

Practice Education Handbook (PEH) Midwifery

BSc, MSc, Post Experience BSc & Post Experience MSc

Faculty of Health &
Life Sciences

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The Practice Education Handbook (PEH)

Midwifery

2018/19

This handbook contains information about how practice is organised and regulated. It includes sections relating to:

Practice education requirements: The definition of practice and rules related to practice education.

Structure and content of the practice component of the programme: Practice modules and the timetabling of placements.

Organisation of the practice experience: The practical considerations and guidance related to attending the practice setting.

Roles and responsibilities: Who does what -link lecturers, mentors and you.

Important appendices:

- Using reflection to learn from practice.
- Oxford Brookes University and Oxford University Hospitals NHS Foundation Trust Midwifery Students Medicines Management Policy.
- Link Lecturer contact details.
- Placement Area Contact Information.

Practice Education Requirements

This Practice Education Handbook outlines the key issues related to your practice experiences. There are many links to further reading throughout the document.

This document closely links with your Programme Handbook and the Practice Assessment Document. In combination, these three documents will guide you through your programme.

Please always feel able to ask a member of the programme team for support or advice if you are unsure of what you should be doing or what things mean. We are here to facilitate your development and progression through the programme enabling you to gain entry into the midwifery profession. We wish you every success.

Note

There is an electronic version of this handbook available on the Midwifery Moodle site and the Practice Education Unit (PEU) website

(<http://www.hls.brookes.ac.uk/peu>). This will enable you to utilise the links within the document effectively.

Unfortunately if you lose your hard copy of this Handbook and request a replacement you will be charged a fee.

1 Practice Education Requirements

1.1 WHAT IS PRACTICE?

The whole focus of your programme is related to practice and how to learn to undertake this as a qualified professional.

Practice is identified as any activities related to the direct care of a woman and her family. Practice will make up a minimum of 50% of your midwifery programme and the NMC do not permit this to include simulated practice hours. Practice is directly linked to what you are learning in the university setting and you will integrate your practice experiences with the theory you learn to enhance your competence as an emerging professional midwife.

An important element of your practice is to appreciate the way professions work together for the benefit of women and their families and to gain skills that are common to many professions involved in health and social care. An inter-professional approach to learning will foster mutual understanding and respect amongst professionals working together in health and social care. During the programme you will have the opportunity to learn from health care professionals from other disciplines. In addition, when you have the opportunity, you should share inter-professional learning experiences and opportunities with fellow students. This approach will develop your knowledge of the how the various complex roles of professional health care can contribute by working together to enhance woman and family centred care, professional learning and development of the evidence base that informs your practice.

The majority of practice will be spent in practice settings in direct contact with women and their families. Your main role as a student on placement is that of a learner.

Supernumerary status of students means that students are extra to the staffing figures. You will be supervised by health care professionals and remain supernumerary for the duration of the course. However, as you become more knowledgeable and experienced, it is expected that with increasing confidence and competence you will contribute positively to the teams you are learning with. Thus, you will gradually make a greater contribution to the work of the practice area.

More information about supernumerary status can be found via the following link:

<http://shsc.brookes.ac.uk/plu/statement-in-relation-to-supernumerary-status-of-students-on-pre-qualifying-courses-programmes>

You will be allocated to a range of practice placements during the course which will ensure you experience midwifery in a variety of settings, thereby allowing you the opportunity to gain experience and competence that will meet the NMC (2009)

requirements for you to enter the register. The list below indicates some of the placements you may be allocated to during the programme (this list is not exhaustive and is presented as an example):

- **Community**
- **Delivery Suite**
- **Midwifery Led Units (stand alone and alongside or integrated)**
- **Maternity hospital ward based settings**
- **Newborn Care Units**
- **Gynaecology Theatres**
- **Maternity Assessment Unit**
- **Fetal Maternal Medicine Unit**

You will have to achieve a set number of hours per practice module. These are clearly marked within each module handbook. These hours must be achieved through direct care and not through simulated practice learning. Direct Care (DC) is practice that you undertake in the practice placement setting and these make up the majority of hours for your programme.

1.2 WHAT IS FITNESS TO PRACTISE AND WHAT ARE THE REQUIREMENTS?

Whilst undertaking your programme you work with women and their families during your practice placements. In order to be entitled to practise as a student professional you must comply with the Faculty's current Fitness for Practise for Pre-registration Students. This means that you will be issued with Fitness to Practise identity badge, which authorises access to placement areas and allows you to participate in health and social care placement learning.

Authorisation is issued on an annual basis.

When you have 'Fitness to Practise', it means that you are considered safe to be in practice. There are two elements to ensuring this safety. Firstly, you need to be equipped with fundamental learning to help you protect yourself and secondly, patients need to be kept safe from harm from you. Therefore, you will undergo training and checks to ensure this happens; for example, you will have moving and handling training that will educate you in the principles of safe moving and handling, ensuring you protect yourself from injuries such as a hurting your back but also to prevent you injuring the patient by using poor technique.

Therefore, for you to enter any practice environment you **MUST** meet **ALL** the requirements before being issued with a Fitness to Practise identity badge. You should always have this badge with you when you are in practice. The badges are issued by the Practice Education Unit (PEU).

The Fitness to Practise process includes ensuring that all requirements for students to enter practice have been met. This is supported by the Practice Education Unit (PEU) and the Practice Education Management System (PEMS).

You are required to complete your “self-declarations” on the Practice Education Management System (PEMS), acknowledging that:

- you have read the Standards of Conduct for Fitness to Practise www.brookes.ac.uk/Documents/Practice-Education/Standards-of-Conduct/Standards-of-Conduct-Pre-reg/ and will be bound by these student conduct regulations. Without this authorisation students will not be entitled to practise.
- your Disclosure & Barring Service (DBS) enhanced clearance remains unchanged since admission

N.B. If placement providers require a repeat DBS undertaken in addition to the fitness to practice process then the student will be required to pay for this
- there has been no change to your Occupational Health status

Before issuing your Fitness to Practise identity badge, PEU will check that all aspects of your mandatory training have been completed, both face-to-face training in the skills labs and e-Learning modules on the Skills for Health website, for which you will be given log in details at the beginning of your course.

Students have been informed of the guidance relating to learning professional behaviour: www.brookes.ac.uk/Documents/Practice-Education/Standards-of-Conduct/Guidelines-for-Professional-Behaviour/.

1.3 WHAT IS PROFESSIONAL CONDUCT?

Professional conduct is the way in which you behave and conduct yourself now that you have entered a professional midwifery programme. The Standards of Conduct: Fitness to Practise incorporates The Code of professional conduct required by the Nursing and Midwifery Council. The NMC (2010) expect midwives to be in good health and of good character. Good character is based on your conduct, behaviour and attitude; you should be trustworthy and honest. It also takes account of any convictions, cautions and pending charges that are likely to be incompatible with professional registration.

<http://www.nmc.org.uk/education/becoming-a-nurse-or-midwife/when-studying-to-be-a-nurse-or-midwife/>

To learn and maintain your professional conduct you should always access the NMC Code:

<https://www.nmc.org.uk/standards/code/>

Professional conduct is expected of you in the university and practice environments. You are also expected to behave appropriately in your personal life, as inappropriate behaviours may impact on your engagement with and continuation on the programme.

