

## Course Information Document: Undergraduate

### For students starting in Academic Year 2017/2018

#### 1. Course Summary

<b>Names of programme(s) and award title(s)</b>	BSc (Hons) Midwifery
<b>Award type</b>	Single Honours
<b>Mode of study</b>	Full time
<b>Framework of Higher Education Qualification (FHEQ) level of final award</b>	Level 6
<b>Duration</b>	3 years (156 weeks full-time)
<b>Location of study</b>	Keele University Clinical Education Centre at Royal Stoke University Hospital, County Hospital, Stafford and Keele University main campus
<b>Accreditation (if applicable)</b>	This subject/programme is accredited by the Nursing & Midwifery Council. For further details see section 11.
<b>Regulator</b>	Nursing and Midwifery Council
<b>Tuition Fees</b>	<b>UK/EU students:</b> Fee for 2017/18 is £9,250*  <b>International students:</b> Fee for 2017/18 is £16,000**
<b>Additional Costs</b>	Refer to section 15

**How this information might change:** Please read the important information at <http://www.keele.ac.uk/student-agreement/>. This explains how and why we may need to make changes to the information provided in this document and to help you understand how we will communicate with you if this happens.

#### 2. Overview of the Programme

Midwifery 2020 Delivering Expectations (Chief Nursing Officer (CNO) England et al, 2010) expresses the vision for the future of midwifery as comprising a highly skills workforce able to deliver “world-class maternity care from the provision of direct care through to Board level contributions” (CNO England et al, 2010p: 4). This is reflected in the Standard for Maternity Care (Royal College of Obstetricians and Gynaecologists, 2016). In working towards these aspirations, the Keele Midwifery BSc (Hons) programme will prepare midwives to:

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\* These fees are regulated by Government. We reserve the right to increase fees in subsequent years of study in response to changes in government policy and/or changes to the law. If permitted by such change in policy or law, we may increase your fees by an inflationary amount or such other measure as required by government policy or the law. Please refer to the accompanying Student Terms & Conditions. Further information on fees can be found at <http://www.keele.ac.uk/studentfunding/tuitionfees/>

\*\* We reserve the right to increase fees in subsequent years of study by an inflationary amount. Please refer to the accompanying Student Terms & Conditions for full details. Further information on fees can be found at <http://www.keele.ac.uk/studentfunding/tuitionfees/>



- work in a range of settings making full use of interpersonal and technical skills
- promote and enhance care and management of normal pregnancy and birth
- contribute knowledgeably and effectively to the care of women with complex clinical and social needs
- maximize the midwifery contribution to public health outcomes
- develop the potential to assume leadership roles at all levels
- ensure that the interests of childbearing women and their babies are effectively addressed by maternity services.

In working towards these aspirations, the Keele Midwifery BSc (Hons) programme will prepare midwives to work in a range of settings making full use of interpersonal and technical skills, to promote and enhance care and management of normal pregnancy and birth, contribute knowledgeably and effectively to the care of women with complex clinical and social needs, maximize the midwifery contribution to public health outcomes and develop the potential to assume leadership roles at all levels, to ensure that the interests of childbearing women and their babies are effectively addressed by maternity services.

Midwifery is a professional practice requiring the ability to provide empathetic, responsive care to childbearing women and their families, to contribute to public health outcomes through education and preventive interventions and to undertake confident and well-informed decision making, while working autonomously and in teams. Midwifery practice entails mastery of a range of skills for effective communication and teamwork with women and families, colleagues and members of multidisciplinary teams involved in providing maternity and other health care to women and families. Preparation for this practice encompasses the acquisition and development of knowledge, skills, attitudes and behaviours. This course will provide students with a sound knowledge base related to the anatomy, physiology, psychology, social dimensions of all facets of childbirth and fetal/infant development as well as the full range of clinical skills demanded of the practising midwife. Students will develop their ability to reflect on and learn from their own experience and to evaluate and accommodate the policies and social contexts within which they work. They will be prepared to contribute constructively to the continuing development of maternity services and public health services.

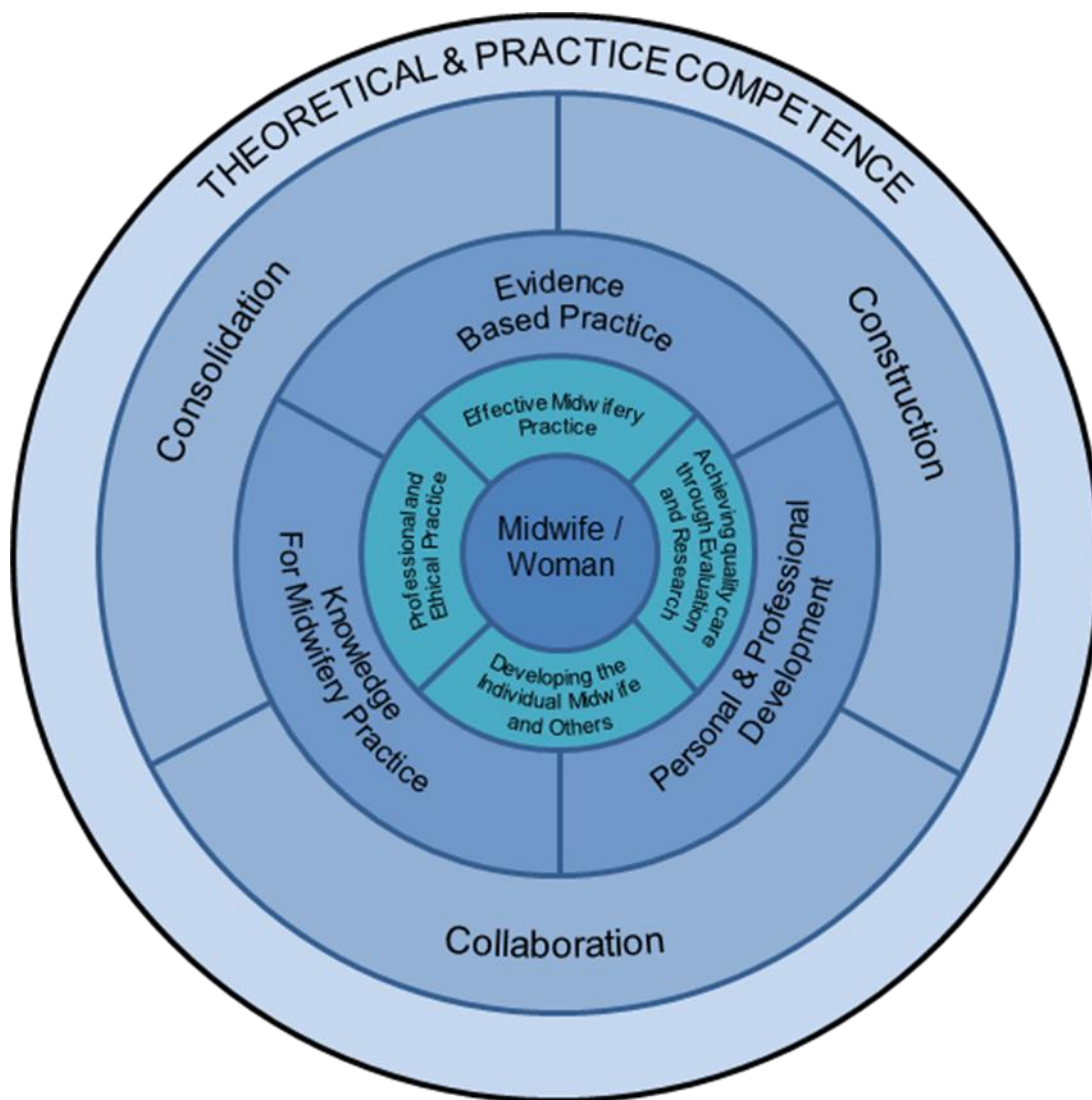
This Programme reflects the aspirations shared across Keele University to equip students completing our programmes with a set of distinctive graduate attributes (further information about the Keele Graduate Attributes can be found here: <http://www.keele.ac.uk/journey/>). These include: independent thinking, synthesizing information, creative problem solving, communicating clearly, and appreciating the social, environmental and global implications of their programme of study. In this way our graduates and postgraduates are equipped to make a difference in their work and communities, make the most of their potential and to make a positive and valued contribution in the complex and rapidly changing environment of practice and society.

We have created a model (Figure 1) to illustrate interrelationships of the components of the complex, multi-layered education by means of which a midwifery practitioner is prepared for her / his future multifaceted role.

The model illustrates that at the centre are the midwife and the woman, around whom the objectives, content and mode of delivery of the programme are structured. The first ring from the centre represents the four domains of midwifery practice as defined within the NMC Standards for Preregistration Midwifery Education, (2009). These domains: effective practice, professional practice, developing the self and others, evaluation and research, articulate the scope of midwifery practice. The educational experience in preparation for midwifery must, therefore, provide opportunities for learning the skills, knowledge, attitudes and behaviours that enable practice across the domains.



## KEELE MIDWIFERY CURRICULUM 2012 MODEL



**Figure 1: Midwifery Curriculum 2012 Model**

The content of the educational process is represented by the next ring outward. There are three components represented here. **Knowledge for Midwifery Practice** refers to the acquisition of foundation knowledge from physiology, sociology, psychology, social policy and other academic disciplines that contribute to the midwife's understanding of the physical, psychological and social needs of childbearing women and their families. **Personal and Professional Development** refers to the areas of learning which support students' understanding of their responsibilities as learners and professionals and within which the clinical and communications skills for safe and effective practice are introduced and mastered. This facet of the programme includes the principles and skills of reflection, critical appraisal and professional responsibility as well as essential clinical skills which enable assessment, planning, delivering and evaluating care throughout the childbearing continuum. The third content component is that of **Evidence Based Practice**. This reflects the programme's commitment to develop midwives who understand the nature of evidence and are able to inform their practice, decision making and leadership with the best available evidence.

The ring beyond that illustrates the mechanisms for delivery of programme content. The elements comprising this are **Construction, Collaboration and Consolidation**.



The educational strategies adopted are informed by insights from social constructivist theory (Giddens & Brady 2007; Kala et al 2010; Loyens et al 2009;). The programme philosophy acknowledges that students are adults and bring to this educational experience a diversity of previous learning, experience and skills and, therefore, that the learning will be experienced and processed differently by different students. The approach is learner-centred, acknowledging that learning is a social and active process. The intention is to facilitate the learner in constructing rather than merely acquiring knowledge, developing new ideas using prior knowledge (how to learn); sharing ideas and promoting learner self-management, through learning experiences which engage the whole person.

