effective communication skills and the ability to communicate complex and highly sensitive information.
- Evidence regular continuing professional development.
- Must be able to demonstrate an understanding of the level of advanced practice.
- Meet HEI eligibility criteria to be enrolled on an advanced practice MSc programme / apprenticeship\*.
- Ability to study at master's level and meet the demands of combining part-time academic study with working in clinical practice within a set time frame to develop and demonstrate advanced practice capabilities across the four pillars of advanced practice.

\*If degree level study cannot be clearly evidenced, the HEI will undertake an assessment of previous academic study to assess suitability to study at master's level. Apprenticeship requirements also state the need for level 2 (GCSE or equivalent) maths and English.

It is recommended that the following criteria are met in relation to the interview and selection process.

- Shortlisting and interview panel should as a minimum include a senior clinician, organisational advanced practice lead or equivalent and managerial representation.
- Ensuring the workforce reflects the community served and champions inclusion.
- Following selection, candidates can ask for feedback relating to their profile and/or performance at interview which will be provided by those involved in the interview process.
- Successful applicants who are considered to have relevant prior experience will have their evidence mapped to the relevant curricula / capabilities identifying any gaps and additional training required and appropriate banding level.

### 7.0 Professional registration and regulation

All advanced practitioners remain subject to the registration requirements set by the professional regulator for their profession. They must therefore continue to meet that regulator's standards of proficiency and conduct and revalidation/CPD requirements.

### 8.0 Recognition of advanced practice roles

Health Education England Centre for Advancing Practice also recognise practitioners who successfully complete a Centre-accredited MSc in advanced practice or the Centre's ePortfolio (supported) Route by conferring a digital badge. Digital badges do not indicate that practitioners hold a particular scope of practice, and

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responsibility for determining the currency and relevance of a practitioners' scope of practice for a particular job role sits with employing organisations.

It is the expectation that over time, all advanced practitioners will be working towards or already hold a Centre for Advancing Practice digital badge. This will enable organisations and advanced practitioners to demonstrate that they are working at an advanced level of practice and meet the national minimum standards. This promotes public and peer confidence in the practitioners' level of practice and ensures safe, effective, high-quality care for patients.

Currently practitioners can gain recognition via the following routes:

- Successfully completing an HEE accredited advanced practice MSc programme.
- Successfully completing the HEE ePortfolio (supported) Route.

For information on the e-Portfolio(supported)Route please visit the Centre for Advancing Practice website <https://advanced-practice.hee.nhs.uk/eportfolio-route/>

### 8.1 Medicines mechanisms including independent and supplementary prescribing.

Where required as part of the specific role, advanced practitioners in midwifery can address medicines related issues and support people with the supply, administration, and management of medicines, within their existing scope of practice. This may be via an independent or supplementary prescribing route or using the mechanisms where available for patient specific direction (PSD) and patient group direction (PGD) and midwives' exemptions (ME).

## 9.0 Organisational commitments/ governance

Accountability is a preparedness to give an explanation to relevant others for ones' s judgement, intentions, acts and omissions, when called upon to do so. At the core of professional accountability is the concept that each practitioner is personally and professionally responsible for their own practice.

Risks to patient safety may arise when professional practitioners take on roles, responsibilities, or tasks which they lack the competence to carry out safely and effectively. Risks may also arise where they practice with inadequate safeguards, which could expose service users to risk of harm. It is inherent in advanced roles that new responsibilities, skills and tasks are taken on. In order to protect service users and provide assurances of the increased skills and responsibilities of advanced practitioner roles, organisations need robust governance arrangements in place prior to their establishment.

Good governance regarding the development and implementation of advanced roles must therefore be based upon consistent expectations regarding the level of practice required to deliver the service. This is best achieved through the benchmarking of such posts against nationally agreed standards and processes. Concerns about 'new roles' is both prudent and understandable and it has been argued that risks to

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service users' safety arise when professionals take on roles and responsibilities for which they lack competence or where they practice without adequate safeguards.

Organisations with practitioners working at an advanced practice level should have governance processes which provide guidance and assurances, which are agreed at board level and cover the following:

- Evidence clear corporate leadership and governance for advanced practice
- Evidence a robust organisational structure in place at clinical / speciality / divisional and corporate level.
- Ensure there is a clear understanding of advanced practice at clinical and operational level.
- Evidence that the planning and recruitment of advanced practitioners across all divisions map to the workforce plans, ensuring workforce plans are developed to meet local and regional needs.
- Organisational governance and assurances are in place to ensure advanced practitioners feel safe to practice at the top of their licence, only limited by professional registration and agreed scope of practice, with the organisation taking all appropriate steps to ensure patient safety.
- Advanced practitioners' recruitment and training is consistent and equitable across the organisation.
- Advanced practitioners across the organisation undertake standardised, equitable, supported, and resourced training and assessment.
- Advanced practitioners are supported to follow national, regional, and local recognition/credentialing and, or accreditation processes.
- Robust organisational governance for clinical supervision is demonstrated and aligns with [The Centre for Advancing Practice Governance Maturity Matrix](#)
- Continued professional development governance and assurance structures are in place to ensure advanced practitioners are retained through continued development and thus providing high quality, safe and effective care.
- There are feedback mechanisms for evaluating the impact of advanced roles that utilise quality improvement and data to identify the impact on service provision, access, patient outcomes, pathways, and the teams in which they work.

HEE general organisational advanced practice readiness checklist can be found in [Appendix 4](#). Region specific information can be found in the regional sections of the Centre for Advancing Practice website, <https://advanced-practice.hee.nhs.uk/regional-faculties-for-advancing-practice/>

HEE have also developed [The Centre for Advancing Practice Governance Maturity Matrix](#). Health and care organisations across all settings can access this to formatively self-assess their progress on the governance and assurance of advanced practice against the eight domains, which will then indicate whether they are making either early progress, substantial progress, or are mature in the governance of advanced practice within their organisation.

## 10.0 Workplace supervision

The transition from senior midwife to advanced practitioner requires high quality supervision, to provide safety for both patient and practitioner. To support supervisors and trainees HEE have produced guidance on how this process should be undertaken.

- [Workplace Supervision for Advanced Clinical practice](#) provides in-depth, evidence-based information and recommendations on how to develop quality supervision in the workplace.
- [Advanced Practice Workplace Supervision](#) provides guidance for supervisors, managers, employers, and trainee advanced practitioners on HEE Centre for Advancing Practice minimum expected standards for supervision.

The Centre for Advancing Practice has created some short video resources to accompany the '[Workplace Supervision for Advanced Clinical Practice: An integrated multi-professional approach for practitioner development](#)' guidance. The videos provide practice insights for each of the fundamentals of supervision set out in the guidance and are a useful resource for anyone who is either developing or providing supervision for trainee advanced practitioners.

## 11.0 HEE Financial Support

HEE is supporting the development of advanced practice roles by offering a package of funding and support for trainee/advanced practitioners (subject to HEE spending review budgets). Employers are invited to put forward requests for funding via the Regional Faculties for Advancing Practice demand scoping processes, these should come via an organisations advanced practice lead. More information regarding regional funding offers can be found either in the 'Regional Faculties' sections on the Centre for Advancing Practice website, <https://advanced-practice.hee.nhs.uk/regional-faculties-for-advancing-practice/> alternatively, you can email the faculties directly.

**Northwest** – [acp.nw@hee.nhs.uk](mailto:acp.nw@hee.nhs.uk)

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**Southwest** – [advancingpractice.sw@hee.nhs.uk](mailto:advancingpractice.sw@hee.nhs.uk)

**Southeast** – [acpenquiries.se@hee.nhs.uk](mailto:acpenquiries.se@hee.nhs.uk)

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**Advanced Clinical Practice in Midwifery: Capability Framework**

<https://www.hee.nhs.uk/our-work/maternity/advanced-clinical-practice-acp-midwifery>

**Advanced Practice Toolkit:**

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**HEE Centre for Advancing Practice webpage:**

<https://www.hee.nhs.uk/our-work/advanced-clinical-practice>

**HEE Quality webpage:**

<https://www.hee.nhs.uk/our-work/quality>.