Standards of Conduct

Whilst undertaking the midwifery programme you will be subject to the Faculty of Health and Life Sciences Standards of Conduct: Fitness to Practice Pre-registration Students in Practice (www.brookes.ac.uk/Documents/Practice-Education/Standards-of-Conduct/Standards-of-Conduct-Pre-reg/), which you will be given to you on admission to the university. You will be expected to read these and self-declare via PEMS that you agree to abide by these standards. You will be sent a PEMS email containing a link for self-declaration as part of your preparation for Fitness to Practise.

Failure to comply with these regulations will lead to disciplinary action and may result in termination of your education.

Professional Behaviour and Suitability for Pre-qualifying Students

To help you learn the professional behaviour demanded by these regulations you are also referred to the document Guidelines for Professional Behaviour suitability for pre-qualifying students.

<http://www.hls.brookes.ac.uk/images/pdfs/plu/guidelines-for-professional-behaviour-suitability-pre-registration-students-sep-2017.pdf>

1.4 WHAT ARE REASONABLE ADJUSTMENTS?

There are a wide range of individual circumstances which may require reasonable adjustments to be made in practice placements. Placements provide a positive learning environment, and offer the opportunity to achieve the requirements of the programme. There is a legal duty under the Equality Act 2010 to students/employees to consider and, where reasonable, make adjustments both for students at university and on placement as prospective employees in the workplace.

All professional practice programmes have a duty to be mindful of health and safety in the workplace and protection of the public. The NMC (2011 pg. 9) state that

'When deciding how and when to make reasonable adjustments for nursing students with disabilities, the principles of safety and protection of service users, families and carers must override all other considerations'.

Therefore, if you start the programme with an agreed reasonable adjustment or if your circumstances change whilst you are on the programme and you become in

need of reasonable adjustments, there are processes to follow to ensure your needs are assessed. From this, there is identification of the adjustments that are required and, where reasonable, adaptations to the programme and practice experiences will be made to accommodate you and maintain your position on the programme. It may not always be possible to make an adjustment or further adjustments in the case of increasing disability.

The University provides assessment and support through disability services and links to local hospital trusts occupational health departments. You will find the roles of these departments are explored more fully on the Oxford Brookes University intranet and Placement Education Unit website.

You will find more information and guidance on the following link:

Reasonable adjustment: for health impairment and disability guidelines for implementation in professional practice programmes

<http://www.hls.brookes.ac.uk/peu/reasonable-adjustment-for-health-and-disability-guidelines-for-implementation-in-professional>

1.5 WHAT ARE THE NMC 'ESSENTIAL SKILLS CLUSTERS' ?

Essential skills clusters (ESCs) are generic skills statements set out under broad headings that identify skills to support the achievement of the NMC (2009) standards at progression points and entry to the register.

It should be noted that the NMC (2009) recognise that ESCs do not include all the skills and behaviours required of a registered midwife. However, they contribute greatly and are incorporated into your programme to ensure that you have the appropriate opportunities to be prepared and assessed at each stage of your progression through and at the end of the programme in order to meet the requirements that are essential to the role of the midwife.

There are 38 essential skills in total and these are arranged within five essential skills clusters:

- 1. Communication**
- 2. Initial consultation between the woman and the midwife**
- 3. Normal labour and birth**
- 4. Initiation and continuation of breast feeding**
- 5. Medical products management**

More information can be found at the following NMC site:

<https://www.nmc.org.uk/globalassets/sitedocuments/standards/nmc-standards-for-preregistration-midwifery-education.pdf> (page 36)

1.6 RULES ABOUT PRACTICE PLACEMENT ASSESSMENT

The 40% availability rule

The NMC (2008 p39) state that:

‘Whilst giving direct care in the practice setting at least 40% of the student’s time must be spent being supervised (directly or indirectly) by a mentor/practice teacher’.

Midwifery students *‘can only be supported and assessed by mentors who have met the additional criteria for sign off (paragraph 2.1.3). Sign-off mentors must make the final assessment of practice and confirm that the required proficiencies for entry to the register have been achieved (paragraph 3.2.6) (NMC 2008 p16)*

In some practice placements you may be allocated two members of staff who are part-time who work together in combination to support you in the same manner as one mentor, therefore they would be in combination available 40% of your time in that experience. In this scenario, one named midwife will be the designated sign off mentor.

Your mentor/s can delegate your day to day supervision to others ensuring that you are always supervised either directly or indirectly. Therefore, other registered professionals can supervise you and contribute to your learning and assessment. Your mentor remains the one that is accountable for overseeing the process and decisions made about your assessment.

The important thing for this to work is that there is regular feedback from those you work with to your mentor. You can help with this process by taking responsibility for your learning and development and knowing what objectives and competencies you should be targeting for development. There are forms within the Practice Assessment Document (PAD) that will help with feedback.

In the majority of placement experiences it is likely that you will be directly or indirectly supported by the person who is your sign off mentor for 40% of the time; for example, you will be with them for 8 shifts over a period of 20 shifts. If you are concerned about your sign off mentor availability, you should seek early support from your link lecturer to assist you with addressing the situation.

Practice module fail rule

“No practice based module may be failed more than twice and a student may not fail more than two such modules. A student who does so will be required to withdraw from the course”.

Please see the Undergraduate Programme Handbook and Regulations No A1.7 Progression https://kmis.brookes.ac.uk/csms/wprin_chb.modmain

Rules about progression in relation to practice modules

You will not be able to progress from one year (progression point) to the next without first passing all the practice modules for that year. This will ensure that you have met the safety and values criteria required by the NMC (2009) to progress from one stage of the course to the next. All progression points and entry to the register requires the assessor to be on the same part of the register as you intend to enter. Please see information about Progression and Pre-requisites in the Programme handbook.

1.7 WHAT HAPPENS IF I FAIL A PRACTICE MODULE?

If you fail a practice module the Subject Examination Committee will have to decide whether you should be awarded a resit or a fail without resit. At the point of failing the module they will decide whether to award a practice fail or not.

It is your responsibility to contact the practice module leader to determine how you will be reassessed. The Placement Lead may be involved in the negotiation of new placements and will therefore need to be copied into your communication with the practice module leader.

If you are offered a resit you will be given a period of time either in the same placement area or a new placement area to gain the missing component of the module assessment.

If the resit is for competencies, you will usually be provided with the opportunity for 150 hours of direct care to achieve any competencies that are outstanding.

If your resit is due to an hours deficit of more than 30 and you have achieved all of your competencies previously, you will be required to complete and submit the hours that you have not achieved within the resit period; failure to do so will lead to failure of the module.

NB: you are permitted to carry over 30 hours into the next semester as it is recognised that a shortfall may sometimes be outside the control of the student. All practice module hours must be achieved by the end of each year of the programme.

If your resit is due to failure of Safe Medicate assessment an alternative date for reassessment will be offered during the resit period.

If you need to retake the practice module you will be required to complete all components of the module again. You will always be expected to complete all of the competencies for the module you are retaking.

2 Structure and Content of the Practice Component of the Programme

2.1 WHAT ARE COMPETENCIES?

All the competencies relating to your programme can be found in the Practice Assessment Document (PAD). Competencies are statements with descriptors of the professional skills and qualities which are required of you as you progress through the programme in order to meet the requirements for entry to the register (NMC 2009). There are 15 competencies in total and these have to be achieved for the assessment of practice modules and at each progression point. You will find more about these in your PAD and also the specific practice module guides.

2.2 WHAT ARE PRACTICE MODULES?

There are 2 types of module, 'practice related modules' and 'practice modules'.