The development of knowledge, skills, attitudes and behaviours required to demonstrate professional competence in midwifery takes place most effectively when learners are engaged in educational activities based on real-life situations (Knowles, Holton & Swanson, 1998); that is, within the social context of midwifery care. This is accomplished by the immersion of students in midwifery practice early on in their programme and for more than half of the time of their programme and the centrality in the programme of students' verbal and written reflection, self- assessment in theory and practice, and participation in practice-focused problem-solving activities and simulated scenarios (Fraser et al 2010; Brandon, 2010).

The construction of knowledge and skills will be further enhanced through inter-professional collaboration with clients and with students and practitioners from a range of healthcare professions. Such activities provide relevant, contextual learning opportunities and contribute to the promotion of collaborative practice at the same time as viewing students as active, self- directed participants rather than passive recipients of knowledge, (Zachary & Daloz, 2000). The element of the learning entails, therefore, a joint effort by learners and teachers to build upon an existing scaffold the foundations of knowledge, skills and attitudes required of a qualified midwife. The element of learning referred to as **Collaboration** prepares students to make use of a wide range of resources to make sense of the experiences and situations they are learning to manage, seeking to access and take account of the varied perspectives and contributions of clients and other professionals when judging situations and acting on them.

The final element of the teaching strategy, **Consolidation**, entails an approach to students' use of the skills of reflection and learning from experience which seeks to use the contribution of other perspectives: those of other learners, other professionals and those to whom the student gives care. The re-evaluation and enrichment of experience through the process of reflection is a fundamental activity in professional practice and the part it plays within the educational process is well documented, (Boud et al. 1985a, Kolb, 1984; Schön, 1983; Weir and McGill, 1989). In most accounts reflection is described as a student responding to and analysing their own experience. However, if the reflective process is undertaken 'with others', as Boud et al (1985), advocate, cognitive associations can be made which enable the student to move beyond merely assimilating or accommodating new knowledge into their existing cognitive framework. The sharing of reflections with peers and clients allows for introducing other perspectives and opens reflection to mediation by social interaction. Reflection can be undertaken not solely as one- person activity but rather achieved through social interaction and dialogue with others or oneself. The programme will include opportunities for reflection through mutual dialogue, (Bird, 2007), including peer-to-peer and client-to-student feedback, contributing to dialogues which facilitate the exploration of multiple perspectives and the exchange of experiences and ideas vital to the social construction of knowledge and the development of responsive and self-aware practitioners.

## **Midwifery at Keele**

Keele is the UK's largest campus-based University and was founded on the principle that a different kind of University education was needed, one which produced distinctive graduates, who were able to balance essential specialist and expert knowledge with a broad outlook and independent approach. The School of Nursing & Midwifery remains committed to this approach.

The University campus extends over more than 600 acres and offers students from the School access to a broad selection of academic and social resources including the main Library, the Student Union, sports and other leisure facilities, learning support resources and student housing. Most of the teaching on the Programme is provided in the Clinical Education Centre, based on site of the University Hospitals of North Midlands NHS Trust, about three miles away from the main campus. Proximity to the hospital site enables easy access to clinical



areas for students and staff and also makes the School easily accessible to Trust staff contributing to teaching and programme evaluation events. The maternity services provided by the Trust include a purpose built Maternity Unit opened in April 2009 at The Royal Hospital which is well equipped and appointed with a smaller recently refurbished freestanding maternity unit at County Hospital in Stafford.

Midwifery students at Keele are part of a wider Faculty of Medicine and Health Sciences including the Schools of Medicine, Pharmacy and Health and Rehabilitation which enables a wide range of meaningful inter- professional working and learning. Midwifery students work alongside students from medicine, physiotherapy, nursing, pharmacy and social work in a planned programme in each year. In addition, a number of innovative learning experiences, for example advanced Inter-Professional Education (IPE) workshops, are organised between specific professional groups with whom midwives will work closely after qualification, including midwifery students and paramedics from Staffordshire University.

Students are prepared to practice advanced clinical skills relevant to midwifery using simulation within the clinical skills laboratories.

The high quality of midwifery education at Keele is evidenced by the outcomes of the Health Education West Midlands (HEEWM) acting on behalf of Health Education England (HEE) quality monitoring process where Keele continues to score highly in the quality indicator result for the region with the lowest attrition rates. Furthermore, National Student Survey results consistently rate our learning and teaching and student satisfaction highly, with the School of Nursing & Midwifery programmes in 2016 ranked in the top 5 from 75 institutions and ranked 7<sup>th</sup> in the Complete University Guide 2018. The School has an excellent relationship with our local Trust which provides support for students' to achieve an excellent standard of practice. The School is committed to developing a vibrant and supportive environment for students which facilitates development of confidence and competence in academic studies and clinical performance and a commitment to engage with the wider community.

This Programme reflects the aspirations shared across Keele University to equip students completing our programmes with a set of distinctive graduate attributes. 'Your Keele Journey' explains the Keele approach to education, which covers not only your academic curriculum, but also all the opportunities Keele offers you to develop additional skills and knowledge alongside the subjects you are studying. The Keele approach to education provides you with an opportunity to design your individual student experience, in order to develop your knowledge, skills, attitudes and values and enhance your talents so you can make a difference to your world. As a Keele graduate we want you to leave us clear about who you are and what you want to be, and be equipped to achieve your goals. It is little wonder the Keele educational approach is considered an amazing foundation for life. It's the Keele difference. You can find more information on the Keele Approach to Education here:

<http://www.keele.ac.uk/journey/>

### **3. Aims of the Programme**

The broad aims of the programme are to:

- Develop skilled and knowledgeable practitioners, able to provide evidence-based, woman-centred care to childbearing women and their families in a range of settings and to ensure the provision of excellent care for childbearing women, their families and the wider community;
- Ensure you achieve the Nursing and Midwifery Council (NMC) standards of competency for entry to the Professional Register as a Midwife;
- Develop midwives who apply a woman-centred approach to care based on partnership, which respects the individuality of the woman and her family;
- Enable you to acquire the knowledge, skills and attitudes necessary to become thoughtful and effective professionals who provide high quality care based on best evidence, responsive to the changing context of midwifery practice, and delivered to standards agreed at local, national and international levels;
- Provide challenging and broad based education that develops your personal, professional and academic



competence and abilities;

- Develop midwives who will act as leaders in their professional practice;
- Develop midwives who promote ethical and non-discriminatory practices;
- Enable you to work in collaboration with service users, carers, professionals and other agencies;
- Ensure that you can recognise and effectively manage safeguarding issues affecting clients and their families;
- Develop the concept of life-long learning in students, encompassing key skills, including communication and teamwork.

#### **4. What you will learn?**

The learning outcomes correspond to the competencies defined by the NMC, (2009), as the foundation of midwifery practice, underpinned by the skills of critical thinking and analysis acquired in degree level study, (QAA 2001).

**At the end of the programme, the student will be able to:**

1. Deliver a high standard of midwifery practice, based on evidence and a sound understanding of the physiological, social and psychological dimensions of childbearing and women's and families' needs during this experience;
2. Communicate effectively with women and their families throughout the pre-conception, antenatal, intrapartum and postnatal periods;
3. Work in partnership with women and other care providers during the antenatal, labour and postnatal period to provide seamless care and appropriate interventions throughout pregnancy, labour and postnatal periods, to women, the fetus and the newborn baby;
4. Support the creation and maintenance of environments that promote health, safety and wellbeing of women, babies and others and contribute to enhancing the health and social wellbeing of individuals and their communities;
5. Practise in ways which respect, promote and support individuals' rights, interests, preferences, beliefs and cultures and maintain confidentiality of information;
6. Practice in accordance with The Code: professional standards of practice and behaviour for nurses and midwives, (NMC, 2015), consistent with the legislation relating to midwifery practice and other relevant legislation;
7. Undertake activity, such as audit and research, to monitor, evaluate and optimise the care of women, babies and their families;
8. Undertake appropriate emergency procedures to meet the health needs of women and babies.

#### **5. How is the Programme taught?**

Programme content is delivered by means of three year-long modules (see Table 7.1). A variety of learning and teaching methods will be used throughout this programme in recognition of the range of subject matter and skills needed by students to develop competency for entry to the professional register. Teaching will be undertaken in both the university and clinical placement environments and all modules are constructed on the basis of integration of theoretical and practice-based learning.

The learning and teaching methods that will be used during the programme to enable you to achieve the learning outcomes include:

- **Lead lectures:** the lecturer will impart information, stimulate interest and provide a medium for the considered application of theory to practice and provide you with a framework and context for further reading and independent study, to broaden and deepen their existing professional knowledge and



understanding of the core principles of midwifery

- **Tutor led tutorials:** the lecturer will focus on a topic of interest and relevance to the module with in depth discussion in a small group to further develop your confidence, competence and communication skills. Tutorials will be arranged as both individual and small group sessions with an emphasis on individual student development and opportunity given to:
  - Explore specific learning intentions and /or any difficulties;
  - Provide formative feedback and clarification of learning;
  - Create a climate for learning through structured reflection on practice and the inter-relationship with knowledge and research;
  - Provide effective support for students.
- **Student led tutorials, seminars & small group presentations:** you will lead the discussion on a topic of interest and relevance to the module as part of a small group or on a one to one basis. This enables you to explore a topic to considerable depth and to rationalise your opinions and actions within the safe but challenging company of your peers.
- **Clinical practice:** you will engage in both clinical and simulated practise. Simulated practice enables you to acquire, in a safe environment, a range of practical and technical skills, some of which must be completed before commencing on practice placements. Practice placement is supervised by a named mentor who will facilitate your acquisition of skills and provide developmental and summative assessment of achievement. A tripartite meeting will be held at least once each year between your sign off mentor, personal tutor and you (Fraser et al, 2010).
  - You enjoy supernumerary status while in your practice placements and all experience is education-led.
- **Caseload holding:** The integration of theory and practice, communication and clinical skill, appreciation of social and physiological influences and awareness of women as autonomous individuals will be facilitated by the opportunity of holding a small caseload of women. In accordance with guidance for Standard 13, (NMC, 2009), you will be required to identify two or three women each year of the programme, with whose antenatal care you have been involved. Requirements vary in each year but in principle, with the agreement of the woman and your sign off mentor, you will arrange ongoing contact with the woman throughout her pregnancy, attending antenatal and other visits when possible and making yourself available in your third year to be called when the woman goes into labour so that you can be involved in her birth, either giving support and/or direct care as appropriate. You will arrange to follow the care of the woman and baby postnatally. The management of this process will be supported by clear guidelines for your sign off mentor and yourself with evidence of the experience reflected in your portfolio.
- **Problem solving scenarios:** case-based scenarios will be used to focus your attention and develop your problem solving skills to facilitate linking of theory and practice. Scenarios encourage critical analysis and evidence based discussion as you are drawn into the rhetoric/reality debate that such scenarios often generate.
- **Case study presentations:** the lecturer and/or yourself will present a specific case and use this as a vehicle for discussion and critical analysis.
- **The Midwifery Student Forum/Midwifery Society:** the forum offers the opportunity for midwifery students in all cohorts to meet together formally to share experiences and knowledge and to develop the skills of peer support that are part of the repertoire of midwifery skills. Latterly a Midwifery Society has been established with support from the Students Union, to support student learning. At the beginning of each academic year, established students buddy new students and provide them with one-to-one support in their orientation to student life and to the programme.
- **Interprofessional Education (IPE):** you will undertake a series of planned learning activities in each year of their programme within groups composed of students from a variety of other programmes in the Faculty. Learning is facilitated using problem-based scenarios, exercises in root cause analysis, critical



appraisal of interprofessional working in the practice environment and workshops on clinical decision making and interprofessional communication.