**New NHS Education Contract:**

<https://www.hee.nhs.uk/our-work/new-nhs-education-contract>

**NHS England, National Maternity Review. Better Births, Improving outcomes of maternity services in England:**

<https://www.england.nhs.uk/wp-content/uploads/2016/02/national-maternity-review-report.pdf>

**NHS Next steps on the NHS five year forward view**

<https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPSON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf>

**NHS Long Term plan**

<https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf>

**NHS People Plan**

[https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan\\_June2019.pdf](https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf)

**NHS Multi-professional framework for advanced practice in England:**

[Multi-professional framework for advanced clinical practice in England](#)



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## Nursing and Midwifery Council – Standards of Proficiency for Midwives:

<https://www.nmc.org.uk/standards/standards-for-midwives/standards-of-proficiency-for-midwives/>

## National Webinar

In September 2022, Health Education England hosted a national advanced practice in midwifery webinar. The recording can be accessed through the link [here](#):

## 13.0 Appendices

### Appendix 1 Glossary

<b>ACP</b>	Advanced Clinical Practice
<b>AMP</b>	Advanced Midwifery Practitioner
<b>ANNP</b>	Advanced Neonatal Nurse Practitioner
<b>AP</b>	Advanced Practice
<b>CPD</b>	Continued Professional Development
<b>CQC</b>	Care Quality Commission
<b>EDI</b>	Equality, Diversity and Inclusion
<b>GCSE</b>	General Certificate of Secondary Education
<b>HEE</b>	Health Education England
<b>HEI</b>	Higher Education Institution
<b>ICB</b>	Integrated Care Board
<b>MSc</b>	Master of Science
<b>ME</b>	Midwives Exemption
<b>NHS</b>	National Health Service
<b>NMC</b>	Nursing and Midwifery Council
<b>PGD</b>	Patient Group Direction
<b>PSD</b>	Patient Specific Direction
<b>RCOG</b>	Royal College of Obstetricians and Gynaecologists
<b>SMART</b>	Specific, measurable, achievable, relevant, time-bound

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## Appendix 2 Example midwifery advanced practice job description and person specification

*The following job descriptions are examples that have been used in trusts across England. It is important to reiterate that advanced practice is a scope or level of practice and is not task focused. Your individual trusts may have existing (multidisciplinary) advanced practice job description. It is advised that you contact your trusts advanced practice lead prior to the development of a job description/role profile.*

**Job Title: Advance Practitioner – Midwifery**

**Banding:**

**Directorate: To be added**

**Reporting to: To be added**

### **About the job**

The post holder will demonstrate a high level of expertise within the specialist service providing advice, education and support to staff, patients, their families and carers.

The post holder will be practising autonomously as an advanced clinical practitioner within the designated speciality area to provide patient-centred clinical care. This will encompass the skills of advanced clinical assessment, examination, diagnosis and treatment within an agreed scope of practice throughout the directorate.

The post holder will support new ways of working that emphasises a more efficient and patient focused service, and will ensure the safe treatment, referral and discharge of patients with undifferentiated and undiagnosed presentations in their area.

Responsibility for leading the on-going development of clinical practice and standards of care within the service, including the development of policies, procedures, protocols and guidelines in collaboration with multidisciplinary colleagues.

The post holder will deliver a 90% clinical component to their role and 10% related to appraisal, clinical audit, teaching, continuous professional development and research.

## Person Specification

### Behaviors and values

Essential	Desirable
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## Advance Practice in Midwifery Implementation Guide

<ul style="list-style-type: none"> <li>• Excellent communication skills</li> <li>• Ability to perform in stressful and complex situation</li> <li>• Sound clinical reasoning &amp; decision making</li> <li>• Flexible</li> <li>• Ability to inspire and lead a team</li> </ul>	
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### Skills and abilities

Essential	Desirable
<ul style="list-style-type: none"> <li>• Advanced Clinical Assessment skills</li> <li>• Evidence of research &amp; audit</li> <li>• Publication in healthcare journals</li> <li>• Evidence of dissemination of knowledge in wider healthcare organisations</li> </ul>	

### Experience and knowledge

Essential	Desirable
<ul style="list-style-type: none"> <li>• Minimum of 5 years' post registration experience at a senior level (Band 7 or above) in specialty area</li> <li>• Evidence of on-going CPD</li> <li>• Evidence of teaching in a variety of environments</li> <li>• Broad range of clinical experience particularly on Labour Ward including expert in CTG interpretation; management of obstetric emergencies; perineal repair; care of epidural in situ; theatre skills</li> </ul>	

### Qualifications and training

Essential	Desirable
<ul style="list-style-type: none"> <li>• Registered Midwife</li> </ul>	

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<ul style="list-style-type: none"> <li>• Post Graduate Qualification in specific speciality or equivalent experience</li> <li>• MSc Level qualification or equivalent CATs (Care Assessment Tool)</li> <li>• Non-Medical Prescribing Course (If applicable to professional registration)</li> <li>• Advanced Life Support in Obstetrics qualification (s)</li> <li>• Teaching &amp; Mentoring qualification</li> </ul>	
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### Specialty specific

Essential	Desirable

### Outcomes and deliverables of role

#### Key working relationships

- Divisional Nursing & Medical Teams
- Chief Nurse & Senior Nursing Team
- General & Operations Managers
- Clinical Directors
- Consultants & Medical Teams
- Clinical Governance Team
- PALS, PPI
- External partners – HEI's, other healthcare providers, Local, regional & national networks

#### Delivery results/functional responsibilities

##### Clinical

1. Work autonomously as an advanced practitioner within the specialty, managing a caseload of patients delivering individualised direct patient care.
2. Direct responsibility for assessment, examination, investigation and diagnosis of patients within their area of work.
3. Appropriately treat patients, resulting in the safe management and appropriate referral or discharge of patients with undifferentiated and undiagnosed presentations.

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4. Receive referrals via a variety of sources, including direct patient referral. Manage own caseload and clinical priorities according to agreed protocols and working practices.
5. Participate in multidisciplinary clinics, participate in ward rounds, patient reviews and multidisciplinary team meetings.
6. Undertake a variety of clinical skills and provide treatment/ advice as per specialty and scope of practice. Using agreed protocols of clinical practice and professional guidelines. This service may be provided within an acute secondary healthcare facility or in primary, community or home care settings.
7. Within scope of practice and clinical competence request and / or undertake diagnostic procedures and clinical investigations related to plans of care.
8. Utilise scope of practice to undertake Non-Medical Prescribing role and provide advice on medicine management issues associated with the patient specialty group. Work within Trust policy for Medicines Management.
9. Utilise advanced knowledge and skills relating to the specialty to provide specialist advice to other members of the multidisciplinary team on the basis of patient assessment.
10. Provide a seamless, high-quality service from referral through to assessment, diagnosis, treatment and review, referring to other specialists as required. Provide guidance to staff, patients and their families and carers on pathway navigation.
11. Lead in the development and updating of referral guidelines and policies for the service.
12. Use highly developed communication skills to effectively communicate with colleagues, patients and their relatives/carers, making reports and liaising as required with medical staff and other members of the multidisciplinary team both verbally and in writing.
13. Use professional judgement to act as an advocate for patients to ensure a patient focused approach to the delivery of care. Support and enable patients and carers to make informed decisions relating to their treatment and management. Escalate any concerns via the nursing / professional structures as required.
14. Work towards safe and timely discharge and/ or transfer of care of patients from or between hospitals and services and healthcare professionals, ensuring barriers to discharge / transfer are identified and acted upon appropriately.
15. Report and raise concerns related to Safeguarding, accessing advice and support as required. Be conversant with Trust policies for safeguarding including the assessment of mental Capacity, and consideration of Deprivation of Liberty Safeguards (DOLS) and the application of the principles of Prevent (counter terrorism awareness).
16. Ensure effective and accurate verbal or written handover of patients between healthcare professionals.
17. Ensure that high standards of all documentation are maintained, with accurate, complete and up-to-date information regarding patient care are kept in accordance with Trust standards.