Practice related modules are those that contain theory-based assessments of direct relevance to clinical practice, for example an essay about care of the neonate; obstetric emergencies OSCE or written examination about pathology in childbearing. All are awarded marks that contribute to the classification of your degree. More can be found out about them in the programme handbook.

Practice modules are those that are directly linked to your practice experiences and practice placements. They are assessed using competencies based on the NMC standards. All require your practice to be graded by your sign off mentor and have marks allocated to that grading that contribute to the classification of your degree.

Further information about these modules and how they relate to the rest of your programme can be found in the programme handbook.

2.3 HOW MANY PLACEMENT EXPERIENCES WILL I HAVE, AND WHEN WILL THEY BE DURING THE PROGRAMME?

The start and finish dates of placement experience are planned and agreed with our placement partners. The following principles are applied:

http://www.hls.brookes.ac.uk/images/plu/peg_18_02_12_08_pre-qualifying-placement-allocation-nm-ot-odp-pt-paramedic-and-socialwork.docx

The placement blocks cannot be negotiated (except with evidence of mitigating circumstance such as certificated illness), therefore your only opportunities to attend placement will be within these blocks. You will be expected to be available for university and placement learning for 45 weeks of the year; you will be given detailed timetables by the programme team as the course progresses.

As a full time student there is an expectation that you will be able to attend placement for 30 hours per week/ 3 long days (Monday-Sunday; day or night); your timetable will help you plan your placements.

3 Organisation of Practice Experience

3.1 WHAT IS THE PRACTICE EDUCATION UNIT (PEU), AND WHY DO I NEED TO KNOW ABOUT IT?

The PEU is a key resource for you and staff and a central point of contact for pre-qualifying students and those supporting them whilst they are on placement. It also acts as an important link between the Faculty and placement providers, and it supports placement learning quality assurance.

In PEU you can obtain all your hours records sheets, travel forms, and details about how to get to placements etc.

The Head of Practice Education, ensures that placement learning and practice education needs are addressed in all appropriate Faculty activities and Committees. The Head of Practice Education also supports the Placement Lead and link lecturers, and leads the partnership Practice Education Group (PEG) which develops all guidance, policy, and resources that are accessible on the PEU webpages: <http://www.hls.brookes.ac.uk/peu>

What is PEMS?

The Practice Education Management System (PEMS) is an online database used to manage students' placements which is managed by the Practice Education Unit (PEU); see <https://pems.brookes.ac.uk/default.aspx>

Each student has a PEMS account that provides secure access to:

- complete self-declarations to abide by the Standards of Conduct for Fitness to Practise.
- information relevant to planning placements by maintaining a Placement Planning Form. Students can access their PEMS Placement Planning forms at any point during their course and are encouraged to keep this up-to-date.
- placement profiles, providing information about placement allocations.
- placement evaluations.
- reporting sickness/absence from placements.
- course information, including timesheets and this Practice Education handbook and Practice Assessment Document.

Students log-in to PEMS using their Brookes student ID and password. An example homepage is shown below:

Your PEMS - Student

Welcome to PEMS.

Messages
 Show read messages

Date	Message
23/07/2018 07:37:08	Mandatory eLearning Requirements for Fitness to Practice to be completed by 3 August 2018
23/07/2018 00:17:11	Placement Evaluation
28/06/2018 13:59:05	Placement of the Year Award 2018 - RESULTS
12/04/2018 07:58:59	Midwifery CQC report - information and advice
09/03/2018 11:54:06	Placement of the Year Award 2018 - deadline for nominations 30 April
26/02/2018 09:30:39	IMPORTANT FOR STUDENTS ON PLACEMENT: Attending placement in bad weather conditions
14/12/2017 10:10:21	Placement of the Year Award 2018
10/12/2017 20:22:32	IMPORTANT FOR STUDENTS ON PLACEMENT: Attending placement in bad weather conditions
11/09/2017 07:50:44	Midwifery: Please collect your Fitness to Practice badge
24/07/2017 11:18:47	Mandatory eLearning Requirements for Fitness to Practice to be completed by 4 August 2017

Placement Planning Information
 In order to help us assign you to an appropriate placement, you must keep your Placement Planning form up to date. You can view your Placement Planning information by clicking the link below.
[Review your Placement Planning Form](#)

Course Information
 You may find documentation relevant to your course using the following links.

- General Placement Forms
- Timesheets
- PEMS User Guide
- NHS Bursaries Rules
- Midwifery Specific Resources
- Confidential feedback form to give to your practice assessor

Your Placement Evaluation Forms

Location/Form
Wallingford (Wallingford, Thame, Wheatley)/Community Midwives (Oxfordshire Community Midwives Teams)

Previous Placements
 Click here to view your previous placements

Students will receive PEMS emails (system messages) during their course to:

- Request completion of their self-declaration in readiness to receive their Fitness to Practise identity badge.
- Request completion of their e-learning modules as part of the Fitness to Practise
- Request completion of placement evaluation questionnaires at the end of each placement. It should be noted that the evaluation needs to be completed with 2 – 4 weeks of receipt of the evaluation request since, after this date, access to the questionnaire is withdrawn.

If students experience any difficulties with using PEMS, they should contact PEU using the relevant PEU email address: midwifery-peu@brookes.ac.uk

3.2 HOW WILL I BE ALLOCATED TO PLACEMENTS?

In order to be fair and equitable to all students, placement allocations are undertaken following principles detailed in the following document:

http://www.hls.brookes.ac.uk/images/plu/peg_18_02_12_08_pre-qualifying-placement-allocation-nm-ot-odp-pt-paramedic-and-socialwork.docx

You will experience a wide variety of placements during your programme, which meet the NMC requirements. You will be informed of where you are allocated to approximately 6 weeks before the placement starts. You can find out more information about each of your allocated placements by accessing the Placement Profile available via PEMS.

It is normally not possible to change an allocation. However, ONLY if there are exceptional circumstances, you can request a change using the following process and guidance: <http://www.hls.brookes.ac.uk/images/pdfs/plu/chip-requesting-a-change-in-placement.docx>

3.3 HOW SHOULD I PREPARE FOR MY PRACTICE LEARNING EXPERIENCE?

To get the most out of your practice learning experience, there are a number of things that you can do in preparation for your placement. As soon as you know where you are to be placed in practice you can:

- Log in to PEMS and read the placement profile: This is a description of the placement that includes some valuable information e.g. contact numbers, shift times, dress code, client group, facilities etc.
- Find out more about the client group and speciality of the placement. Ask the link lecturer covering the placement about the client group/speciality of the placement. Do some reading to find out about the particular needs of that client group. Think about the knowledge, skills and attitudes you already possess which may help you to care for this client group. Revise these in preparation for the placement. Find out about the knowledge, skills and attitudes that you may need to develop to care for this client group. Is there any reading you can do in preparation for this?
- Read your student handbook and module handbook: These will provide more information about the sorts of things you might expect to learn and achieve during this practice learning experience. In particular the module handbook will provide specific learning outcomes for this practice learning experience. Do you understand these? If not seek clarification from the module leader. Think about the opportunities that you may have to fulfil these learning outcomes. Look at the competencies that are required for the year and link to this particular practice learning experience. Do you think these will be achievable within your allocated placement? Make a note of any issues you wish to discuss with your mentor and link lecturer when you meet them.