- **Independent study:** you will undertake self-directed activity to meet the various demands of each module and its assessment. This is particularly relevant to portfolio development and the final year project.
- **Clinical Supervision workshops:** these workshops are supported by members of the academic midwifery team to address issues drawn from your own clinical experience by exploring your professional development and resilience through adopting a solution focussed approach.
- **Linkage with community-based organizations (user/carer involvement):** you will be required to identify and become aware of at least one community-based advocacy, self-help or support group which addresses the needs or interests of childbearing women. You will be expected to gain knowledge of the aims and objectives of the organisation and to engage, as appropriate, with its activities e.g. attend meetings, participate in events. You will share emergent knowledge and experience in seminar work and at the Midwifery Student Forum/Midwifery Society, as well as documenting the associated learning in your Portfolio.
- **Portfolio:** to introduce you to the Nursing and Midwifery Council (2015), revalidation requirements and prepare you for employment opportunities, you are advised to maintain a portfolio as a collection of evidence of your development although this will not be assessed.
- **Keele Virtual Learning Environment (KLE)** will be used to support and complement the blended learning approach of the curriculum. Module content will be developed using the KLE where appropriate. Additionally, KLE will be used to host discussion groups. The blended learning approach adopted in this programme meets your needs and anticipates the increasing importance of learning technology in employment and life-long learning.

You will work with your sign off mentor in the placement context to structure the learning around an adapted Steinaker and Bell framework, (Steinaker & Bell, 1979). In this experiential teaching and learning model, five levels of development are defined: 'exposure' to the practice environment and your role in it, 'participation' under direction and direct supervision of sign off mentor, 'identification', in which you begin to initiate and evaluate your contribution, 'internalisation', whereby you demonstrate use of past experience and plans behaviour, and 'dissemination', characterised by the ability to transfer learning in new contexts and motivate and influence others. Use of this framework for assessment will rely on self-assessment and sign off mentors will formatively and summatively assess knowledge and skills in a valid and reliable manner. The adapted Steinaker and Bell framework will help both you and your sign off mentor to evaluate current levels of achievement and identify areas for further development.

It is expected that you will achieve at least the level of "internalisation" by the end of the programme with some evidence of achievement at Level 5 ("dissemination"). Minimum acceptable levels of development at earlier points will be defined as guidance to assist you and your sign off mentors in decisions about progress and at each progression point.

These learning and teaching methods are the means by which the construction, collaboration and consolidation of learning are realised throughout the programme. Preparation of a practitioner able to deliver, most effectively, the health and social support needs of childbearing women and their families and contribute to the public health dimensions of maternity care, requires that educational and learning processes achieve integration of your learning and application of theory to practice and this objective is embedded in our learning and teaching strategies.

## 6. Teaching Staff

The midwifery teaching team is led by the Lead Midwife for Education who is a Senior Lecturer and a member of the School Executive Committee. The midwifery academic team are registered midwives and have or are working towards NMC recordable teaching qualifications.



The teaching staff in the School hold active NMC registration as either a nurse or midwife; those from other Schools who contribute to the programme are registered with the appropriate professional body. The majority of staff have recordable teaching qualifications or are working towards achievement of this. Moreover, they have extensive experience of teaching at undergraduate and postgraduate level and many are external examiners. Some staff have dual qualifications; one member of staff also has registration as a social worker. Staff are actively encouraged to hold honorary contracts with health care provider organisations and to utilise this to ensure they remain updated with contemporary issues within their own field. A number of staff have additional roles or memberships with external organisations for example, range of local, regional and national networks, NMC Quality Assurance Reviewer, Member of RCN Education Forum Steering Committee, Member of NHS Ethics Committee, and Local Provider Committees. A growing number of staff within the School have PhD's and there is a robust professional development strategy which includes an annual research and scholarship programme, alongside annual appraisal and personal development planning.

Honorary lecturers, visiting lecturers and leading clinicians are integral to the delivery of modules within the programme and are used where appropriate; in addition the School regularly offers secondment opportunities to clinical staff.

The University will attempt to minimise changes to our core teaching teams, however, delivery of the programme depends on having a sufficient number of staff with the relevant expertise to ensure that the programme is taught to the appropriate academic standard.

Staff turnover, for example where key members of staff leave, fall ill or go on research leave, may result in changes to the programme's content. The University will endeavour to ensure that any impact on students is limited if such changes occur.

## **7. What is the Structure of the Programme?**

There are three mandatory modules each one year long – see table 7.1 for the programme structure within each module and table 7.2 for the visual overall programme plan.

Optional elements within the programme are concentrated within the provision of a four-week long consolidation period in each module. The consolidation period can be used for theory and practice based activities, depending on your individual requirements and/or preferences and options available. There must be a minimum one week non-assessed practice placement in an area of your choice within the placement circuit to ensure fulfilment of programme hours requirements. The arrangements of the four weeks vary such that in module 1 the four consolidation weeks are arranged in a one week and a set of three week's model. Module 2 adopts the same model as module 1 with a one week and a set of three weeks. Year 3 is different with a four week consolidation period towards the end of the module. The difference between the arrangements is based on students' experience in previous cohorts and managing progression through the programme. Priorities for use of the time within the consolidation weeks are:

1. There must be a mandatory minimum one week non-assessed practice placement in an area of your choice to ensure fulfilment of programme hours requirements.
2. For resubmission any theory or practice assessments not achieved at the first attempt within the year;
3. To make up time lost to the programme due to sickness/absence and ensure programme hours are achieved;
4. To complete the EU requirements (particularly in your third year);
5. In your second and third year to participate and complete the optional Newborn and Infant Physical Examination study component;

If all theory and practice assessments have been successfully passed, there is no need to make-up time lost to the programme, you can choose how you wish to use the consolidation weeks. Some suggestions are:

- Undertake project work in an area/topic of interest which will benefit your development as a midwife



- Prepare an article for publication
- Engage with the work of a voluntary group connected with the maternity services
- Undertake a period of observational experience in another institution. This will require planning ahead and must be discussed well in advance with the personal tutor
- Consolidate an aspect of clinical practice (not assessed)
- Visit different areas of clinical practice

You will be required to submit to your Personal Tutor a detailed personal learning plan well in advance of the consolidation period. The plan will specify intended learning outcomes and the evidence to be used to validate your achievement including programme hours. The learning plan will have to be discussed with and approved by the Personal Tutor prior to arrangements being confirmed.

The programme arrangements is identified in **table 7.1** meeting the requirement of the NMC, (2009).

**Table 7.1: Arrangement of weeks in years 1, 2, 3**

<b>YEAR 1 MODULE 1</b>
<b>NUR – 10040 INTRODUCTION TO MIDWIFERY</b>
<b>45 weeks (1524 hrs) in length plus 7 weeks annual leave –</b>
<b>120 credits @ level 4 (certificate)</b>
<b>Theory based learning: 23 weeks (644hrs @28hrs/week)</b>
<b>Practice based learning: 18 weeks (720hrs @ 40hrs/week)</b>
<b>Consolidation weeks: 4 (160hrs @40hrs/week)</b>
<b>YEAR 2 MODULE 2</b>
<b>NUR-20134 DEVELOPING AS A MIDWIFE</b>
<b>45 weeks (1524hrs) in length plus 7 weeks annual leave</b>
<b>120 credits @ level 5 (intermediate)</b>
<b>Theory based learning: 23 weeks(644hrs @28hrs/week)</b>
<b>Practice based learning: 18 weeks(720hrs @ 40hrs/week)</b>
<b>Consolidation weeks: 4 weeks(160hrs @40hrs/week)</b>
<b>YEAR 3 MODULE 3</b>
<b>NUR-30182 BECOMING A MIDWIFE</b>
<b>45 weeks (1560hrs) in length plus 7 weeks annual leave</b>
<b>120 credits@ level 6 ( Honours)</b>
<b>Theory based learning: 20 weeks (560hrs @ 28hrs/week)</b>
<b>Practice based learning: 21 weeks (840hrs @28hrs/week)</b>
<b>Consolidation: 4 weeks (160hrs @ 40hrs/week)</b>



## Table 7.2 Programme Plan

Year 1 2017-2018																																																															
S	Oct					Nov				Dec				Jan				Feb				Mar				Apr				May				Jun				Jul				Aug				Sep																	
25	2	9	16	23	30	6	13	20	27	4	11	18	25	1	8	15	22	29	7	12	19	26	5	12	19	26	2	9	16	23	30	7	14	21	28	4	11	18	25	2	9	16	23	30	6	13	20	27	3	10	17												
Theory									P				AL				P		Theory								Placement						C		T		A		T				Placement						C				T		AL						T		