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18. Monitor the quality and standard of care provided by all members of the team and all staff in clinical areas. Identifying any skills or training gaps and escalating to the appropriate Senior Nurse or Matron.
19. Undertake training to develop further advanced practice roles required by the service to provide a high standard of patient care.
20. Practice within the scope of professional registration (i.e., NMC, HCPC).

### Education

1. Act as an expert educational resource for clinical staff, patients, and carers by providing formal and informal education. Promote and develop a positive learning environment throughout the Trust.
2. Act as mentor/ assessor to staff members and students as required, providing educational advice and support. Ensure wards / departments can access appropriate training support and guidance.
3. Lead and actively participate in the delivery of educational programmes for all grades of nursing, medical and allied health professional staff.
4. Provide support and guidance to all levels of ward staff in their clinical role.
5. Ensure that pre and post registration students receive appropriate learning experience whilst allocated to the directorate.
6. Participate in provision and identification of in-service training need for all team staff.
7. Participate in education and practice development on a Trust wide basis liaising with Trust wide educational leads to ensure overall Trust educational objectives are delivered.
8. Recognise the limits of own professional practice and competence, undertake further training and academic qualifications as required to maintain own specialist knowledge.
9. Take responsibility for ensuring personal and completion of any statutory or mandatory training as required for. Informing line manager if there is any deviance from training attendance.
10. Adapt clinical knowledge and skills to different clinical settings.
11. Participate in the annual appraisal process, delegating duties to team members as appropriate to ensure all staff within the team have personal development plans which support revalidation.
12. Maintain close links with local HEI's and participate in in the development and delivery of new and established advanced practice programmes.

### Quality & Safety

1. Support the maintenance of KPI's NHSLA compliance, CQC compliance and local and national clinical governance initiatives in close collaboration with the directorate senior nursing, medical and management and in collaboration with clinical governance teams.
2. Maintain improvements in patient safety by supporting implementation of patient safety initiatives, prompt and appropriate response to complaints resolution and escalation where appropriate.

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3. Ensure patient safety by escalating any risks with staffing or service provision to directorate management team.
4. Report any issues with quality and safety immediately to Matron or Clinical Director.
5. May be deployed to work in any part of the Trust should the need arise to ensure patient safety is maintained.

### Management and leadership

#### Leadership and management

1. Provide highly visible and accessible professional leadership and demonstrate expert knowledge and standards of clinical practice.
2. Lead and develop a defined area of advanced practice within the designated area of practice, promoting interdisciplinary team and collaborative working practices.
3. Meet regularly with team members as a team and on an individual basis as required to support their personal and professional development.
4. Promote team working, build rapport and collaborative working practices with multidisciplinary team. Liaise with inter-hospital departments and personnel across organisational and professional groups. Ensuring effective communication and interpersonal skills with other disciplines and organisations.
5. Act as a clinical role model demonstrating high standards of advanced practice and provide support or advice to other staff when necessary.
6. Lead and support the development of the role according to changing patient's needs, service requirements and evidence base practice.
7. Lead and actively participate in service/ departmental projects, quality initiatives and statutory accreditation processes. This will include the setting and monitoring of clinical standards of care.
8. Ensure that all resources are managed in an efficient and cost-effective manner to achieve maximum effect for patients and staff.
9. Adhere to all relevant Trust policies and procedures and to ensure that they are correctly implemented.
10. Lead in the implementation of multidisciplinary service objectives that reflect Trust strategies for patient care.
11. Demonstrate effective leadership skills, supporting the senior management team (Nurse Consultant/ Lead AP/ Matron/ Clinical Director) in service development and lead as delegated on the implementation of any of these changes.
12. Monitor standards and maintain high quality care. Report any clinical incidents via the Trust electronic reporting system and escalate issues promptly and appropriately.
13. Utilise the highest level of interpersonal and communication skills when dealing with complex, sensitive, or emergency situations.
14. Maintain an awareness of professional and ethical issues to ensure care is delivered in a professional timely and courteous manner by all members of



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the team, respecting the different spiritual and cultural backgrounds of colleagues, patients and relatives.

15. Escalate any concerns or complaints promptly.
16. Participate in the recruitment and selection of staff.
17. Responsibility for completing or delegating the preparation and daily review of staff duty rota's, ensuring that the team provides most effective service provision.
18. Accountable for own practice, always acting within the Professional Code of Professional Conduct (NMC, HCPC, CSP).
19. Maintain a working knowledge of local and national professional policy and strategy.
20. Attend and when required chair multidisciplinary meetings as a representative of the service. Ensure minutes and agreed actions are communicated to stakeholders according to agreed timescales.

### Setting direction and service improvement

#### Research and audit

1. Participate and where required lead or assist in research projects as required, disseminating and ensuring utilisation of research results to change practice.
2. Utilise research findings in the delivery of advanced clinical patient care, developing new ways of working.
3. Be aware of research /trials being undertaken within the specialist field of practice.
4. Participate and where required lead audit projects as required by the specialty, involving collating, analysing and reporting on results of the audit process.
5. Provide support, encouragement, and advice to nursing staff undertaking audit and research.
6. Assist in the testing and evaluation of new equipment within the clinical area.
7. Collate, analyse, and present reports on varying aspects of the speciality activity as required by directorate or divisional team.
8. Ensure the results of audit and research conducted by the team are disseminated at local, regional, and national level.
9. To share best practice; through publications and attendance/presentation opportunities at conference level.

# Advance Practice in Midwifery Implementation Guide

## Job Description

**Role Title: Trainee Advanced Clinical Practitioner – Maternal Medicine and Health Inequalities**

**Band:**

**Responsible to: Consultant Midwife**  
**Accountable to: Director of Midwifery**

**Key Working Relationships: Consultant Obstetricians / Anaesthetists, Physicians, Midwifery Staff**

## Our Vision, Mission, Values and Behaviours

*To insert as trust appropriate*

## Job Summary:

**Individual training needs will be met to achieve the level of competence and capabilities required by the post during training, and upon completion. The trainee will be paid at XX until completion of all competencies matched to the Advanced Practice Multi-Professional Framework, and completion of the master's Programme. University attendance is supported and within the supernumerary role, supervision from an AP / Consultant Obstetrician / Consultant Anaesthetist will be provided.**

The post holder is an experienced Midwife working towards a Masters' Level Advanced Practice degree. They are a high profile, accessible and responsive leader, with managerial and clinical responsibility for the delivery of advanced practice in maternity. They will be involved in making complex decisions within their scope of professional practice, involving service users to ensure agreed standards, targets and objectives are met.

They will, with obstetric support, assess patients, complete clinical assessments, diagnose, treat, and evaluate care. They will demonstrate safe, and expert care for patients. The post holder will demonstrate critical thinking in the clinical decision-making process. They will work collaboratively with the obstetric and midwifery team to meet the needs of patients with additional medical conditions such as renal disease, cardiac disease, and diabetes, haemoglobinopathies including those experiencing health inequalities.

On completion of a Non-Medical Prescribing module, they will prescribe medication in accordance with trust guidelines.

They will play a key role in service delivery and adherence to policies and procedures. The successful post holder will provide clinical expertise, management, and leadership to midwives in collaboration with the multidisciplinary team.

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They will, with support and supervision, lead in the provision of maternal medicine throughout the peripartum, working closely with the substantive advanced clinical practitioners and the Multi-Disciplinary Team. The post holder will be required to work within all areas where maternity patients may be housed. They will work alongside medical, midwifery and multi-disciplinary colleagues in the management of maternity patients, providing support, guidance and advice as required.

They will be instrumental in identifying the developmental and learning needs of midwives and team members within maternal medicine. They will be an advocate for and contribute to, a culture of organisational learning. The post holder will be required to ensure evidence-based care is delivered to patients and be involved in audit, research, and service improvement.