- Begin to identify your own personal objectives: What do you want to achieve at this point in your programme? What areas for development have you identified and what are your action plans for this year?
- Think about previous practice learning experiences: What helped you settle in to your previous placements? What sort of relationship do you like to have with your mentor/link lecturer? What do you know about your own learning style that will help you plan successful learning strategies with your mentor?

3.4 HOW CAN I MAKE THE MOST OF MY PLACEMENT?

The practice learning experience accounts for over 50% of your programme and is central to learning to be a professional practitioner. It will be important to behave in a professional manner as outlined in the Standards of Conduct document. However, listed below are some practical tips to help you make the most of your practice learning experience.

- Be enthusiastic about learning opportunities and show a willingness to learn: You will get a much better response if you can demonstrate your enthusiasm rather than being withdrawn and reticent. You may feel very nervous and unconfident, but be aware of your body language and the impression you are giving.
- Be proactive in seeking out experiences for your level of practice: Ask your mentor if you can observe or participate in different experiences. Come prepared to each shift – have an idea of what you want to achieve or do. Take the initiative in planning your learning experiences.
- Identify things to do when your mentor is busy: What can you do without supervision? Your mentor may organise for you to spend some time with other members of the team. Read material available to you within the placement. Go and talk to some of the women and their families.
- Use your observation skills: Observe your mentor and other members of staff. How do they communicate? How do they make decisions? How do they perform certain skills or procedures? How do they approach clients and their families?
- Prepare for the times when you can sit down and talk with your mentor: Keep a notepad to jot down things you want to ask about. Keep a diary so that you can remember the details of events when you come to talk about them with your mentor. Remember not to include information that identifies women and their families.
- Develop your reflective practice: Read and use guidance on using reflection to learn from your experience.
- Be prepared to work as a team member: Sometimes this will be to meet your own learning objectives but sometimes you will be asked to work with

others who require additional help. You can learn a lot from participating as a member of the team.

- Inter-professional learning – take opportunities to learn with and from professionals from other disciplines.
- Know when to ask for help and seek support. Your mentor will expect you to ask lots of questions and to acknowledge your own limitations.
- Keep a record of your own progress: Note how your confidence and competence are developing. Return regularly to the action plan you set at the beginning of the placement and record your progress. You should have numerous opportunities to achieve your competencies. It is your responsibility to ensure that your mentor is aware of the competencies required and to let them know when you feel ready to be assessed. Self-assess your level of competence using the competency framework. This will ensure you are prepared for any meeting with your mentor about your progress.
- Ask for regular feedback from your mentor and other people you work with. For example, if you spend time with a health visitor, a nurse, a general practitioner, a physiotherapist or another member of the inter-professional team, ask them to provide some brief written or verbal feedback.
- Demonstrate professional behaviour at all times.
- Review the student checklist for pre-registration practice placements. The checklist provides tips about the things you should be doing mid-way through your placement and at the end of your placement.

3.5 WILL I HAVE TO WEAR UNIFORM TO MY PLACEMENT?

You will be able to find out from the placement profile whether you are required to wear uniform or not. You should adhere to the local dress code policies and refer to the Practice education Unit statement regarding uniform, dress and appearance whilst on placement:

<http://www.hls.brookes.ac.uk/peu/statement-regarding-uniform-dress-and-appearance-for-students-on-placement>

The wearing of uniform whilst travelling to and from practice is not allowed for infection control reasons and also for your safety.

3.6 WILL I HAVE TO TRAVEL FAR TO MY PLACEMENTS?

Students will experience placements across the whole of Oxfordshire, (see Midwifery placement locations maps

<http://www.hls.brookes.ac.uk/images/plu/mentoring/placement-map-midwifery.pdf>) therefore, it is expected that you will have to travel to some placements. This was made clear to you at open days and interview. Guidance on travel times can be found in the placement allocation principles on PEU's web site

http://www.hls.brookes.ac.uk/images/plu/peg_18_02_12_08_pre-qualifying-placement-allocation-nm-ot-odp-pt-paramedic-and-socialwork.docx

There are links to public transport websites via the PEU website. PEU staff and link lecturers can advise on travel to specific placement areas, and this should also be available on each placement profile.

Useful links on PEU's website include:

<http://www.hls.brookes.ac.uk/peu/placement-costs-for-all-pre-qualifying-programmes>

<http://www.hls.brookes.ac.uk/peu/transport-and-finance>

3.7 WHAT SHOULD I DO IF I CAN'T ATTEND PRACTICE?

You may not be able to attend practice for a number of reasons, the most common being illness.

If you are able to foresee the absence (for example, a planned medical investigation) you should communicate this to your academic advisor (if you are not yet in a placement area) or link lecturer (if you are in placement) as soon as possible so that they can support you and advise you regarding the best course of action to take. You should also submit a midwifery absence notice via email. The email address is midwifery_absence@brookes.ac.uk

If the absence is unplanned and you will be missing practice, you **MUST** inform the placement area as soon as you know you will be absent; where possible this should be before the start of the shift you will be missing. You should ensure you know and adhere to the local policy for contacting the placement area regarding absence. You should always take the name of anyone you inform regarding your absence. You should give an indication of how long you think you will be absent for and when you will contact the placement again regarding an update on when you will be returning. When you are able, you should inform the link lecturer of your absence.

After informing your placement area, absence should be reported on the first day of absence (and thereafter) via your PEMS homepage account:

- Log into PEMS and locate the "Report an absence from placement" link at the bottom of your PEMS home page (the link appears when your placement starts.)
- Click on the link
- You may type in absence start and end dates or, for quickness, we have added buttons to report an absence for today and yesterday.
- Select the type of absence from the drop down list.
- Enter details in the free text box giving further information as necessary.

- Confirm that you have already informed the placement area.
- Submit the form

Failure to follow the above process will be considered unprofessional behaviour and the following process will be applied:

<http://www.hls.brookes.ac.uk/images/pdfs/plu/guidelines-for-professional-behaviour-suitability-pre-registration-students-sep-2017.pdf>

When you return to practice you will be offered a meeting with your mentor to discuss your fitness for return. The following guidance will be applied:

http://www.hls.brookes.ac.uk/images/plu/peg_180212_07_return-to-practice-from-sick-leave-june-2018.docx

If you are absent from a shift, including if you are off-sick, you will NOT be able to count the hours you have missed towards the total hours for the course. You will have to rebook these placement hours.

Your attendance and absence from practice should be accurately recorded in the placement areas records of staff working rotas (often called the off-duty) and on your hour's record sheets. Medical certificates should be gained for absence to support mitigating circumstances requests.

If you miss shifts/hours it may be difficult or impossible to catch these up within the placement allocation. Your absence may impact on how/if you meet the assessment criteria for the practice modules. Each of the practice modules requires you to be submitting hours and competencies to demonstrate your achievement in practice. Thus there may occasionally be a genuine need for you to request an extension to the assessment deadline, due to illness or other mitigating circumstances. For further details please refer to the following information:

<http://www.brookes.ac.uk/students/your-studies/mitigating-circumstances/>

Failure to follow this process will be considered unprofessional behaviour.

3.8 WILL I HAVE TO WORK AT THE WEEKENDS?

You will have to work some weekends if the placement area offers a weekend service. You will be required to mirror the placement area and your mentors shift patterns and this may include working during the weekend. The NMC (2009) indicate that you should experience care giving each day of the week.

3.9 WHAT ARE THE TIMES OF PLACEMENT SHIFTS?

The NMC (2009) indicate that you must experience 24 hour and 7 day care. Shift times and working patterns vary widely from one placement area to another. It is important that you establish what the shift times are and arrive punctually for them. You will be expected to negotiate your shift patterns and mirror the shift times of

the placement area. You will be expected to be available for the full range of placement shifts.