Year 2 2018-19																																																			
S	Oct					Nov				Dec				Jan				Feb				Mar				Apr				May				Jun				Jul				Aug				Sept					
24	1	8	15	22	29	5	12	19	26	3	10	17	24	31	7	14	21	28	4	11	18	25	4	11	18	25	1	8	15	22	29	6	13	20	27	3	10	17	24	1	8	15	22	29	5	12	19	26	2	9	16
Theory						Placement				AL				P	Theory						Placement				C	A	T				Placement				C				T	AL				T							

Year 3 2019-2020																																																			
S		Oct				Nov			Dec				Jan				Feb				Mar				Apr			May				Jun				Jul			Aug			Sep									
23	30	7	14	21	28	4	11	18	25	2	9	16	23	30	6	13	20	27	3	10	17	24	2	9	16	23	30	6	13	20	27	4	11	18	25	1	8	15	22	29	6	13	20	27	3	10	17	24	31	7	14
T	Placement					Theory				AL		T	Placement						Theory				AL		Placement				Theory				C			AL			T												

T = theory   P = Placement   AL = Annual Leave   C = consolidation weeks



**Table 7.3: Distribution of course time according to allocation of Consolidation Weeks**

Possible Consolidation Arrangements (40hrs/week)	Weeks of practice (40hrs/week)	Hours of practice	Weeks of theory (x28hrs/week)	Hours of theory	Total weeks for the duration of the programme (excluding annual leave)	Total hours for the duration of the programme (minimum 4600hrs)
<b>1 week consolidation in practice with 3 weeks theory in each module</b>	60	2400hrs (52%)	75	2208hrs (48%)	135 (100%)	4608hrs
<b>2 weeks consolidation in practice with 2 weeks theory in each module</b>	63	2520hrs (55%)	72	2088hrs (45%)	135 (100%)	4608hrs
<b>3 weeks consolidation in practice with 1 week theory in each module</b>	68	2640hrs (57%)	69	1968hrs (43%)	135 (100%)	4608hrs

### Scope of students' practice experience

In accordance with Standard 13 (NMC, 2009) you will experience and be involved in supporting women birthing in a variety of settings including caseloading for a small group of women, to give you a breadth of experience and opportunities for learning. The placements will include:

Module 1: community midwifery services, working with a Health Visitor and a number of hospital based services: antenatal/postnatal wards (including transitional care), antenatal clinic (ANC), the early pregnancy assessment unit (EPU), maternity assessment unit (MAU)

Module 2: experience in a freestanding maternity unit and hospital based services: delivery suite, the antenatal and postnatal wards (including transitional care), obstetric theatre, neonatal intensive care unit, maternity assessment unit (MAU). You also have the opportunity to plan an elective placement – locally, nationally or internationally.

Module 3: hospital based delivery suite and the antenatal and postnatal wards (including transitional care) and the community midwifery services.



Your caseloading experience will adopt the following:

- Year 1 – during your community placement you will follow 3 low-risk ladies care through her antenatal and postnatal periods.
- Year 2 – during your ward based placement you will follow 2 high risk ladies through their antenatal and postnatal experiences;
- Year 3 – during your community placement you will follow 2 ladies through their antenatal and postnatal experiences and be on call for their intrapartum care.

You will enjoy supernumerary status while on practice placements and all experiences will be planned to maximise learning opportunities.

### **Module learning outcomes and corresponding assessments**

Module learning outcomes have been organised to correspond to the four domains of midwifery practice as defined by the NMC (2009). The tables following define module learning outcomes in each domain and the assessment strategies associated with them.

Assessment in clinical practice accounts for 50% of the Module grade in each of the three years of the programme. Five components make up this part of the assessment, some of which are awarded a numerical grade and some assessed on a pass/fail basis. The five components and their proportional values are:

- Grading of practice – 20%
- Relection on the Code – 20%
- OSCE – 10%
- Computer software numeracy test assessment – pass/fail
- Clinical competency (Ongoing Record of Achievement (ORA)) – pass/fail

Assessment of the theoretical component of the programme is comprised of different elements and proportions in each of the three year-long modules.

In addition there are the following assessments:

#### Module 1

- Multiple choice examination – 25%
- Communication reflection – 25%

#### Module 2

- Multiple choice examination – 25%
- Health Promotion Project - 25%

#### Module 3

- Written exam – 25%
- Service Improvement Project – 25%

The following table maps all the module learning outcomes against the following standards and benchmarks:

- Programme learning outcomes
- The domains within the Nursing and Midwifery Council (NMC) Midwifery Competencies (NMC, 2009)
- NMC Essential Skills Clusters (ESC) for Midwifery (within NMC, 2009)
- Quality Assurance Agency (QAA) subject benchmarks for midwifery (QAA, 2011)

and identifies achievement at the two progression points – end of year 1 and entry to the register.



The key to abbreviations used in the table is as follows:

NMC Midwifery Competencies, (NMC, 2009)

EMP – Effective Midwifery Practice – pages 23 - 30

PEP – Professional and Ethical Practice – pages 31 - 34

DIMO – Developing the Individual Midwife and Others – page 34

AQC – Achieving Quality Care through Evaluation and Research - page 35

Competencies are referred to in the table with reference to the following list :

#### Domain 1: Effective Midwifery practice

1. Communicate effectively with women and their families throughout the pre-conception, antenatal, intrapartum and postnatal periods
2. Diagnose pregnancy and assess and monitor women holistically throughout the pre-conception, antenatal, intrapartum and postnatal periods using a range of assessment methods and reaching valid, reliable and comprehensive conclusions
3. Determine and provide programmes of care and support for women
4. Provide seamless care and, where appropriate, interventions, in partnership with women and other care providers during the antenatal period
5. Refer women who would benefit from the skills and knowledge of other individuals
6. Care for, monitor and support women during labour and monitor the condition of the fetus, supporting spontaneous births
7. Undertake appropriate emergency procedures to meet the health needs of women and babies
8. Examine and care for babies immediately after birth
9. Work in partnership with women and other care providers during the postnatal period to provide seamless care and interventions
10. Examine and care for babies with specific health or social needs and refer to other professional or agencies as appropriate
11. Care for and monitor women during the puerperium, offering the necessary evidence-based advice and support regarding the baby and self-care
12. Select, acquire and administer safely a range of permitted drugs consistent with legislation, applying knowledge and skills to the situation which pertains at the time
13. Complete, store and retain records of practice which are accurate, legible and continuous; detail the reasoning behind any actions taken, contain information necessary for the record's purpose
14. Monitor and evaluate the effectiveness of programmes of care and modify them to improve the outcomes for women, babies and their families
15. Contribute to enhancing the health and social wellbeing of individuals and their communities

#### Domain 2: Professional and Ethical Practice (PEP)

1. Practise in accordance with the Code (NMC, 2015) within the limitations of the individuals own competence, knowledge and sphere of professional practice, consistent with legislation relating



midwifery practice

2. Practise in a way which respects, promotes and supports individuals' rights, interests, preferences, beliefs and cultures
3. Practise in accordance with relevant legislation
4. Maintain confidentiality of information
5. Work collaboratively with the wider healthcare team and agencies
6. Manage and prioritise competing demands
7. Support the creation and maintenance of environments that promote the health, safety and well-being of women, babies and others
8. Contribute to the development and evaluation of guidelines and policies and make recommendations for change in the interests of women, babies and their families

#### Domain 3: Developing the Individual Midwife and Others (DIMO)

1. Review, develop and enhance the midwife's own knowledge, skills and fitness to practice
2. Demonstrate effective working across professional boundaries and develop professional networks

#### Domain 4: Achieving Quality Care through Evaluation and Research (AQC)

1. Apply relevant knowledge to the midwife's own practice in structured ways which are capable of evaluation
2. Inform and develop the midwife's own practice and the practice of others through using the best available evidence and reflecting on practice
3. Manage and develop care utilising the most appropriate IT systems
4. Contribute to the audit of practice in order to optimise the care of women, babies and their families

#### NMC Essential Skills Clusters

C – communication

IC – initial consultation between the woman and the midwife

NL – normal labour and birth

BF – initiation and continuance of breastfeeding

MM – medical products management

#### QAA Midwifery Subject Benchmarks

- A. Expectation of the midwife as a professional
  - A1 Professional autonomy and accountability
  - A2 Professional relationships
  - A3 Personal and professional skills
  - A4 Professional and employer context



- B. Application of practice in securing, maintaining or improving health and wellbeing
  - B1 Identification and analytical assessment of health and social care needs
  - B2 Formulation of plans and strategies for meeting health and social care needs
  - B3 Practice
  - B4 Evaluation
- C. Subject knowledge, understanding and skills that underpin education and training of midwives
  - C1 Knowledge and understanding
    - C1.1 Midwifery
    - C1.2 Life Sciences
    - C1.3 Social and behaviour sciences
    - C1.4 Ethics, law and humanities
  - C2 Skills
    - C2.1 Communications and interpersonal
    - C2.2 Information gathering and analysis
    - C2.3 Care delivery
    - C2.4 problem solving, data collection and interpretation



**TABLE 7.4: MAPPING OF LEARNING OUTCOMES AGAINST CORE DOCUMENTS**

<b>DOMAIN 1: EFFECTIVE MIDWIFERY PRACTICE (EMP)</b>				
<b>YEAR 1: Introduction to Midwifery Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
1. Explain the biological and psychological processes and adaptations underpinning normal reproduction and their application to midwifery practice.	1	EMP 2,4,6	C1,IC1, NL3-5, BF1,4	C1.2
2. Describe the physiological adaptations of the newborn from intrauterine to extra-uterine life and the physical and behavioural characteristics of the newborn.	1	EMP 6	C1,NL4,7, BF1,3,4	C1.2
3. Describe the biological and psychological processes and adaptations underpinning infant/child attachment and development.	1	EMP 6	C1, BF1,3,4	C1.2
4. Demonstrate accurate numeracy skills including drug calculation, simulated administration and participate in drug administration in practice under direct supervision of a midwife mentor	1	EMP 12	MM1,2	A3,A4,C2.2
5. Communicate effectively with clients and peers taking account of individual differences and cultural and social diversity using a variety of appropriate interpersonal skills to support women and their families.	1,2,5	EMP1	C1-8	C2.1
6. Apply skills of history taking, observation, physical examination and appraisal of social and other factors as a basis for planning and implementing holistic midwifery care throughout pregnancy, labour and puerperium, working in partnership with women and under the direct supervision of a midwife mentor.	1,2	EMP 2,3,4,6,9,11	IC1-4, NL3-10, BF 1-6	C2.2
7. Provide evidence based information to parents about pregnancy, birth, child care and infant feeding.	1,2	EMP2,3	C1,3,6	C2.1
8. Discuss the processes for referring mother and/or baby to other health professionals or agencies and the circumstances in which this may be appropriate.	1,3,4	EMP15, PEP5	C8, IC3, NL9, BF9	A1,A2
9. Explain and participate in the role and responsibilities of the midwife in safeguarding and protection of vulnerable people and to work within relevant legal and professional frameworks and local policies under the direct supervision of a midwife mentor.	3,5,6	EMP 5,PEP5	C2,5,8,IC3	B1, B2, B3
10. Discuss the public health contribution of midwifery to improving population health and reducing health inequalities including local, national and global health challenges and apply these to practice	3,4	EMP 15		B1,B2, C1.3
18. Document and appropriately store accurate and contemporaneous records of provision of midwifery care, under the direct supervision of the mentor, ensuring legibility and clear identification of student and mentor	1,3,6	EMP13	NL10, MM4	A1, C2.2
19. Explain the importance of interpersonal skills and sensitive, timely communication in health and social care settings and demonstrate the ability to listen, seek clarity and respond to or carry out instruction safely	1,2	EMP1	C5-7	C2