The postholder will co-ordinate the care needs of patients with additional medical conditions such as renal disease, cardiac disease, and diabetes, Haemoglobinopathies including those experiencing health inequalities.

### **Main Duties/Responsibilities**

This job description is a guide to the general scope of duties and is not intended to be definitive or restrictive. It is expected that some duties will change over time and this description will be subject to review in consultation with the postholder. They will ensure they deliver care in line with the 4 pillars of advanced practice.

### **Clinical**

- Co-ordinate the care of maternity patients throughout the care pathway with the multidisciplinary team and clinical services to ensure the effective management of maternal medicine patients which include diabetic, renal, haemoglobinopathies and cardiac conditions and those experiencing health inequalities.
- Accountable for own actions in accordance with the Code of Professional Conduct.
- Be responsible for the maintenance and development of personal clinical skills, and act on professional judgement about when to seek help.
- Highly developed communication skills enabling the maintenance of a high-quality service within a complex and challenging environment.
- Assist the medical and midwifery teams in the assessment and prioritisation of patients requiring intervention.
- Use advanced clinical assessment skills necessary within maternal medicine and health inequalities, to autonomously manage these patients' physical and psychological needs.
- Use a range of assessment methods to work with individuals and families to facilitate their care according to their individual needs.
- Undertake procedures to facilitate efficient urgent care in the context of acute illness or sudden deterioration, within their scope of practice.
- Initiate relevant investigations such as Ultrasound, ECG and blood tests to enable timely diagnosis and facilitate early decision making.

## Advance Practice in Midwifery Implementation Guide

- On completion of the NMP (Non- Medical Prescriber) V300, they will participate in the prescription and review of medication in line with trust guidance within their scope of non-medical prescribing. They will consider any treatment given previously for pre-existing medical conditions, which is appropriate to patient needs.
- Provide information and advice to patients on prescribed medication regimens.
- Promote and deliver evidence-based care for patients presenting to maternity.
- Support clinically where the service needs have been escalated.
- Act as an autonomous practitioner and as a trainee advanced clinical practitioner, uses professional judgement on when to seek help.
- To participate in a minimum of one clinical shift per month when the escalation policy is required.
- To participate in any existing hospital on call rotas.
- To provide support, highly specialised information, and counselling when a poor outcome of pregnancy is suspected/diagnosed.
- Ensure diagnostic results are explained.
- Ensure individualised support and advice is offered for women undergoing termination of pregnancy.
- Prioritise, organise, and manage own workload in a manner that maintains and promotes quality.
- Deliver care according to local and national guidelines ensure delivery of evidence-based care.

### Leadership and management

- Demonstrate continual evaluation of practice within the defined specialist area, making agreed changes where appropriate.
- Ensure the provision and continuing effectiveness of the Maternal Medicine referral pathway.
- Support leadership within the existing management team to ensure effective running of the Ante-natal department and be responsible for the provision of this specialist service with adherence to national standards and guidance.
- Contribute to corporate objectives, utilising local, Trust, ICS and statutory guidelines and policies.
- Work closely with the multidisciplinary team to deliver quality care and improvements to the department in line with national and local guidance.
- Continue to lead the established complex team that cares for women with medical co-morbidities and work closely with the MDT specialists for these women and those with health inequalities.
- Attend and participate in Complex Obstetric MDT meetings and assist in the co-ordination of care regarding specialist needs or outcomes.
- Lead in new practice and help establish a post-natal contraception service.
- Contribute and participate in the future planning of the Maternal Medicine department, including participation within the Local Maternity and Neonatal System (LMNS).
- Demonstrate effective leadership and management skills and promote collaboration between Maternal Medicine and Advanced Clinical Practitioner (AP) Midwives, Consultant Physicians, Consultant Anaesthetist and Obstetricians within Maternity Services.

## Advance Practice in Midwifery Implementation Guide

- Provide highly specialised and up to date information for families, contributing to their understanding and choices for the pregnancy, relating to maternal medicine.
- Be accountable for the planning and implementation of the specialist clinics, and evaluation of the individualised care needs of women and their families,
- Liaise with the Senior Midwifery team to ensure lessons are learnt from complaints and feedback, utilising the relevant governance processes.
- Support with the development and timely review of guidelines relating to associated conditions and management in pregnancy.
- To provide clinical and professional leadership, and act as a role model / advocate for delivering individualised care needs.
- Utilise highly developed communication skills to ensure a high-quality routine service and timely management and resolution of unexpected events and situations.
- Be a knowledgeable and supportive leader and a resource for staff, advising on national, local and Trust policy and procedures/guidelines, ensuring that clinical governance is embedded in practice.
- To review patient information and ensure that literature is based on nationally accepted standards and that it is available in a variety of languages.
- The management of staff is consistent with Trust Values to the achievement of equality, equity, and peak performance.
- Coordinate MDT meetings and communicate with teams and individuals, providing opportunity for feedback.
- Assist in maintaining a safe environment, reporting all incidents to the Outpatient Modern Matron via the DATIX tool.
- Effectively manage the Maternal medicine caseload for clinic attendances, working collaboratively with the Complex Care lead and EMCERT (Enhanced Maternal Care Escalation and Response Team) lead.
- Allocate and manage own time, creating a balance between clinical and managerial duties.
- Ensure appropriate clinics are available to support acuity/referrals received as outlined within the local guidance for scheduled appointments in pregnancy.
- Be aware and support local research projects.
- Understand national initiatives relating to Maternal Medicine referral centre's and assist in their implementation, to influence patient care and service delivery.
- Work with Ward managers and matron to ensure sufficient staff of appropriate ability, quality and skill-mix are available to meet current and future service delivery.
- Manage specifically identified services or projects as agreed with the maternity management team.
- Contribute to the development of local guidelines, protocols, clinical pathways and standards.
- Contribute to specialist forums and National initiatives.

### Education

#### Leading and developing practice of self and others

- Share knowledge and expertise related to clinical and professional practice within and outside the organisation.

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- Supervise, support, guide and assist in the development and competency assessment of midwives / student midwives and medical students from WMS.
- Facilitate collaboration of the wider team to identify individual and team learning.
- Ensure own and others clinical practise is research based.
- Act as a positive role model
- Encourage others to make realistic self-assessment of their application of knowledge and skills, challenging any complacency or actions that are not in the interest of the public and/or users of services.
- Undertake mentorship and clinical supervision for more junior staff, assessing competence against set standards.
- Actively promote the workplace as a learning environment, encouraging everyone to learn from each other and from external good practice.
- Develop formal and informal teaching sessions and study days for midwifery and support staff in maternity and across the wider organisation.
- Assess own learning needs at an advanced level and beyond and undertake learning as appropriate.
- Provide an educational role to patients, carers, families and colleagues in an environment that facilitates learning.
- Contribute to and participate in the Trusts Education Strategy.
- Maintain a personal professional profile.
- Participate in teaching activities for medical students, midwives and junior doctors.
- Alert individuals and organisations to gaps in evidence and/or practice.

### Evaluation and Research

- Initiate and participate in the maintenance of quality governance systems and processes across the organisation and its activities.
- Utilise the audit cycle as a means of evaluating the quality of the work of self and the team, implementing improvements where required.
- Evaluate patients' response to health care provision and the effectiveness of care.
- Continuously assess and monitor risk in their own and others practice and challenge about wider risk factors.
- Use a structured framework (e.g., root-cause analysis) to manage, review and identify learning from patient complaints, clinical incidents and near-miss events.
- Critically evaluate and review innovations and developments that are relevant to the area of work.
- Continually evaluate and audit the practice of self and others selecting and applying a broad range of evaluation approaches and methods.
- Critically appraise the outcomes of relevant research, evaluations and audits and apply them to improve practice.
- Identify areas for midwifery research, sources of funding and initiate research projects. Assist the development of other midwives within the department to enable them to carry out their own research projects.