Example shift times vary in each placement profile but some examples are detailed below:

Early shift: 0730-1530

Late shift: 1330- 2130

Night shift: 2100-0800

12 hour shifts: 07.30-20.00 and 19.30-08.00

3.10 CAN I TAKE HOLIDAYS IN PLACEMENT TIME?

You are not permitted to negotiate holiday with placement areas. If you take inappropriate absence during placement times you risk not meeting the practice module assessment criteria and/or delay your progression. Inappropriate absence may reduce the time you are available to be with your mentor to below the 40% availability rule and they would not be able to assess you appropriately. You would also limit the hours that are available to meet course requirements. Inappropriate absences will not count as mitigating circumstances and therefore extensions will not be granted.

3.11 HOW IS MY PRACTICE ASSESSED?

As described previously you will be in practice caring for women and their families supervised by others, however, your sign off mentor will be available to you for a minimum of 40% of the placement. Your sign off mentor is the person who is accountable for the assessment and grading of your practice.

Your mentor will discuss your learning needs, set objectives with you and review your progress. Your link lecturer will attend the mid-semester review and possibly the end of semester review. You are required to self-assess your performance using the grading of practice grids within your Practice Assessment Document at two points in the semester, mid-way and at the end.

Towards the end of your semester one and semester two OR three placement, both you and your mentor (or designated other) will summatively assess your practice using the grading of practice grids. They will assess your abilities against the objectives you have set and the extent to which you have met your competencies identified within the competency framework.

The mentor will utilise:

- Observation of your practice over a period of time.
- Discussion related to your practice including your knowledge of the evidence base.

- Reading of your written competency evidence.
- Feedback from other members of the team who have supervised you.
- Feedback gained by your mentor from women and their families for whom you have cared.
- Ward based assessments e.g. medicines management

In combination, these will inform the sign off mentor's decision and they will make a professional judgement and either pass or fail your competencies. They will offer feedback about your progression against each of the competency domains. They will utilise forms within the Practice Assessment Document to complete and document this process.

3.12 HOW DO I ASK WOMEN AND THEIR FAMILIES FOR FEEDBACK ABOUT MY PRACTICE?

Twice a year you are required to obtain feedback from a woman and/or her family using the proforma in your PAD. This is a model of good practice that already exists within most Trusts for qualified staff.

Women and their families can offer a great insight into their experiences of health care and can contribute to feeding back about how they experience your care. However it is not always appropriate for you to approach them to ask for feedback about how well you are doing; for example, women may be in vulnerable circumstances and we need to ensure they are safeguarded from harm.

You should discuss first with your mentor who can then approach the woman and/or her family to complete the form at a suitable time and without coercion. Your mentor is able to guide you with this aspect of your assessment in practice and will enable considerate and timely approaches to women and their relatives in order to receive the written feedback required. The information gained will contribute to their assessment of your abilities.

3.13 HOW DO I KNOW I AM ACHIEVING COMPETENCE?

During placement you will have the opportunity to meet with your mentor to discuss your progress. At the initial meeting you should set objectives and link these to competencies. As the placement progresses, you will gain feedback both on an ad-hoc basis and specifically at the midway meeting. Your mentor will provide feedback about your skills and attributes in relation to each of the competencies identified within the objectives. Your link lecturer will be present at this meeting. At the final meeting you should provide your mentor with evidence for the achievement of competence, and she/he will then make a professional judgement as to whether you have demonstrated competence at the required level.

If you are not meeting the required level of competence, your mentor will inform you of this formatively during your placement and will help you develop an action plan to improve your practice. The link lecturer should also be involved.

Your competencies must be completed before your mentor can award the final grade for practice.

3.14 HOW DO I RECORD MY PRACTICE HOURS?

It is your responsibility to:

- Know how many hours you are required to achieve to pass practice modules.
- Submit your hours using the record sheet for direct care hours (nursing, midwifery and ODP students) with accurate completion and signatures.
- Submit your hours within the practice module deadline to the relevant place (outlined in practice module handbooks).
- Always keep a copy of any hours records sheets submitted
- Know what may be counted as practice hours:
<http://www.hls.brookes.ac.uk/peu/recording-nursing-midwifery-odp-paramedic-student-hours-in-practice>

In the placement area:

Each placement area will allocate and record student hours and off duty in different ways and you should make sure you understand the system in place for each new placement area you start. It is important to be able to record your presence on the ward for periods of time; this is so that you can identify when you will be on duty and who you will be working with. The placement area will know when to expect you and it will be clear who is supporting you for the shift. It is also important for you to contribute to ensuring an accurate record of staff and student attendance on shift for placement areas, so that should an incident occur there is a record of who was present. If there is not a clear system for recording your shifts within a placement area you should ask your link lecturer for support to rectify this.

You will also need to record your hours on a record sheet for direct care hours (nursing, midwifery and ODP students). Once you are given an allocation of shifts you should document ALL of these accurately and clearly in black pen on the record sheet. As you complete each shift the qualified health care professional (usually your mentor or other registrant) that you have worked with for the shift should sign for the number of hours that you have been present. Any absence should be indicated clearly and the running total calculated taking this into consideration. Thus the record sheet should indicate all the times that you are present or have been absent. The student's recorded time is from the start of the shift/practice session until the end of the shift/practice session/ or the time they leave. This includes all practice learning opportunities and reflection during the

practice session, for example, break times within the practice sessions, team meetings, in house training, preparation time required by the practice area, and other learning activities agreed by the mentor. Minutes are to be rounded up/down to the nearest 30 minutes.

All student practice hours are calculated, taking account of professional statutory regulatory body requirements for registration. Students are also normally regarded as supernumerary; the primary role of the student on placement is that of a learner. Supernumerary status of students means that students are additional to the workforce requirement and staffing figures. They will make an evolving contribution to the work of the placement area to enable them to learn how to care for clients/patients and meet the professional competence requirements of their programme.

Please note that only hours completed and signed-off by the mentor (practice assessor) and your Link Lecturer can be accounted towards your direct care hours. Forecast (projected) hours will not be included by PEU in reports for the examination boards.

Following completion of the placement hours

You will need to obtain a signature from your link lecturer and submit the completed record sheet for direct care hours (nursing, Midwifery and ODP students) as directed by the practice module leader within the practice module handbook.

Following submission the record sheets for direct care hours (nursing, Midwifery and ODP students) are stored within the practice education unit (or equivalent in Swindon). The hours are recorded on the PEMS hours database and it is this database that is considered the final record of your practice hours. If there is any query about your hours the database will be utilised to provide the information.

If hours sheets go missing for whatever reason and are not within the Practice Education Unit or recorded on the database, it will be your responsibility to provide evidence of the hours completed. This can be achieved by providing a photocopy of the original or returning to the relevant placement area and recording a duplicate copy from the placement areas records, this will need to be re-signed by mentors and the link lecturer (this is a lengthy process and one that can cause a lot of stress therefore it is best to keep copies of all that you submit). If you are unable to provide evidence of hours completed you will have not meet the practice module assessment criteria and will therefore fail the module. You will have to repeat any hours that are missing from the records.

If you do NOT complete and submit the record sheet for direct care hours (nursing, Midwifery and ODP students) you risk not being able to progress into subsequent years of the programme and final year students will not be able to graduate.