DOMAIN 1: EFFECTIVE MIDWIFERY PRACTICE CONTINUED				
YEAR 1: Introduction to Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
20. Identify and use of emergency equipment	8	EMP7	NL8	C1.1
21. Participate in 'drills and skills procedures related to adult resuscitation	8	EMP7	NL8	C1.1
22. Initiate emergency call procedures appropriately	8	EMP7	NL8	C1.1
23. Attend multidisciplinary planning or review of maternity care and record the learning derived from these.	3,4,6	EMP5, PEP5, DIMO 2	C8, IC3, NL9, BF 5	A2,A3,C2.1, C2.4
YEAR 2: Developing as a Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
1. Identify women's needs and respond appropriately	1,2,3,4	EMP 1,2,4, 6,8,9,11	C1,6, IC 2,4, NL1,2, BF2	A1, C1.1, C1.3
2. Communicate health information in ways that are understandable and accessible to service users, applying basic learning principles	1,2,3,4,6	EMP 1	C1.6, IC1, BF1	C1.1, C2.1
3. Explain clinical findings to women accurately and in a reassuring manner, taking time to respond to her questions and concerns under direct supervision	1,2,3,5	EMP1,2,4,6	C1,6, IC1, BF1	C2.1, C2.3
4. Accurately interpret and explain findings derived from history taking, observation, physical examination, biophysical tests and social assessments and use these to plan actions, under direct supervision of a mentor	1,2,3,5	EMP 4,6,8,9,10	IC2, NL 3-6, BF2,3,4, MM1	A3, C2.4
5. Communicate with colleagues and clients in a timely manner, demonstrating awareness of priorities	3,4	EMP 1, PEP 6	C8, IC3, NL1,9,10, BF1,5, MM4,6	C2.1, A2
6. Describe the pathophysiology of medical and obstetric conditions which adversely impact on pregnancy and discuss the evidence based interventions to maximise optimal perinatal outcomes	1,3	EMP 2,3,4,6,9,11	IC1-4, NL3-10, BF1-6	C1.1, C1.2
7. Explain and evaluate the midwifery care and medical management of a woman/fetus/neonate experiencing a complex pregnancy, making appropriate use of relevant current evidence and guidelines	1,2,3,4,7	EMP4	IC1-4, NL3-10	C1.1, C1.2
8. Participate in arrangements for a woman's referral and timely attendance for further tests or consultation when required	3,4,5,8	EMP5	C8, IC3, NL9,10	A2, C2.1
9. Explain the contents of emergency trolleys, the correct operation of equipment and which members of the multidisciplinary team to summon in an emergency	8	EMP7	NL8	A3, C2.1, C2.3
10. Initiate emergency care and collect equipment as required in the event of an emergency	8	EMP 7	NL8	A3, C2.3



**DOMAIN 1: EFFECTIVE MIDWIFERY PRACTICE CONTINUED**

<b>YEAR 2: Developing as a Midwifery Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
11. Explain the principles of health promotion and apply and evaluate framework to health promotion material	4	EMP 15		B1-4
12. Identify members of the wider multidisciplinary team and explain their contribution to optimising the health and well being of women and their families	3	EMP5, DIMO 2	C8, IC3, NL9,10	A2
13. Attend practice environments addressing public health dimensions of perinatal care and record the learning derived from these.	1,2,7	EMP 14,15, DIMO 2, PEP7,8		A2, B2, B3
14. Attend multidisciplinary planning or reviews of maternity care and record the learning derived from these.	1,2,7	DIMO2	C8, IC3, NL9	A2, C2.1
15. Discuss the actions, dosages, side-effects and antidotes of drugs commonly used within midwifery care.	1	EMP 12	MM1, 10	C1.1, C2.3
16. Demonstrate safe and effective administration of permitted drugs under the direct supervision of a mentor, applying knowledge and skills to the situation which pertains at the time.	1	EMP12	MM2,3,4	C2.3
17. Explain the legislation governing the management and administration of drugs within a midwifery context.	1,6	EMP13	NL10, MM4	A3, A4
22. Document and appropriately store accurate and contemporaneous records of provision of midwifery care, under the indirect supervision of the mentor, ensuring legibility and clear identification of student and mentor.	1,6	EMP13	NL10, MM4	A3, A4
<b>YEAR 3: Becoming a Midwifery Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
1. Accurately interpret findings derived from history taking, observation, physical examination, biophysical tests and social assessments and involve other healthcare or other professional when this is required to improve health outcomes	1,2,3,4,8	EMP 5,6,11, DIMO2	IC2, NL3-6, BF 2-4, MM1	C2.2, C2.4
2. Assess, plan and evaluate the midwifery care of a woman whose pregnancy is complicated by medical and/or obstetric conditions and discuss the evidence based interventions to maximise optimal perinatal outcomes	1,2,3,4,8	EMP 2,5,6,11, PEP5, DIMO2		C2.2-2.4
3. Explain clinical findings to women accurately and in a reassuring manner, taking time to respond to her questions and concerns	2,3	EMP1	C1,3,5-7, IC1,2, NL1,6, BF1,2	A3, C2.1
4. Demonstrate excellent interpersonal skills and sensitive, timely communication in health and social care settings with clients, families, peers and junior colleagues	3,4,5	EMP1, PEP5	C1-8	C2.1, C1.5
5. Recognise the pathophysiology of obstetric conditions which adversely impact pregnancy and act upon the evidence based interventions to maximise perinatal outcomes.	1	EMP2,3,4,5	IC 1,2,3, NL 1-10, BF1,3,5,6 MM1,4,6,9,10	C1.1, 1.2, 2.2, 2.4
6. Evaluate the midwifery care and medical management of a woman/fetus/neonate experiencing a complex pregnancy and its outcomes, making appropriate use of relevant current evidence and guidelines	1,2,3,4	EMP 14	IC1-4, NL3-10, BF1-6	C1.1, C1.5, C2.4



DOMAIN 1: EFFECTIVE MIDWIFERY PRACTICE CONTINUED				
YEAR 3: Becoming a Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
7. Ensure arrangements are organised for the woman's referral and timely attendance for further tests or consultation when required.	1,2,3,4	EMP 5	C8, IC3, NL9, BF5	A3, A4, C2.1
8. Make use of appropriate evidence to appraise the risk benefit balance of a range of interventions employed during maternity care.	4	EMP 2,5,6,11		C2.3, C2.4
9. Apply interpersonal skills to influence peers and managers to achieve practice improvement.	4	EMP1, PEP7	C8, IC3, NL9, BF5	A3, A4, C2.1
10. Articulate a clear plan of care which has been developed in partnership with women and colleagues.		EMP1, 3, 4, 6, 9,11	C1, C3, C6, C7, IC1,3,, NL1, 4, 5, 6, 9, BF1,5, MM5,7	A1, A2, A3, B2, C1.1, C2.1, 2.3
11. Prepare and check equipment that may be required in the event of an emergency.	8	EMP7	NL8	A1,A4, C2.3
12. Initiate emergency care and summon appropriate assistance when required.	8	EMP7	NL8	A1,A4, C2.3
13. Plan and utilise the provision of health information for women and families, reflecting the application of relevant principles and evaluation.	1,2,3,4	EMP1, 15	C1,IC1,2,4	B1-4
14. Collaborate with other members of the wider multidisciplinary team and optimise the health and well being of women and families.	3	EMP7,8	C8, IC3, NL9,10	A2, C2.1
15. Participate in practice environments addressing particular public health dimensions of perinatal care.	1,4	EMP7,8	IC1-4	B3
16. Participate in multidisciplinary planning or reviews of the care of women with complex clinical and/or social needs and record the learning achieved.	1,7	EMP15, DIMO1,2	C8, IC3, NL9-10	A2, B1-4
17. Safely administer a range of permitted drugs consistent with legislation, applying knowledge and skills to the situation which pertains at the time and in compliance with NMC and Trust requirements.	1,6	EMP12,13, PEP3	MM1-7, 9,10	A4, C2.3
18. Participate in the ordering and safe storage of drugs and other resources required for the effective care of women and babies in the practice environment.	1,6	EMP12, PEP3	MM8	A4
25. Document and appropriately store accurate and contemporaneous records of provision of midwifery care, ensuring legibility and clear identification of student and mentor.	6	EMP13	IC2,NL10, MM4	A3,A4
35. Implement as appropriate, midwifery interventions to promote favourable outcomes and normality.	1,2,3,4	EMP 2,5,6,11		C2.3, C2.4