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## Other Associated Duties

- Any other duties/tasks reasonably expected by the Matron, Director of Midwifery, Deputy Head of Midwifery, Head of Midwifery, Clinical Director, and Group Manager
- Support the Matron in developing midwifery services and ensuring service objectives are met.
- Advise and contribute to investigations following complaints and critical incidents.
- Represent Midwifery at Trust, Regional and National level.

## Contractual Responsibilities

### Confidentiality

The post holder must maintain confidentiality, security and integrity of information relating to patients, staff and other Health Services business.

### Health and Safety

All staff must be familiar with the Trust Health and Safety Policy, including a thorough understanding of personal responsibilities for maintaining own health and safety and others.

### Risk Management

All staff need a basic working knowledge of risk management to enable them to participate in identification and control of all business risks that they encounter in their area of work.

### Equal and Diversity

Everyone has the opportunity to be treated with dignity and respect at work and has a clear responsibility to comply with the detail and the spirit of the Dignity at Work Policy.

### Infection Control and Prevention

The Trust is committed to minimising any risks of healthcare associated infection to patients, visitors and staff. All employees are required to be familiar with and comply with Infection Prevention and Control policies relevant to their area of work.

### Safeguarding Vulnerable Adults and Children

The Trust is committed to ensuring the safeguarding of vulnerable adults and children in our care. All employees are required to be familiar with their responsibilities in this area and to raise any concerns as appropriate.

### Conflict of Interest

The Trust is responsible for ensuring that the service provided for patients in its care meets the highest possible standard. Equally, the trust is responsible for ensuring that staff do not abuse their official position for personal gain or to benefit their family or friends. The Trust's Standing Financial Instructions require any officer to declare any interest, direct or indirect, with contract involving the Trust. Staff are not allowed to further their private interests in the course of their NHS duties.



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### Working Time Regulations

The 'Working Time Regulations 1998 require that you should not work more than an average of 48 hours in each working week. For example, in a 26-week period you should work no more than 1248 hours. Employees may choose to opt out by providing written notification as appropriate.

**The above duties and responsibilities are intended to represent current priorities and are not meant to be an exhaustive list. The post holder may from time to time be asked to undertake other reasonable duties and responsibilities. Any changes will be made in discussion with the post holder according to service needs.**

### Person Specification

**Job Title:** Trainee advanced clinical practitioner for maternal medicine and health inequalities

Criteria	Essential Criteria	Desirable Level
<b>Qualification/ Training</b>	<ul style="list-style-type: none"> <li>• Degree in Midwifery</li> <li>• Current Professional Registration</li> <li>• Evidence of Continuous Professional development</li> <li>• Teaching and Assessing qualification</li> </ul>	<ul style="list-style-type: none"> <li>• Leadership qualification or completion of leadership programme</li> <li>• Dual registration</li> </ul>
<b>Experience</b>	<ul style="list-style-type: none"> <li>• Extensive Post Registration experience in all areas of Midwifery.</li> <li>• Ability to successfully manage people and change.</li> <li>• Knowledge relating to maternal medical conditions e.g., cardiology, diabetes nephrology etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Experience of conflict management.</li> <li>• Experience in Research.</li> <li>• Experience in audit.</li> <li>• Resource Management.</li> <li>• Project Management Experience</li> </ul>
<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• Specialist knowledge of Maternal Medicine specialist antenatal care.</li> <li>• Good understanding of health inequalities within maternal health care</li> <li>• Knowledge of antenatal screening and prenatal diagnosis</li> <li>• Knowledgeable clinician with the ability to apply evidence-based practice.</li> </ul>	<ul style="list-style-type: none"> <li>• A good understanding of current issues relating to the NHS.</li> <li>• Experience in Policy/Service Development.</li> <li>• Use of action learning and other methods of facilitating staff development.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Sound knowledge of professional policies and procedures</li> <li>• Knowledge of clinical governance and staff development</li> <li>• Knowledge of child protection and Safeguarding.</li> <li>• Equip model and the role of the Professional Midwifery Advocate.</li> </ul>	
<b>Skills &amp; Abilities</b>	<ul style="list-style-type: none"> <li>• Good all round IT skills</li> <li>• Knowledge of Viewpoint system.</li> <li>• Patient focused.</li> <li>• Excellent communication skills.</li> <li>• Evidence of excellent documentation and written skills.</li> <li>• Excellent verbal communication and interpersonal skills.</li> <li>• Effective leadership skills and ability to lead in a successful clinical team.</li> <li>• Understanding the complexity of providing clinical care whilst providing the sensitivity of midwifery support.</li> <li>• Good management of own and others time</li> <li>• Able to use initiative and make decisions.</li> <li>• Analyses problems and implements effective and appropriate solutions.</li> <li>• Ability to prioritise and meet deadlines.</li> <li>•</li> </ul>	<ul style="list-style-type: none"> <li>• Cultural Issues</li> <li>• Ability to carry out audit.</li> <li>• Ability to critically analyse data.</li> </ul>
<b>Personal Qualities</b>	<ul style="list-style-type: none"> <li>• Professional at all times</li> <li>• Motivated and able to motivate others</li> <li>• Calm and objective</li> <li>• Approachable</li> </ul>	<ul style="list-style-type: none"> <li>• Have a confident approach, and the ability to inspire confidence</li> </ul>

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	<ul style="list-style-type: none"><li>• Good interpersonal skills</li></ul>	
<b>Commitment to Trust Values and Behaviours</b>	Must be able to demonstrate behaviours consistent with the Trust's values.	

## Appendix 3 Case Studies



Health Education England

# Advanced Practitioner Midwife

Kate Knightly-Jones – Perinatal Mental Health Midwife

**Kate is a qualified Midwife, currently working as a Specialist Perinatal Mental Health Midwife**



Kate is a qualified Midwife; she is currently working as a specialist perinatal mental health midwife at Darent Valley Hospital in Kent. Prior to taking her role as a specialist midwife Kate was a rotational and community midwife. Kate is passionate about improving outcomes for mothers and babies in the perinatal period and reducing health inequalities.

Kate has been in her current specialist role for five years. However, she wanted to enhance her current knowledge by undertaking further academic study. Kate started her advanced practice masters at the University of Greenwich in 2016. This focused on Leadership, Change management and research. Whilst on this journey Kate wanted to add in more clinical pillars to the role and added on independent prescribing module, alongside clinical mental health modules. Kate is currently going through the e-portfolio route to tie together all the academic learning she has done since 2016.

Kate's current role encompasses the four pillars of advanced practice; clinical practice, leadership & management, research, education and training. Currently Kate is the only person in this type of role in the UK.

Kate spends a lot of time patient facing. However, she is also responsible for implementing and leading the service. This can include planning and implementation of change, responding to government initiatives, or to support their maternity team colleagues to ensure that services deliver the best possible personalised care to women and their families to optimise their mental health.

A large part of Kate's role is education and training. This is at all levels from health care assistants to regional level doctors teaching in perinatal mental health. She also is a regular lecturer at the University of Greenwich, teaching undergraduate midwives about perinatal mental health through simulation role play with actors.

Research is a vital pillar of advanced clinical practice. As such Kate undertakes regular audits of her service to help improve services. She is also in a national working group for standardizing care for babies of women who have taken psychotropic medication in pregnancy.