3.15 HOW ARE MY PRACTICE HOURS VALIDATED?

The Link Lecturer will review the record sheet for direct care hours (nursing, midwifery and ODP students, which can be downloaded by students via the links on their PEMS homepage) for clarity and accuracy.

They will sign the sheet and it is at this stage that it can be submitted for module assessment. It is your responsibility to arrange a time with the link lecturer to ensure that verification is in advance of the practice module deadlines. The practice module handbooks will indicate the deadlines for placements ending and provide site specific information regarding paperwork submission.

The practice module leaders will review your submission of the hours record sheet against the module assessment criteria (additional assessment criteria will also be reviewed). The practice module leader records practice module pass/fail on the relevant mark sheets and this is submitted to the Subject Exam Committee (SEC) for ratification as part of the Undergraduate Modular Programme (UMP) system. You will then be informed of your results.

The practice modules also utilise a review process called moderation. Moderation is a quality audit process that aims to ensure consistency and commitment by assessors across the range of student work submitted for assessment. Internal moderation is carried out by peer appraisal within a defined course/ programme team; external moderation is provided by external examiners approved by the University.

You may 'carry over' a maximum of 30 hours. So, for example, if you work 30 hours over and above the required number for semester one, you may use these hours to count towards your semester two placement hours. You must make up the 30 hours by the end of the year.

3.16 HOW CAN I GIVE FEEDBACK ABOUT MY PRACTICE LEARNING EXPERIENCE?

You are asked to complete a placement evaluation form at the end of each of your practice experiences. These will feed into each module evaluation and into Subject Committee meetings so that issues can be addressed and good practice can be shared. Placement evaluation reports are addressed by the Midwifery Subject Committee and by the Faculty Academic Enhancement Standards Committee (FAESC). Feedback is also shared with the Trust via the Maternity Practice Education Forum (MPEF) meetings applying a feedback loop process.

4 Roles and Responsibilities

4.1 WHAT ARE MY ROLES AND RESPONSIBILITIES AS A STUDENT MIDWIFE?

You are enrolled on a programme designed to enable you to acquire and apply knowledge, therapeutic skills and clinical reasoning skills according to your developmental stage in the programme. You will be encouraged to participate in planned learning activities and engage in self-directed learning and open communication in order to meet module learning outcomes and fulfil educational expectations for the particular discipline you are undertaking.

You are required to:

- Demonstrate professional behaviour that is consistent with the Standards of Conduct Fitness to Practise: Pre-registration Health and Social Care Students www.brookes.ac.uk/Documents/Practice-Education/Standards-of-Conduct/Standards-of-Conduct-Pre-reg/
- Assume primary responsibility for meeting the learning outcomes of practice education, participating fully in the practice experience, continually evaluating your own performance by self-critiquing, seeking feedback from the mentors, and by monitoring progress towards stated objectives.
- Recognise your own limitations and seek help appropriately.
- Prepare yourself appropriately for the practice placement experience.
- Inform the mentor or suitable person of any factor that may limit your performance or of any problem that may arise during your placement activities that has an impact on patient contact or on your well-being or performance. You may choose the first contact to be the Link lecturer concerning any problem.
- Inform the Link Lecturer if you are assigned to a mentor who is: (a) a close friend or relative or (b) a close friend or relative works or is a patient, or any other issue that may be interfering with the learning experience or placing you in a situation where there might be a conflict of interest.
- Maintain your Practice Assessment Document (PAD) and keep it safe.
- Inform the mentor and/or other appropriate personnel immediately in the event of any unusual incident occurring during patient intervention either to the patient or yourself.

4.2 WHAT ARE THE ROLES AND RESPONSIBILITIES OF THE MENTOR?

Mentors are practice placement staff who will have met the criteria for being a practice assessor (mentor), and who will facilitate your learning by creating a climate which promotes the development of knowledge, skills, behaviours and attitudes relevant to a professional midwife. Their role involves integrating a student into the practice setting, modelling professional practice behaviours, facilitating student participation and learning and liaising with appropriate University personnel.

Their initial point of contact with the university is with the link lecturer. They can also contact the Placement Lead who is supported by the Head of Practice Education, who oversees the practice experience and placement learning for students on all pre-qualifying professional practice programmes within the Faculty of Health and Life Sciences.

Mentors are required to:

- Be accountable for the professional standards of practice setting and their practice.
- Keep patient and student confidentiality according to faculty and professional body policies/codes.
- Reinforce to all students in their practice hours the requirements of health and safety practices in hospital departments and be accountable for their implementation.
- Be familiar with all learning outcomes of the practice modules and support students in all aspects of these.
- Co-ordinate the organisation and implementation of the specific practice education experience at an appropriate academic level within a particular clinical context, such that students are enabled to meet the module learning outcomes (to include the provision of information to students and setting in place any necessary induction period).
- Coordinate/provide students with supervision and formal/informal teaching in practice, give students feedback regularly, based upon their supervisory experience of the student and feedback from other staff with whom you may have worked, using the student's practice assessment document (PAD).
- Consult with the link lecturer or Placement Lead as appropriate, to discuss concerns and to evaluate students' progress.
- Take responsibility and be accountable for the students' summative practice assessment.
- Accept responsibility for facilitating students' practice education and learning.

4.3 WHAT ARE THE ROLES AND RESPONSIBILITIES OF THE LINK LECTURER?

Link lecturers provide educational support to enable students and mentors to achieve learning outcomes for a particular programme/course. They liaise with placement staff, foster partnership and information exchange between the university and practice areas, and offer educational direction and support to students and practice assessors. Link lecturers monitor placements and provide a quality assurance role. They are accountable to the Programme Lead (this may be delegated to the Placement Lead as appropriate).

Please refer to the link lecturer standards:

<http://www.hls.brookes.ac.uk/images/plu/link-lecturer-standards-november-2017.docx>

4.4 WHAT SHOULD I DO IF I WITNESS AN ACCIDENT OR AN INCIDENT?



You should report any incidents or accidents that occur. This obligation applies within the placement areas in which you are working and when you are occupying Oxford Brookes University accommodation.

Our university is signed up to the Speak out Safely Campaign details of which may be found here: <http://www.hls.brookes.ac.uk/speak-out-safely>

If you witness an incident that is detrimental to patient care/treatment, you have an obligation to safeguard the patient.

Guidelines for raising and escalating concerns about practice:

<http://www.hls.brookes.ac.uk/peu/guidelines-for-managing-concerns-in-practice-placements>

You may also wish to discuss incidents from practice with your named Supervisor of Midwives (see Midwifery Website Moodle pages for reminding yourself of contact details for your supervisor) or your academic adviser. You may also find information on the NMC website regarding raising concerns: <http://www.nmc-uk.org/Nurses-and-midwives/Raising-and-escalating-concerns/>

Principles to follow if a pre-registration student is involved in an incident:

<http://www.hls.brookes.ac.uk/peu/principles-to-follow-if-a-pre-registration-student-is-involved-in-an-incident>

Any accident that occurs to you whilst in your placement, or while you are on University premises, must be recorded on an accident form. These are available on each site. Please send a copy of the completed form to your Link Lecturer within 48 hours of completion.