DOMAIN 2: PROFESSIONAL AND ETHICAL PRACTICE (PEP)				
YEAR 1: Introduction to Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
12. Demonstrate understanding and application of professional standards.	6	PEP1	C2, NL9, BF5, MM4-5,8	A1-4
13. Practice in accordance with the Code (NMC, 2015) within the limitations of her/his competence and knowledge.	6	PEP1	C2, NL9, BF5, MM4-5,8	A1-4
14. Recognise and apply knowledge of legislation in the provision of midwifery care.	4,5,6	PEP1, EMP12	C2, NL9, BF5, MM4,5,8	C1.4
15. Practice in a way which respects, promotes and supports individual's rights, interests, preferences, belief and cultures.	4,5,6	PEP2	C6,7	C2.1, C2.3
16. Explain and apply the principles for maintaining confidentiality of information and informed consent.	4,5,6	PEP5, EMP1	C2,3,4	C1.4
24. Identify key ethical principles and theories in the context of maternity care	4,5	PEP1	C2-6	C1.4
YEAR 2: Developing as a Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
18. Maintain high professional standards in accordance with the Code (NMC 2015).	6	PEP1	C2, NL8, BF5	A1
19. Explain and apply the principles for maintaining confidentiality of information.	5,6	PEP4	C2	A1, C1.4
20. Apply and explain the principles of informed consent.	5,6	EMP1, PEP2	C3-4	A1, C1.4
21. Initiate advocacy on behalf of women, reflecting respect, promotion and support of their rights, interests, preferences, beliefs and cultures.	3,4	PEP2	C5	A2, A3, C2.3
YEAR 3: Becoming a Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
19. Maintain high professional standards in accordance with the Code (NMC 2015) and contribute to the maintenance of these requirements within the multidisciplinary environment.	6	PEP1	C2, NL8, BF5, MM4-5,8	A1
20. Practice within the terms of relevant legislation in the provision of midwifery care.	6	PEP3	MM4	A1, A4
21. Promote the principles of confidentiality of information in accordance with the Code (NMC 2015) and Trust policy.	5,6	PEP2,4	C2	A1, C1.4
22. Promote the principles of informed consent within the multidisciplinary environment.	5,6	EMP1, PEP2	C3-4	Z1, C1.4
23. Initiate advocacy, at an individual and community level, on behalf of women reflecting respect.	4,5,6	PEP2	C4	B1-4



DOMAIN 2: PROFESSIONAL AND ETHICAL PRACTICE CONTINUED				
YEAR 3: Becoming a Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
24. Promote and support women's rights, interests, preferences, beliefs and cultures.	3,4,5	PEP2	C4	A1, A3, B1, C1
26. Contribute to Clinical Governance processes and policy.	4,7	EMP 14, PEP8		A4
27. Participate in the processes for risk management, risk reporting and follow-up of adverse incidents.	7	PEP8		A4, C2.2
DOMAIN 3: DEVELOPING THE INDIVIDUAL MIDWIFE AND OTHERS (DIMO)				
YEAR 1: Introduction to Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
11. Demonstrate knowledge of and compliance with the local trust standards and policies in relation to infection control, mandatory training and health and safety requirements.	3,6	PEP1, EMP7		A4
25. Explore sociological and psychological theories about women in society and discuss the implications for these in understanding reproduction and childbearing and delivery and delivery of maternity services	4,5	PEP2, EMP15	C1-7	C1.3
26. Demonstrate understanding of diversity in values, beliefs and attitudes, showing respect for individual preferences, rights and choices	4,5	PEP2	C4,5	C1.3
27. Practise working effectively with peers and colleagues, receive feedback effectively and treat others with respect and consideration	4,5	DIMO1,2	C8, IC3,4, NL9, BF5	A3, C1.5
28. Use a reflective process to evaluate own experiences and plan opportunities for learning and personal change	7	DIMO1,2		C1.5
29. Seek and make effective use of support for developing excellence in academic and clinical performance	7	DIMO1		C1.5
30. Explain and explore own and others' interpersonal skills relating to respect and assertiveness and recognise signs of aggression, taking appropriate action to keep themselves and others safe in practice	5,6,7	DIMO1,2, EMP5,6		A3, C1.5
31. Apply a reflective process to evaluate her/his own experience and practice and plan opportunities for learning and personal change	7	DIMO1		C1.5
32. Apply effective interpersonal skills in interaction with colleagues and peers	3	EMP1, DIMO1	C8, IC3,4, NL9, BF5	C2.1
33. Cooperate with peers and colleagues, offer and receive feedback effectively, and treat others with respect and consideration	3	EMP1	C8, IC3, NL9, BF5	C2.1
34. Seek and make effective use of support for development in academic and clinical performance and support for peers and junior colleagues	3,7	DIMO1		C1.5, C2.1
35. Explain the processes for development of policy and practice within the Trust	4,6	EMP15, PEP3		A4



<b>YEAR 2: Developing as a Midwifery Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
23. Work effectively with peers and colleagues, receive feedback effectively and treat others with respect and consideration, under direct supervision.	3,5	PEP1	C8, IC3, NL9, BF5	A2
24. Apply a reflective process to evaluate her/his own experience and practice and plan opportunities for learning and personal change.	7	DIMO1,2		C1.5
25. Apply effective interpersonal skills in interaction with colleagues and peers.	2,3	DIMO 1,2	C8, IC3, NL9, BF5	C1.5
26. Cooperate with peers and colleagues, offer and receive feedback effectively, and treat others with respect and consideration.	3,4	DIMO1,2	C8, IC3, NL9, BF5	C1.5
27. Seek and make effective use of support for development in academic and clinical performance and support for peers and junior colleagues.	7	DIMO1,2		C1.5
<b>DOMAIN 3: DEVELOPING THE INDIVIDUAL MIDWIFE AND OTHERS CONTINUED</b>				
<b>YEAR 2: Developing as a Midwife Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
28. Explain the processes for development of policy and practice within the Trust.	4,6	EMP15, PEP8		A4
29. Comply with local trust standards and policies in relation to infection prevention, mandatory training and health and safety requirements.	4,6	PEP1,8		A4
<b>YEAR 3: Becoming a Midwife Module Learning Outcomes</b>	<b>Programme Learning outcomes</b>	<b>NMC Competencies</b>	<b>NMC Essential Skills Clusters (ESC)</b>	<b>QAA Standards</b>
28. Work effectively with peers and colleagues, give and receive feedback effectively and treat others with respect and consideration.	3,5	DIMO 1,2	C8, IC3, NL9, BF5	A2, C1.5, C1.2
29. Seek and make effective use of support for developing excellence in academic and clinical performance and provide effective support for peers and junior colleagues.	7	DIMO 1,2		C1.5
30. Promote local trust standards and policies in relation to infection prevention, mandatory training and health and safety requirements and ensure compliance by peers.	4,6	DIMO 1,2	NL2	A4, C2.3



DOMAIN 4: ACHIEVING QUALITY CARE THROUGH EVALUATION AND RESEARCH (AQC)				
YEAR 1: Introduction to Midwifery Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
17. Gather relevant information from a wide range of sources including electronic data.	7	AQC 1,2,3		C2.2
36. Demonstrate familiarity with sources of information for developing knowledge and practice and use the library, KLE and other resources effectively to access relevant information	7	AQC 1,2,3		C2.1, 2.2
37. Define search terms as a basis for searching on defined topics, document the process of a literature search and accurately cite the use of such sources in written work	7	AQC 1,2,3		C2.2, C2.4
38. Make use of critical perspectives and apply to sources used in written and oral discussion	7	AQC 1,2,3		C2.2, C2.4
39. Distinguish between different kinds of evidence and the variety of research methods undertaken to generate evidence as a basis for midwifery and other care	7	AQC 1,2,3		C2.2
YEAR 2: Developing as a Midwife Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
30. Make effective use of a wide range of information resources.	7	AQC 1,2,3		C2.2
31. Apply the skills of literature searching and critical appraisal to developing the knowledge on which practice is based.	7	AQC 1,2,3		C2.4
32. Apply relevant knowledge and the results of critical appraisal to own practice in structured ways, able to be evaluated.	7	AQC 1,2,3		C2.3, C2.4
33. Appraise local, national and international evidence based guidelines for practice.	7	AQC 1,2,3		C2.2, C2.4
34. Locate, select, interpret and apply data about key public health outcomes related to pregnancy in considering local priorities for pregnancy care.	7	AQC 1,2,3		B1, B4
YEAR 3: Becoming a Midwife Module Learning Outcomes	Programme Learning outcomes	NMC Competencies	NMC Essential Skills Clusters (ESC)	QAA Standards
31. Share with colleagues and others critical appraisal of current literature and contribute to developing knowledge within the multidisciplinary environment.	7	AQC 1,2,3, DIMO2		A2, A3, C2.2
32. Participate in audit or research activities enabling application of critical appraisal to practice environments in a structured way.	7	AQC 4		C2.2
33. Contribute to the development and dissemination of evidence based guidelines for practice.	7	PEP8		C2.2, C2.4
34. Locate, select, interpret and apply data about key public health outcomes related to pregnancy in discussing priorities for policy and practice initiatives.	7	EMP 15		C2.3, C2.4



## 8. Final and intermediate awards

The programme is designed to educate midwifery practitioners. Consequently the expectation is that students will complete the full programme of study obtaining 360 credits and so be awarded a BSc (Hons) Midwifery. Students usually accumulate 120 credits per academic year. If a student leaves the programme before completing 360 credits they may be eligible for an alternative award, as detailed below – none of these awards will include the word 'Midwifery'. Midwives must complete an approved programme of study (minimum 360 credits) in order to be eligible to apply for professional registration.

Credits required for each level of academic award are as follows:

<b>Honours Degree</b>	360 credits	You will require at least 120 credits at levels 4, 5 and 6
<b>Diploma in Higher Education</b>	240 credits	You will require at least 120 credits at level 4 or higher and at least 120 credits at level 5 or higher
<b>Certificate in Higher Education</b>	120 credits	You will require at least 120 credits at level 4 or higher

## 9. How is the Programme assessed?

The assessment strategy reflects the aims and philosophy of the programme whereby students engage in educational activities that integrate the theory and practice of midwifery practice and enable them to acquire the knowledge, skills, attitudes and behaviours associated with professional midwifery competence (NMC, 2009). A range of assessments are used to test NMC standards of proficiency in all aspects of the curriculum.

The strategy reflects the requirements of professional, regulatory and statutory bodies (NMC, 2009; QAA, 2001; QAA, 2008), University Regulations and is informed by service-users, clinical colleagues, students and the course development team.

All modules include assessment of theory and practice, and students must be successful in all assessment components to pass the module. Equal emphasis is placed on the assessment of theory and the assessment of practice performance within the programme and integration of the two components occurs throughout the assessments and in the Portfolio. All modules are summatively assessed. Formative assessment is also structured to include self- and peer- assessment and to allow staff to support students to develop and improve on an ongoing basis. Although formative work is not graded it is compulsory and the feedback provided will be essential for students' learning and progression.