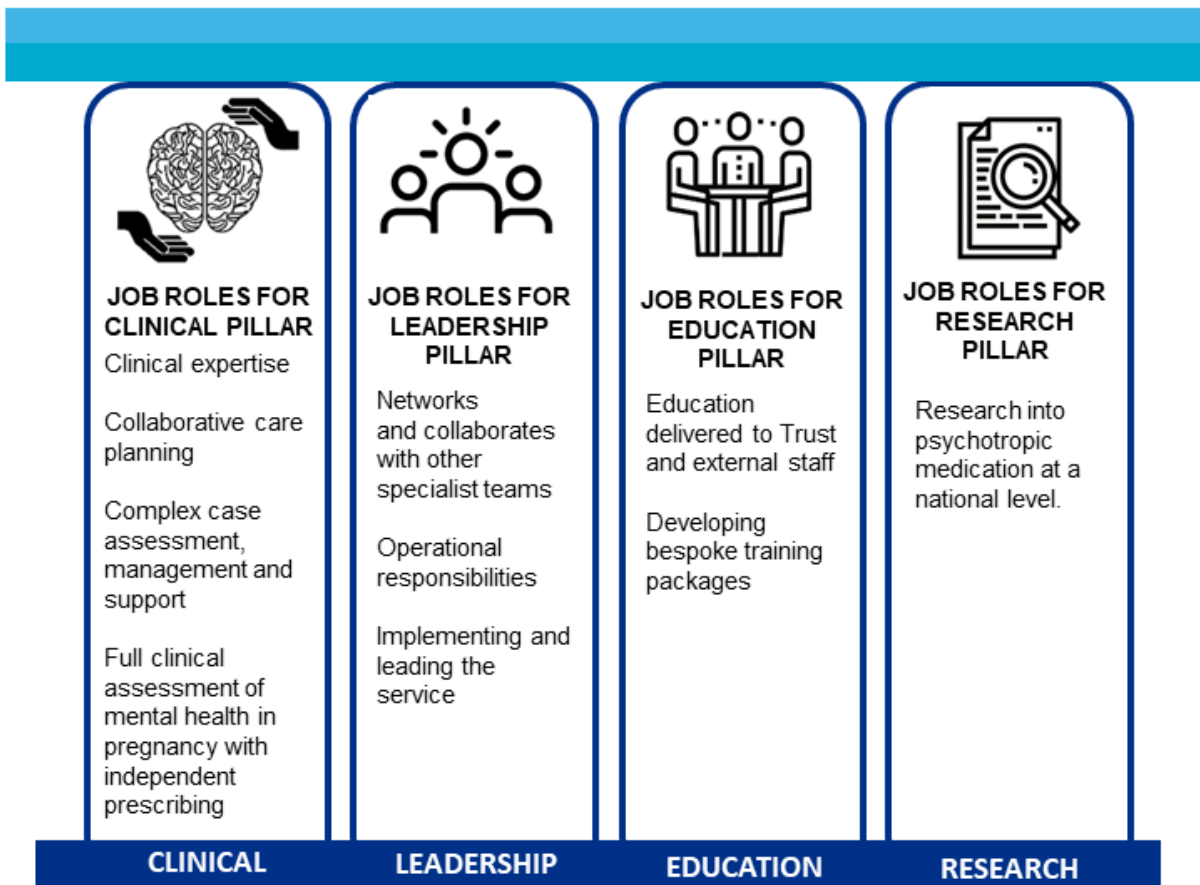
“ Advanced Practice training has given me the tools I need to help reduce health inequalities.”

# Advance Practice in Midwifery Implementation Guide

Kate works full time and says that her working days vary. Primarily she is patient facing and has a heavy involvement with complex perinatal mental health cases. She is involved in two antenatal clinics a week, reviews patients on the wards, goes to multidisciplinary complex case meetings and teaches in some capacity each week. Kate regularly see's patients to review or start psychotropic medication and give a full antenatal/postnatal review. She is a central point of review and sits within a large multi-disciplinary team. Since completing the qualification Kate now takes referrals from health visitors, GPs, Speciality registrars, Community and Perinatal mental health teams. Making a fluid treatment pathway for patients. Kate also leads a service for women with fear of childbirth or complex birth trauma.

Kate supports women during their stay in hospital, but also works with them prior to admission. This can include pre-birth meetings, tours of the units, arranging mental health staff and ensuring correct section paperwork is completed before admission. Kate also writes standard operating procedures (SOPs) and guidelines to ensure optimal patient safety and support staff out of hours.

Kate loves the role she works in currently, she has found having the advanced clinical practice aspect has added a new level of job satisfaction to her role. She is able to be a "one stop shop" for women and their families, giving full health and mental health support, advice, and treatment. She has added on further qualifications such as smoking cessation so she can prescribe nicotine replacement therapy and improve public health. She has found since this role a vast increase in patient satisfaction and reduction in health inequalities.



## Kate works across the four pillars of Advanced Practice

Produced by the East of England Faculty of Advancing Practice

# Advanced Clinical Practitioner

Liz Bennett Hayes RN. RM – Midwife and lead for EMCERT

**Liz is a dual qualified Midwife, working in a large tertiary centre as an ACP, caring for women needing enhanced care. Liz is the lead for EMCERT (2020)**



Liz started her career in the NHS as a RN (St. Thomas' Hospital, 1993), and after consolidating she specialised in Intensive Care and gained a BSc (hons) in "Acute Adult Care" (2006). She changed paths and gained a BSc (hons) in Midwifery (2012). Following on from this, she successfully completed her Masters in Advanced Clinical Practice (2020).

Her experience in midwifery and nursing lead to her desire to care for women with acute health needs, which often occur as a result of intrapartum events of because of underlying medical conditions.

During her Masters programme she was supervised by an Obstetric Consultant Anaesthetist who helped in the development of her role as an Advanced Practitioner, drawing upon classroom learning and real life experiences to ensure she was able to meet the capabilities of Advanced Practice for the population she was treating.

Her innovative idea of EMCERT became reality and has been supported and encouraged by her midwifery, obstetric and anaesthetic colleagues. On completion of her Masters EMCERT (Enhanced Maternal Care Escalation and Response Team) was implemented to improve the service offered to pregnant or recently pregnant women who become unwell and need enhanced care. EMCERT is composed of Midwives who have been trained in managing these women with confidence, and who ensure that problems are managed / escalated / responded to, in a timely manner. With support and leadership from Liz, they offer support to the whole of the midwifery team through advice, and in the providing care for these women.

Liz utilises the four pillars daily, and demonstrates that the percentage of time spent practicing each pillar is dependent upon the needs of the women and the service.

Following a gap analysis she addressed the learning at university and the knowledge required in the workplace for these women with additional needs and devised appropriate teachings for Midwifery students. She also teaches new midwives, rotational medics and is faculty for MDT learning (PROMPT). She has also taught nationally and has participated in conferences / webinars about the role of Advanced Practice.

“ Liz has audited the impact of her and EMCERT's roles on women and has evidenced a smoother, shorter and more individualised patient's journey