Guidance on writing statements can be found on:

<http://www.hls.brookes.ac.uk/images/plu/peg-statement-writing-for%20students-2016.docx>

4.5 WHAT SOURCES OF SUPPORT ARE AVAILABLE TO ME DURING MY PRACTICE PLACEMENT?

The key people available to support you during your practice learning experience are your mentor and your link lecturer. The roles and responsibilities of the mentor and sign-off mentor are outlined on the PEU website:

<http://www.hls.brookes.ac.uk/images/pdfs/plu/guidance-on-sign-off-mentor-role-nurses-midwives-jan-2016.pdf>

Remind yourself of these before the commencement of each placement. In most circumstances your link lecturer will make themselves known to you before you commence your placement. It is worth remembering that open and honest communication is the key to successful relationships with your mentor and your link lecturer and you should keep them informed of any problems you are experiencing. However, if you require any additional support you should contact your academic supervisor and/or student support worker who are available to you for support throughout your programme of study.

5 Appendices

5.1 APPENDIX 1: USING REFLECTION TO LEARN FROM YOUR EXPERIENCE

Skills for Reflection

Before you begin to use some of the reflective frameworks to guide your reflection, take a few minutes to read and think about the skills required for reflection and reflective writing:

- Self-awareness is the foundation skill upon which reflective practice is built. It underpins the entire process of reflection because it enables people to see themselves in a particular situation and honestly observe how they have influenced the situation and how the situation has affected them. Self-awareness enables a person to analyse their own feelings, beliefs and values, as a part of the social world. In essence, it requires an exploration of how a situation has affected you and how you have affected a situation.
- Description is an opportunity to tell 'your story'. Good description allows you to recollect the important events and features of your practice. It involves the ability to recognise and recollect, significant events, and key features, of an experience, and to give a comprehensive, yet concise account of the situation.
- Critical Analysis is a key skill for both reflective practice and academic study.
- Critical analysis involves separation of a whole into its component parts and detailed examination of those parts, in order to make judgements about the strengths and weaknesses of the different parts, as well as the whole! Using a metaphor here is helpful. Imagine yourself knocking down a brick wall, you stand there mallet in hand and gaze at it purposefully. At this stage it is just a pile of bricks in need of demolition. After you've exerted yourself knocking it to the ground, you start to see different things that previously you had not noticed made up the wall – the crumbling mortar that held it together, various very small creatures that had until now had made it their home, the odd bit of graffiti, the demo' posters that someone had stuck on it. And, of course the bricks! The point here is that through looking a little closer you can begin to look at the different parts that made up your wall as well as the whole.

The skill of critical analysis is not easy so don't lose heart if you don't get it straight away, use your mentor/link lecturer to help you. In summary, it involves the following activities:

- Identifying existing knowledge relevant to the situation.
- Exploring feelings about the situation and the influence of these.
- Identifying and challenging assumptions made.
- Imagining and exploring other courses of action.

- Synthesis is the integration of new knowledge with previous knowledge. You can use synthesis in a creative way to solve problems and to predict likely consequences of actions.

Essentially synthesis involves:

- Building up ideas into a connected and coherent whole; it is about original thinking and creativity. (Think about how you would build up a brand new wall!).
- Integration of new knowledge, feelings or attitudes with previous knowledge, feelings or attitudes; it leads to fresh insights or new perspectives on practice.
- Evaluation encourages you to make a judgement about the value of something. Synthesis and evaluation are crucial in the development of new perspectives and to avoid making the same mistakes again.

Tips on Reflection and Reflective Writing

Finding someone to reflect with

A colleague, mentor or supervisor can provide a sounding board, open up different perspectives and provide support and guidance. It is helpful to find someone who already has experience of using reflection and who is someone that you trust, if you are going to share and explore your experiences and feelings. The coaching and facilitation role cannot be ignored in the reflective process since it is very easy to slip into non-critical, self-affirmation without it.

Reflective discussion with colleagues is also something that is almost taken for granted or not given the prominence that it deserves. Some people have reflective buddies with whom they regularly discuss their practice. Positive work environments also foster a climate where challenge is expected but supportive discussion is also encouraged. This type of discussion may not be labelled reflection by purists, but is part of the process of enquiry in order to move on one's thinking and practice.

The key thing is to reflect with people you respect and whose opinion you value and to find an environment where you can be up for a challenge.

Developing your reflective writing

Keeping a regular diary is an extremely useful tip, since the memory of events can fade quickly, even for those with the most photographic of memories. You may find it helpful to build up a personal repertoire of experience in your diary which you will be able to use to reflect back on and draw from, as you gain in experience. It is worth setting time aside to write in your diary in a form that feels comfortable for you. Using an attractively bound file or book in which to record your reflections may promote your motivation to write. You could split each page; using the left

hand side to write up your diary and the right hand side for further reflections, analysis and notes. Try writing down exactly what was said; sentences and key phrases, in order to capture the situation. You may wish to record experiences concerning your own patients or situations that seemed dramatic or special in practice (don't forget confidentiality issues). However, it is possible to miss out on seemingly routine or mediocre events which, on reflection, could prove to be useful learning experiences. Diary keeping requires motivation and commitment; some people find it easier to do than some and others just don't get along with it. The most important thing is to find a method of contemplating and recording your experiences that works for you.

Practical Advice for Reflective Writing

- Use a reflective framework -stick it on your notice board above your desk where you study; refer to it as you work on your first jottings.
- Get something down on paper as early as possible, not necessarily something academic or part of assessed work but something you can check out with a mentor in the first instance.
- Keep a reflective diary - write down what happened and why, what did I learn and what would I do next time?
- Look back over your diary - use it to inform the academic work required of you.
- Develop a repertoire of practice to draw on, store up experiences that you could use later in your reflective work, by making notes, jotting things down so that important experiences are not lost.
- Get to know your mentor - use opportunities for reflective conversations.
- Get to know your link lecturer, and make the most of any individual or group opportunities to get feedback.
- Write down some reflection, then leave it for a while, you may find it easier to be critical on your return.
- If you are using a framework - refer to it and ensure all stages are covered in order to complete your analysis.
- Go deep, not wide, in your analysis.
- Live with lack of perfection - realise you won't always achieve the ideal, do what you can with some sense of direction.
- Seek out colleagues who support you.

Further information:

<http://www.brookes.ac.uk/students/upgrade/study-skills/reflective-writing/>

<https://www.rcm.org.uk/news-views-and-analysis/analysis/how-to-keep-a-reflective-journal>

5.2 APPENDIX 2: MEDICINES MANAGEMENT POLICY



BSc Hons Pre-registration Midwifery

BSc Hons Post-experience Midwifery

MSc Pre-registration Midwifery

Medicines Management Policy

MEDICINES MANAGEMENT POLICY FOR MIDWIFERY STUDENTS

Oxford Brookes University and Oxford University Hospitals NHS Foundation Trust

Part 1

The main Acts of Parliament which control the administration and use of medicines are:

[The Medicines Act 1968](#)

[The Misuse of Drugs Act 1971](#)

[The Human Medicines Regulations 2012](#)

Within their professional role, midwives can only supply and administer medicines without the need of a prescription when there is a:

Midwives Exemption (ME) or

Patient Group Direction (PGD)

What are midwives exemptions?

Registered midwives may supply and administer, on their own initiative, any of the substances that are specified in medicines legislation under midwives exemptions, provided it is in the course of their professional practice. (NMC 2011:2).

Click [here](#) to see the current list of midwives exemptions.

What is a patient group direction?

A Patient Group Direction (PGD) is a written instruction for the sale, supply and/or administration of medicines to groups of patients who may not be individually identified before presentation for treatment. (NHS 2015).