In recognition of the varied learning styles of adult learners and the complex range of skills required of a registered midwife, a multi-method approach to assessment is used throughout the programme to test the application of midwifery knowledge to practice as well as facilitating students' development and progression. The following list is representative of the variety of assessment methods used within Midwifery:

- Continuous assessment of practice
- Grading of practice
- Written assignments
- Practical examinations
- Individual and group presentations
- Unseen examinations
- Project

Assessments are specified at the level ascribed to individual modules and reflect the increasing specificity and complexity of the learning outcomes that the students will be required to achieve for the progression points. The project is designed to provide students with an opportunity not only to explore literature relating to an issue



in placement from a theoretical perspective but to relate that evidence to practice through work with local healthcare partner providers.

The schedule of assessments has been structured to give you maximum opportunity to link your theoretical learning to their practice development. By staggering the submissions of theoretical assessments, the aim is to enable you to organise this workload and learning effectively.

Marks are awarded for summative assessments designed to assess your achievement of learning outcomes. You are also assessed formatively in year 1 to enable you to monitor your own progress and to assist staff in identifying and addressing any specific learning needs. Feedback, including guidance on how you can improve the quality of your work, is also normally provided on all summative assessments within five working weeks of submissions, and more informally in the course of tutorial and seminar discussions.



### Overview of Summative Assessment Strategy

#### YEAR ONE

Formative written exercise 1000 words	Computer software – numeracy test of medicines calculation (must achieve 70%)	Examination (Biology/ Physiology application) MCQ exam 1 hour	Communication skills: Simulated exercise with peer review and reflection	OSCE Structured assessment on selected clinical tasks	Reflection on the Code (NMC, 2015) Formative and summative assessment	Practice based grading of practice Formative feedback and summative assessment	Practice based assessment Formative feedback and summative assessment of achievement of learning outcomes
Formative	Pass/Fail	25%	25%	10%	20%	20%	Pass/Fail

#### YEAR TWO

Computer software – numeracy test of medicines calculation (must achieve 80%)	Exam MCQ 1.5 hours	Health promotion tool and presentation	OSCE Structured assessment on selected clinical tasks	Reflection on the Code (NMC, 2015)	Practice based grading of practice Formative feedback and summative assessment	Practice based assessment Formative feedback and summative assessment of achievement of learning outcomes
Pass/Fail	25%	25%	10%	20%	20%	Pass/Fail

#### YEAR THREE

Computer software – numeracy test of medicines calculation (must achieve 100%)	Service Improvement Project	Written unseen exam 3 hours	OSCE Structured assessment on selected clinical tasks	Reflection on the Code (NMC, 2015)	Practice based grading of practice Formative feedback and summative assessment	Practice based assessment Formative feedback and summative assessment of achievement of learning outcomes
Pass/Fail	25%	25%	10%	20%	20%	Pass/Fail



Clear guidance on all assessments will be given to students and support will be available for students experiencing difficulties. Detailed, constructive and timely feedback will identify students' areas of strength and areas for further improvement. You will be encouraged to reflect on your theoretical and practical learning using reflection to assess your own development. This will enable you to become a more independent learner as you progress through your programme and will support the development of an autonomous practitioner. There will be specialised support available for any student experiencing learning difficulties from the Student Services within the central university.

Assessments have also been designed to facilitate the development of transferable skills that can be applied for the benefit of service users, families and yourself. Similarly, the preparation of assessments will offer you the opportunity to demonstrate knowledge and application of your developing research skills (i.e. literature searching and reviewing, application and critique of research methods and evaluation of evidence). You must successfully complete all assessments and also demonstrate professional conduct and good health and character in line with NMC Standards (NMC 2009) to achieve your BSc award and apply for entry to the professional register.

### **Formative assessment**

Module assignments include a number of formative elements to provide the foundation on which students can develop their knowledge, skills, attitudes and behaviours. Formative written 'feed forward' on your written work, academic and presentational skills will support you to undertake summative assessment having had an opportunity to develop the techniques necessary for success.

During practice placements, formative feedback will be provided on a continuing basis and a formal formative self- and mentor assessment will be undertaken at the midpoint of each placement. Midpoint assessment will allow you to generate plans for learning in consultation with your mentor and so optimise learning opportunities and achievement during the placement.

Management of the assessment process will be in accordance with University academic regulations.

#### **9.1. Practice Placement**

Student midwives will be allocated a named sign off mentor who will guide and support you in the development of your midwifery skills and knowledge by means of supervising the application of skills and knowledge in the real world setting. As you progress from placement to placement, you will work with a number of different midwives and sign off mentors and be given the opportunity to learn by observation, direct supervision and participation in placement. Sign off mentors will use the practice assessment documentation to continuously assess, provide feedback and record your achievements throughout your placement.

Clinical performance will be assessed both formatively and summatively in each module. The assessment process aims to ensure validity and reliability of assessment of practice. Support and guidance will be available to sign off mentors and supervisors in mentor update sessions and from link lecturers and personal tutors. You will be encouraged to reflect on and discuss your learning needs with your mentor during placements. To support this dialogue, you will formatively self-assess your progress at the mid- and final points of each placement to enable a learning plan to be produced. You will provide sign off mentors with evidence from your portfolio of your achievement of learning in practice and achievement of progression point criteria. Sign off mentors will use a variety of additional sources of evidence to assess your achievement, such as feedback and testimonials from service users and their relatives, other midwifery colleagues with whom you have worked, and your self-evaluation and reflection. Should the mid-point assessment demonstrate a failure to reach expected levels of achievement an action plan will be developed collaboratively by the mentor, you and link lecturer, which will clearly identify areas for further development and strategies for achieving success.

For each year-long module you will be provided with an Ongoing Record of Achievement (ORA) containing guidance for you and your sign off mentor along with details of the skills and learning outcomes to be achieved during the placement. To aid you and sign off mentors in judging whether or not an outcome has been



achieved, performance criteria are provided. These provide guidance as to what you may reasonably be expected to demonstrate in achieving each outcome. The use of such criteria will help in ensuring that the assessment of practice is fair and equitable. To support this process, you will provide and reflect on the evidence upon which you have based their practice, how you have met the performance criteria and, thereby, achieved the learning outcome. The assessment decision at the end of the placement in determining whether learning outcomes have been achieved will indicate that you have either passed or failed. Sign off mentors will score your performance using the adapted Steinaker and Bell framework, (1979). This framework assists both the sign off mentor and you to identify reasonable performance that can be expected for the stage of your course and also to identify opportunities in placement to help you progress to the next level. By so doing, the validity and reliability of the assessment process is enhanced.

If you fail to meet required outcomes at first attempt in your practice assessment, a minimum period of four weeks of placement will be arranged during the consolidation period when reassessment will take place. During this period, you will be guided and supported by your sign off mentor and the link lecturer for the placement. An action plan will be developed by all three parties to assist the student in achieving their outcomes. Failure to achieve a pass grade at reassessment will result in you being referred to the school progress review panel.

## 9.2. Progression

The end of each year of study represents a progression point through which you will move to enter the next level of academic study. You cannot progress to the next level unless the designated learning outcomes have been met as demonstrated by successful completion of all module assessments. In order to progress the student must:

- Have passed all module assessments;
- Be able to complete the award within the maximum allowed study period for the award, in line with the Course Regulations.

Progression in clinical performance will be demonstrated within the ORA. All specified learning outcomes within the ORA must be achieved and the signed off by the mentor prior to progression. At the beginning of the clinical placement in Years 2 and 3 the sign off mentor and yourself will review the ORA as a basis for the learning plan for the year.

There is a 12 week time limit enabling you to complete the following module should you have exceptional circumstances and have been unsuccessful at two attempts in an assessments. Should this occur you will have a discussion with the award lead and the Lead Midwife for Education (LME) to agree the best way forward.

## 10. Contact Time and Expected Workload

This contact time measure is intended to provide you with an indication of the type of activity you are likely to undertake during this programme. The data is compiled based on module choices and learning patterns of students on similar programmes in previous years. Every effort is made to ensure this data is a realistic representation of what you are likely to experience, but changes to programmes, teaching methods and assessment methods mean this data is representative and not specific.

The figures below are an example of activities that a student may expect on your chosen course by year/stage of study. Contact time includes scheduled activities such as: lecture, seminar, tutorial, project supervision, demonstration, practical classes and labs, supervised time in labs/workshop, fieldwork and external visits. The figures are based on 1,200 hours of student effort each year for full-time students but with the professional requirement to fulfil 4600 programme hours (EUA, 2014) and 45 programmed weeks (NMC, 2009).

Activity	Year 1 (Level 4)	Year 2 (Level 5)	Year 3 (Level 6)
Scheduled learning and teaching activities	14.4%	14.4%	12.9%
Guided independent	33.6%	33.6%	30.1%



Study			
Placements	52%	52%	57%

## 11. Accreditation

This subject/programme is accredited by the Nursing & Midwifery Council. Please note the following:

- All modules are compulsory and are to be undertaken in sequence. Entry to a subsequent module is dependent on successful completion of the previous module and achievement of the progression point.
- **Regulations:** Your programme has professional accreditation and there are specific regulations, which you have to agree to abide by – see the following section.
- **Study abroad:** Students are unable to study abroad – there is a self-funded elective period within the programme when students can elect to explore women's health locally, nationally or internationally

## 12. Regulations

The University Regulations form the framework for learning, teaching and assessment and other aspects of the student experience. Further information about the University Regulations can be found at: <http://www.keele.ac.uk/student-agreement/>

### Midwifery Course Regulations

To be awarded the relevant BSc (Hons) Midwifery award and to be eligible to apply for entry to the NMC Professional Register, the student must have:

- Met the attendance requirements of the curriculum. A student who has not achieved the minimum professional requirement during the Programme will be required to make up time in placement and demonstrate sufficient evidence of engagement with the theoretical content to meet the minimum professional requirements. Students who do not achieve the minimum professional requirements will make up the requisite time at the end of their final year. Bursary payments will not be paid to students making up time at the end of the programme;
- Have experienced a range of placements and met the relevant EU requirements for registration;
- Passed all theory and practice assessments for all modules;
- Have a declaration of good health and good character signed by the Lead Midwife for Education.

The Nursing and Midwifery Council (NMC) (2009, p 21), defines a progression point as 'a point (or points) established for the purpose of making summative judgements about safe and effective practice in a programme'. All outcomes within a progression period (for example an academic year) have to be achieved and confirmed within 12 weeks of entering the next academic level' (NMC 2009, p20). In order to be recommended for award and professional registration, students must successfully complete every module.