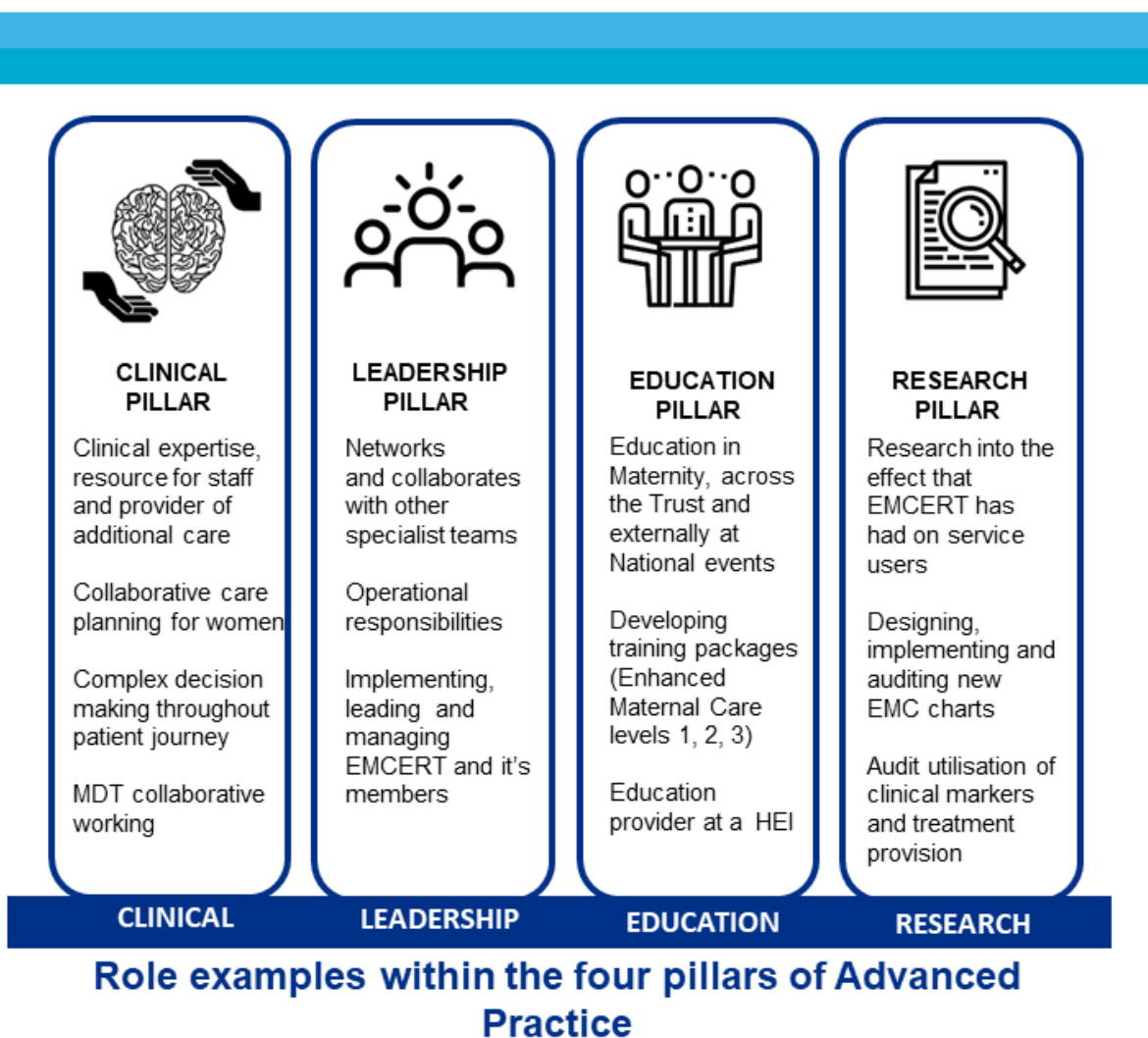
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She ensures that her team have experience in different areas such as critical care, and achieve competencies to ensure capability in the management and care of women with acute / additional care needs. There is a large emphasis on MDT learning and education for her team.

Liz has audited the impact of her and EMCERT's roles on women and has evidenced a smoother, shorter and more individualised patient's journey. Liz provides a follow-up service when women are discharged from the enhanced care area to the wards, ensuring continuity and individualised care planning is maintained for these women. Liz is able to complete their discharge process in a timely manner by prescribing, reviewing care needs and ensuring appropriate follow up is provided (telephone consultation and / or joint physician / ACP clinic).

She is planning to conduct more work on the effect that her role and EMCERT has on service users and providers; she is planning to publish this work in 2023.

Liz is keen that her example of Advanced Clinical Practice in midwifery be used as an exemplar both regionally and nationally, and has been an Advanced Practice Training Programme Director in Midwifery (Midlands) for HEE one day per week since early 2022. She supports individuals, service users and providers in the understanding of, and implementation of new ACP posts.





# Trainee Advanced Practitioner

Charlene Bahia - Trainee Advanced Practitioner

**Charlene is a qualified nurse and midwife, currently working as Labour ward co-ordinator and trainee advanced clinical practitioner.**

Charlene is a qualified nurse and midwife; she is currently working as a labour ward co-ordinator and trainee advanced clinical practitioner at Sandwell and West Birmingham Hospitals NHS Trust (SWB).

Prior to training as a midwife, Charlene worked as a nurse in trauma and orthopaedics before deciding to continue with her dream to become a Midwife. Charlene qualified as a midwife in 2005 and has worked on the Delivery suite for the last 13 years and as a shift coordinator for the last 3 years. Charlene provides care for women that attend triage and regularly provide intrapartum care for women with complex, high-risk pregnancies, including caring for women requiring enhanced care.

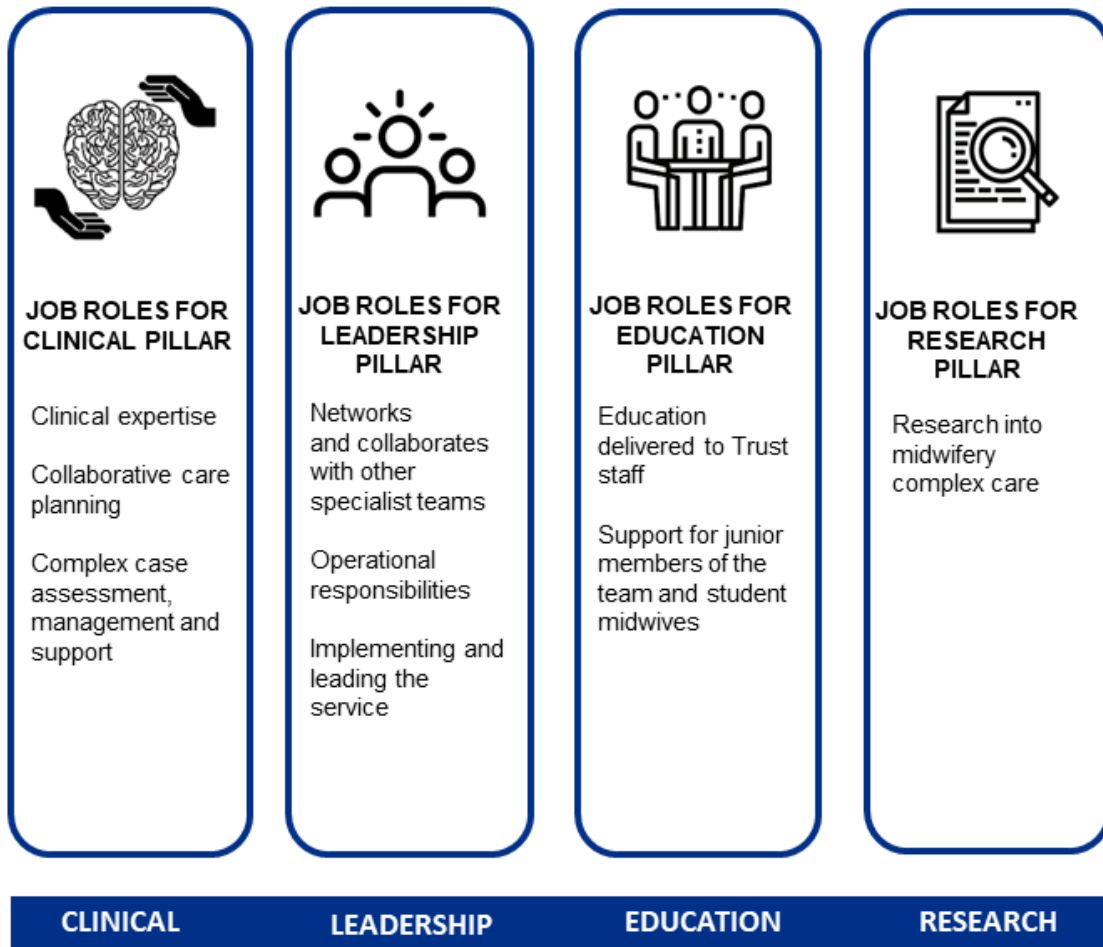
Charlene coordinates the maternity unit, ensuring that safety is a top priority. She offers advice and support for junior/student midwives. Charlene is also involved with the teaching of clinical skills, in particular perineal repair. She is passionate about improving maternity services, outcomes and experiences for all women and their families and reducing health inequalities.