The following is a deviation from University Academic Regulation 1a, Section 4.1:

The relationship between hours of student effort and credits awarded are not as defined in Regulation 1a, 4.1 owing to statutory regulations for total hours over the programme.

The following is a deviation from University Academic Regulation 1a, Section 14:

- There will be no award of Pass (Unclassified Degree)

The following are instances where Course Regulations deviate from University Academic Regulation 1a, Section 11:

- The pass mark for all summative assessments is 40% (pass) except the computer software numeracy test assessments
- Students must be successful in all summative assessments
- All modules must be successfully completed



- Failure to achieve a pass mark at first submission will result in one reassessment opportunity
- No compensation is permitted for modules within the BSc (Hons) Midwifery programme (NMC QA Framework 2013 Annex 1)

In the following instance Course Regulations deviate from University Academic Regulation 1a, Section 13:

- A student who has not met the above professional requirements may be eligible for the award of a University Certificate of Higher Education if they have accumulated a minimum of 120 credits at Level 4. Those students who, in addition to 120 credits at Level 4, have also accumulated 120 credits at Level 5 may be eligible for the award of a University Diploma of Higher Education. These awards will not have 'Midwifery' in their title and students **will not** be eligible to apply for entry to the NMC professional register.

### **13. What are the typical admission requirements for the programme?**

#### **13.1. Selection and admissions procedures**

The School of Nursing and Midwifery Admissions policy has been developed in conjunction with placement partners and with user/carer involvement and is reviewed annually. The Admissions Policy relating to 2017/18 & 2018/19 is available on the School website:

<http://www.keele.ac.uk/nursingandmidwifery/undergraduatestudents/admissionspolicy/>

This policy is reviewed annually and subject to change.

#### **13.2. Academic Entry Criteria**

All candidates for the Pre-Registration Midwifery programme are required to meet or exceed Nursing and Midwifery Council requirements, including literacy and numeracy skills. A variety of entry qualifications are accepted and can be found at:

<http://www.keele.ac.uk/nursingandmidwifery/undergraduatestudents/midwifery/>

Students applying on the basis of courses with a UCAS Tariff require a minimum tariff score of 128 points on the revised tariff system; the exact score will be determined by the student's educational profile and individual application.

#### **13.3. Prerequisites for entry to the BSc (Hons) in Midwifery**

**In order to be accepted onto the programme, candidates must:**

- Meet the School's entry criteria;
- Demonstrate occupational health clearance by the University's Occupational Health Unit;
- Demonstrate good character through reference(s)x2;
- Demonstrate a satisfactory enhanced Disclosure and Barring Service;
- Provide evidence of minimum residency / English language requirements (see below).

All overseas applicants must also have an appropriate level of English Language. If English is not their first language, students will normally be asked to pass a recognised English Language qualification:

Normally applicants will have IELTS level 7.0 (with 7.0 in each subset). The University may be able to accept alternative English Language qualifications from applicants from outside the European Economic Area (EEA) on a case by case basis in line with the appropriate Nursing and Midwifery Council (NMC) guidelines.

In addition to the above, some experience of caring work (e.g. work experience, voluntary work, caring for family members or care experience as part of a course) is desirable.

#### **13.4. Admission with advanced standing**

All students must complete a minimum of three years full-time preregistration midwifery education (NMC, 2009) and therefore there is no provision in this programme for advanced standing.



### **13.5. Transfer between institutions**

Students may be considered for a transfer from another NMC approved pre-registration programme, provided relevant requirements for good health and good character are met and their prior learning can be mapped against this programme so that they will be able to meet all necessary learning outcomes and standards on completion of the course (NMC, 2009). The process for transfer will comply with University and School policy and guidance.

## **14 Other Learning Opportunities**

### **14.1 Practice Learning**

Practice constitutes a minimum 52% (60 weeks) and a maximum of 58% (68 weeks) of the curriculum. Placements have been planned to comply with NMC Standards for students to experience delivery of midwifery care in a range of contexts (NMC, 2009).

### **14.2 Quality Monitoring of placements**

An audit process is in place to ensure the maintenance of educational standards in practice. Implementation of the NMC standards (NMC, 2008c) to support learning and assessment in practice is overseen in partnership by the Practice Placement Quality Lead Lecturer (PPQL) and Clinical Placement Facilitators (CPFs).

Students will be supported in practice by a mentor in line with Standards to Support Learning and Assessment in Practice (NMC, 2008).

There are sufficient midwifery sign off mentors to support the number of students on the pre-registration midwifery course, and a rolling programme of mentor updates and education ensures that there will also be sufficient mentors to meet future student midwifery numbers.

Moderation of practice assessment documents is undertaken on a regular basis to ensure compliance with NMC standards (NMC, 2008) and course regulations. The External Examiner regularly visits placement areas and sees practice assessment documentation as part of her moderation responsibility.

The Trust Clinical Placement Facilitator maintains and updates the live register of midwifery sign off mentors, which is circulated to placement providers; managers oversee the process by which mentors remain updated, while it remains the contractual obligation of individual midwives to ensure timely updating.

The University is planning inclusion of a placements section within the student electronic information management system, which will ensure full integration of placement allocation and achievement within the student record.

### **14.3 Interprofessional Education in the Pre-Registration Curriculum (IPE)**

The NHS Plan (2000) called for partnership and cooperation at all levels to ensure a seamless service to support and deliver person-centred health care. Communication between professionals is a central issue for provision of safe and effective maternity services (CEMACE, 2011; Kirkup, 2015; MBRRACE, 2016; Royal College of Midwives (RCM) et al, 2008) underlining the need for education and training which is genuinely multiprofessional to promote:

- Teamwork
- Partnership and collaboration between professions, agencies and with service-users
- Skill mix and flexible working between professions

The University has a strong interprofessional learning ethos and the School is part of a rich and diverse multi-professional learning community. The IPE programme in health at Keele is integrated into all preregistration programmes within the School of Nursing and Midwifery and other undergraduate programmes in the Faculty Medicine and Health Sciences. It also includes students from Social Work and Biomedical Sciences.



Inter professional learning is part of a dynamic and ever developing area of education, which is essential to equip all students' for today's health and social care environment in the health service. See website for more details <http://www.keele.ac.uk/health/interprofessionaleducation/>

#### 14.4 Internationalisation

There are considerable opportunities and challenges posed by the increasing globalisation and information base of the world economy and political agendas. Keele has developed a framework within which it endeavours to strategically address the international and globalisation requirements through the delivery of key strategic objectives (Keele, 2015).

To help support these objectives, the University Director of Internationalisation provides an internal structure to enable key individuals responsible for internationalisation to have a link person within each School to share best practice, provide information on international opportunities, raise awareness of current and planned activities and ensure that a consistent international approach is adopted across Schools.

The School of Nursing and Midwifery has been proactive in developing the international perspective and has a growing focus with well-established partnerships with a number of institutions as outlined on the school website: <http://www.keele.ac.uk/nursingandmidwifery/international/>. These enable both staff and student opportunities for exchanges and electives. Students on the midwifery programme will explore global health issues, international health targets and international health care policies within the curriculum using a variety of learning and teaching methods. In addition to this students will be given the opportunity to undertake an international placement either in one of the School's link institutions, via a recognised placement organisation or following appropriate approval processes, a placement they have identified. Past midwifery students have undertaken electives in Malawi, Uganda, India, New Zealand, Ireland and Canada.

The School also welcomes a number of students from other countries to spend a period of study here which has evaluated extremely positively and benefit the student group as a whole. An annual event is scheduled where health care students within the Faculty reflect on their international experiences as part of the "Keele International Festival".

This table indicates the School's formally established international links.

COUNTRY	ORGANISATION
Australia	Queensland Health, Gold Coast Hospital
Canada	York University and hospitals in Toronto
Turkey	Ankara University - Agreement for Teaching Mobility & Student Mobility.
Sweden	University of Gothenburg - Agreement Teaching Mobility/Admin Mobility/Student Mobility
Iceland	Agreement Teaching Mobility
Range of countries for example Nepal, Sri Lanka, and Tanzania	Work the World Organisation
Spain	University Nebrija Madrid

#### Study abroad

Students are unable to study abroad – there is a self-funded elective period within the programme when students can elect to explore women's health locally, nationally or internationally.



## 15 Additional costs

### Midwifery Programme Costs

#### Travel for placements

Pre-Registration midwifery students will undertake a minimum of 2,300 hours in clinical practice over the three years.

A student's geographical location, when possible, is taken into account when allocating to clinical placements and, whilst efforts are made to limit student travel, it is not possible to guarantee that placements will be in particular locations and students may be required to travel some distance for their placements. All clinical placements currently in use by the School of Nursing and Midwifery are within a 50 mile radius, most being 30 miles or less, from the university.

Information will become available during the summer of 2017 regarding the cost of travelling to and from placement areas and whether you will be able to claim travel expenses. Any further information will be published on the internet. In addition, if you have been successfully selected you will be contacted with the additional information.

#### Uniform

A basic set of tunics and trousers will be provided to you by the School of Nursing and Midwifery free of charge in the first instance. You will need to provide your own appropriate footwear for placements as per the School Dress Policy, and it is recommended that you purchase a fob watch. You are advised to review and ensure that you can adhere to the School Dress Policy. It seems likely at this stage that a request for additional tunics and trousers will be at your own expense.

**UHNM ID Card:** Midwifery students will need to apply for a University Hospital of North Midlands (UHNM) ID card at a cost of £5 - £10.

#### Occupational Health Clearance

The commencement of your course will depend upon a health fitness report being provided by the University's Occupational Health Service. As part of this process you are required to complete a health questionnaire and arrange for your GP to verify this. You will be responsible for any fee that may be required by your GP.

These costs have been forecast by the University as accurately as possible but may be subject to change as a result of factors outside of our control (for example, increase in costs for external services). Forecast costs are reviewed on an annual basis to ensure they remain representative. Where additional costs are in direct control of the University we will ensure increases do not exceed 5%.

As to be expected there will be additional costs for inter-library loans and potential overdue library fines, print and graduation.

## 16 Document Version History

Version history	Date	Notes
Date first created	October 2016	
Revision history	V2.0: June 2017	Modifications were required by the NMC following a monitoring visit in 2017. These are to accommodate the introduction of grading of practice (an overall percentage grade for placements instead of pass/fail), a new placement plan and changes within the assessment strategy. [Major change: reissued]
Date approved	July 2017	



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