After deciding that she needed a new challenge to enable her to contribute more to improving maternity services. Charlene began a 3 year Advanced Clinical Practice MSc degree at the University of Birmingham. As part of her ACP training she is studying to become an independent prescriber, this is just one aspect of advanced clinical practice that will have a hugely positive impact on women's experiences. She hopes to progress and develop her knowledge and skills to an advanced level that encompasses the four pillars of advanced clinical practice, Clinical, Leadership, Research and Education.

Advanced clinical practice is well established in many specialities within Nursing; however, it is relatively new in Midwifery, resulting in many challenges arising while we attempt to establish this role. There is however an evolving national community of ACP midwives that are working together to aid the implementation of this game-changing role. This has provided amazing support and encouragement to trainee ACP midwives like me.

Advanced clinical practice in midwifery provides opportunities for experienced midwives to progress in their careers while continuing to provide the clinical care they love. This will help contribute to recruitment and improve the retention of midwives, which in the current climate is of the utmost importance.

“ Advanced clinical practice in midwifery provides opportunities for experienced midwives to progress in their careers while continuing to provide the clinical care they love.



**Charlene works across the four pillars of Advanced Practice**

### Appendix 4 Advanced practice readiness checklist

Advanced practice is delivered by experienced, registered health and care practitioners, characterised by a high degree of autonomy, complex decision making and leadership within their area of practice. This is underpinned by a master's level award or equivalent that encompasses the four pillars of clinical practice, leadership and management, education, and research, with demonstration of core capabilities and area specific competence. Professionals working at the level of advanced practice will exercise autonomy and decision making in a context of complexity, uncertainty, and varying levels of risk, holding accountability for decisions made.

Currently, there is a lack of consistency in how the titles 'advanced practitioner' and "advanced clinical practitioner" are used. In this document the term advanced clinical practitioner/ practice (AP) is used. HEE's national Centre for Advancing Practice has been established to lead the advanced and consultant practice agenda. Its aims are to:

- Establish and monitor standards for education and training
- Accredit advanced practice programmes
- Support and recognise practitioners
- Grow and embed advanced practice and consultant workforce

The Regional Faculties for Advancing Practice have been developed to work with local systems (ICBs and NHS providers) to identify demand, commission high quality education and training and support the supervisory needs of learners.

#### Is my organisation ready to implement and support advanced practice?

Many employers have expressed a wish for support to develop advanced practice roles and this **Advanced practice readiness checklist** has been developed to help employers to self-assess their organisational readiness for advanced practice trainees and identify possible next steps. The Checklist is based on the key principles of the [Multi-professional framework for Advanced Clinical Practice in England](#) and has been developed for advanced practice leads (or other senior education leads responsible for advanced practitioners) at an organisational level, with input from individual trainees and supervisors.

Organisations should rate their readiness on a scale of 1 to 4 for each domain, where 1 signifies there is no evidence and 4 signifies that the factor is fully embedded within the organisational infrastructure and governance. It is anticipated that the results of the checklist may help employers and advanced practice leads identify areas for improvement to help ensure both the success of

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advanced practice training for their staff and fully realise the potential benefits of embedding new advanced practice roles within clinical pathways.

Factors suggesting readiness for Advanced Practice	Examples of evidence in your organisation	Extent to which these are in place 1-4	Explain your decision
<b>Organisational level</b>			
There is clear support and commitment for AP roles at executive and director level of the organisation	Named executive sponsor e.g., Head of directorate		
To ensure patient safety, we have clear governance and support arrangements for AP	Governance systems, policies, strategies		
The title of AP is defined and used consistently	Mapping exercise, current job descriptions and/or job plans		
AP is actively promoted across the organisation	Plan for AP communication and engagement in place, led by AP lead and includes support for AP forum		
There is understanding of advanced practice (across the 4 pillars) and the value these roles bring at ICS, PCN, Trust and service manager level. There is understanding of advanced practice across medical and non-medical professionals involved with the process	Stakeholders engaged in the planning, development, and support of AP roles, including utilisation of the skills offered across the 4 pillars		
We have surveyed our staff to establish where enhanced and advanced roles already exist and have mapped existing roles against the Framework to establish where development is needed for transition to AP roles	Workforce reviews, local AP database, AP mapping tool		
There is a business case to underpin the workforce planning for AP level roles to maximise their impact, including standardised titles and banding and a succession plan where appropriate	Business cases, workforce plans		
We have clearly defined substantive AP posts for trainees to move into on completion of their training	Job descriptions, job plans, workforce plans		
We have robust processes for recruitment, and selection into AP level roles and for monitoring progress and certifying completion of training. (Engage with tripartite selection process between employer, HEE, and HEI where appropriate),	AP strategy / governance document		
We have opportunities for trainee APs to develop capability across the four pillars via placements or rotations in other areas, supported by skills-specific supervision	Examples of rotations or placements, communication, minutes of meetings		
There is a planned approach to supporting those seeking AP status via portfolio or credentialling	Individual learning plans, business cases		

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We have discussed our plans for AP with our ICB, Local Workforce Action Board (LWAB) and HEE Faculties of Advancing Practice.	Communications, minutes of meetings		
There is a commitment to review regularly (minimum annually) the readiness for advanced practice as an organisation	AP Readiness Checklist, supporting action plan		
<b>Key 1. No evidence of this   2. Limited evidence in place   3. Evidence is in place but not embedded across the whole organisation   4. Fully embedded within the organisation</b>			
<b>Departmental or General Practice level</b>	<b>Examples of evidence in your organisation</b>	<b>Extent to which these are in place 1-4</b>	<b>Explain your decision</b>
<b>Department or General practice Level</b>			
The purpose and scope of AP roles in patient pathways are clearly articulated	Job descriptions, workforce plans		
We have in-house training pathways for AP, with speciality-specific curricula or core and specialist capabilities that encompass all four pillars of the Framework	Training pathway documents, curricula, competencies		
There is a commitment to provide protected study time/leave for all trainee APs	Contracts of employment, job plans		
Each AP trainee has a named supervisor who is familiar with the requirements of AP	Workforce reviews, local AP supervisor database		
We have mechanisms for evaluating the impact of AP roles	Service evaluations		
Workplace assessment of AP / trainees AP is carried out by competent assessors who are familiar with the assessment tools	AP strategy, workforce reviews		
We have links with speciality-specific AP networks e.g., Royal College of Emergency Medicine, Faculty of Intensive Care Medicine	AP strategy, network events		
There are processes to ensure that the HEE supervision fee is accessible at service level	Departmental budget line		
<b>Supervision level and support</b>			
Potential AP trainees meet the university entry requirements (including functional skills for the apprenticeship pathway), and are prepared for the demands of education and training for AP	AP recruitment and selection strategy		
Each AP trainee has a named co-ordinating supervisor who is familiar with the requirements of Advanced Practice	Workforce reviews, local AP supervisor database		
Appropriate governance processes are in place to support trainees in difficulty or those unable to complete an AP programme	AP strategy document		
Robust processes are in place to monitor trainee AP progress and certify completion of training	Training progress records		
There is support, training and induction for staff who supervise clinicians in AP roles in training	Clinical supervision policy, local AP supervisor database, supervisor network events		

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All AP supervisors have allocated time for AP supervision (minimum 1 hour per week)	Job plans (where used), clinical supervision timetables		
Robust processes are in place to monitor trainee AP supervisee progress and certify completion of training	Robust processes are in place to monitor trainee AP supervisee progress and certify completion of training		
<b>Key 1. No evidence of this   2. Limited evidence in place   3. Evidence is in place but not embedded across the whole organisation   4. Fully embedded within the organisation</b>			
<b>Action plan to address factors self-assessed at 1, 2 and 3:</b>		<b>SMART Objectives:</b>	
<b>Organisational level</b>			
<b>Department or General practice Level</b>			
<b>Supervision level and support</b>			
Completed by (signature):		Executive sponsor signature:	

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Name & Job title	Date	Name & Job title	Date
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Health Education England

[www.advanced-practice.hee.nhs.uk](http://www.advanced-practice.hee.nhs.uk)

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