An important part of a midwife's role is to understand medicines management, particularly what a midwife can and cannot supply and administer. The professional standards expected of midwives are contained in the Nursing and Midwifery Council's [Standards for Medicines Management](#) (NMC 2010).

The NMC Standards for Preregistration Midwifery Education state that midwifery students are required to:

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. Methods of administration will include:

Oral

Intravenous

Intramuscular

Topical

Inhalation

Applying the NMC standards alongside local trust policy means that, without exception:

- All midwifery students **must be directly supervised** whilst administering any medicine.
- All documentation completed by midwifery students relating to administration of a medicine must be countersigned by a registered midwife.
- All drug calculations by a midwifery student must be checked by a registered midwife prior to administration.

Despite the legislation and standards, there has been confusion around midwives' responsibilities in relation to the supply and administration of medicines, including Midwives Exemptions, Patient Group Directions (PGD) and relevant statutory legislation. There are also some key exclusions for midwifery students. This policy therefore aims to clarify what is expected of midwifery students in practice throughout their programmes of study.

Part 2

Policy for all midwifery students

Midwives Exemptions

- The Medicines and Healthcare products Regulatory Authority (MHRA) require that the midwife supervising the administration of medicines by a student midwife must have undertaken an approved mentorship programme and be a sign off mentor.
- The sign off mentor must countersign the administration record.

- Midwifery students may administer all drugs provided under the midwives' exemptions list **except controlled drugs.**

Prescribed Drugs

Midwifery students can administer all prescribed drugs under the direct supervision of a registered midwife, including controlled drugs (dependent on stage of programme; see part 3 below).

PGDs

Midwifery students cannot supply or administer any medicinal product against a PGD.

However, they can be expected to understand the principles and be involved in the process as a participant observer.

In addition:

Midwifery students may be involved in the process but cannot administer or commence any intravenous fluids or intravenous drugs.

Midwifery students cannot administer epidural top ups during their programme.

Part 3

Specific policy for pre-registration BSc and MSc midwifery students

First year

First year midwifery students must not administer any medicine during their first semester. They may only administer intramuscular injections after the relevant theoretical session has been attended in the university skills labs. during semester 2.

Second year

Year 2 midwifery students may only administer Prostin after the relevant theoretical instruction has been attended in Semester 2.

Third year

Year 3 midwifery students can administer **prescribed** controlled drugs under the direct supervision of a registered midwife after they have had the relevant theoretical instruction. Third year midwifery students may be the second checker when receiving controlled drugs on the ward or conducting the daily check of controlled drug stock.

Part 4

Policy for post-experience BSc midwifery students

Although post-experience midwifery students are registered nurses, they are **students** whilst on their programme and must therefore adhere to Parts 1 and 2 of this policy.

However, post experience midwifery students may:

- Administer **prescribed** oral or IM controlled drugs under the direct supervision of a registered midwife from the start of their programme.
- Administer Prostin after successful completion of the first year of their programme.
- Second check but not give intravenous drugs or fluids.

If an intravenous competency certificate is held within the OUHT prior to commencing the programme, it will not be necessary to repeat the training for this on successful completion of the programme.

First approved December 2012 Clinical Health in Practice Group.

Updated and amended May 2016 by Sarah Snow, Lead Midwife for Education and Jackie Couves, Supervisor of Midwives.

Practice examples

Jane is a midwifery student in year 2 and currently placed on DS.

Jane is caring for Mandy who has been admitted in spontaneous labour and is requesting analgesia.

One of Jane's objectives for this placement is to develop her skill and competence in administration of intramuscular injections. The medications routinely administered on DS are administered under Midwives Exemptions; however, some are set up as PGDs.

In order to gain experience and adhere to the medicines policy, Jane's sign off mentor could:

- Request that the on call doctor prescribes all the medication required for the care of Mandy.
- If this is not possible, for example the doctor is unavailable; Jane can administer medications under midwives exemptions when supervised by her sign-off mentor, with the exception of controlled drugs. Jane's mentor must countersign all Jane's medicines administration records.
- The drugs which are under PGDs cannot be administered by Jane, even under direct supervision, and must always be administered by her sign off mentor (or other registrant).

Laura is a post-experience (short course) student, currently placed on DS in her final semester. Laura is caring for Flo whose labour is being augmented by a syntocinon infusion.

Laura's mentor goes off for a short break, asking Laura as she leaves the room to increase the syntocinon infusion in line with the policy and to continue monitoring Flo's progress.

Although Laura is a registered nurse, she must not increase the syntocinon infusion because:

- She is currently a midwifery student, not a practising nurse, and is therefore bound to the student medicines management policy.
- The policy states that midwifery students may not administer IV medicines/infusions at any stage of their programme.

The administration of IV therapies is a post-registration skill and therefore all midwifery students receive theoretical and practical instruction at the end of their programme to help support their on-going development as a newly qualified midwife.

If post-registration students, like Laura, already hold an intravenous competency certificate within the OUHT prior to commencing the programme, it may not be necessary for them to repeat this training.

**MEDICINES MANAGEMENT POLICY FOR MIDWIFERY STUDENTS
SUMMARY**

Competency	Year1	Year 2	Year 3	Short Course
Does not administer any medicines	During semester 1			
Administer oral, inhalational, subcuticular and rectal preparations	During semester 1 following theoretical instruction	Yes	Yes	Yes
Administer IM injection	During semester 2 following theoretical instruction	Yes	Yes	Yes
Administer Prostin	No	During semester 2 following theoretical instruction	Yes	During year 2 following theoretical instruction
Administer Controlled Drugs*	No	No	Yes following theoretical instruction	Yes
Administer Epidural top-ups	No	No	No	No
IVI medicines e.g. Syntocinon	No	No	No	No

***NOT under Midwives Exemptions**

5.3 APPENDIX 3: LINK LECTURER CONTACT DETAILS

Midwifery Link Lecturers - August 2018

Clinical Area	Link lecturer/s
Delivery Suite, MAU, Spires	Louise Hunter lhunter@brookes.ac.uk
	Katherine Palles-Dimmock kpallesdimmock@brookes.ac.uk
Observation Area	Katherine Palles-Dimmock kpallesdimmock@brookes.ac.uk
Level 5 and Level 6	Robb Kightley rkightley@brookes.ac.uk
Oxford City Teams	Kirsten Baker kirstenbaker@brookes.ac.uk
Level 7 and Wallingford Placement & Preparation for Practice Co-ordinator	Sarah Fleming sfleming@brookes.ac.uk
Witney, Wantage, Chipping Norton, Didcot	Ethel Burns eburns@brookes.ac.uk
Abingdon	Jane Carpenter jcarpenter@brookes.ac.uk
Banbury and Bicester	Rennie Boreham rboreham@brookes.ac.uk

5.4 APPENDIX 4: PLACEMENT AREA CONTACT INFORMATION

Delivery suite, JR

Ellie McIntosh allocates mentors to students in this area. As DS is the one clinical area that tends to see most changes in off duty and current pool of sign off mentors, students are requested not to contact DS directly for details of their off duty and mentor/s. Ellie will release the first week's off duty/mentor allocation to the link lecturers in the first instance, then this will be forwarded to the relevant students. Shifts will either be day shifts (7:30am to 8pm) or night shifts (7:30pm to 8am). Note that this may be quite close to your actual placement start date. If you have special circumstances or requests that you would like to be taken into consideration, please email Ellie - eleanor.mcintosh@ouh.nhs.uk - and she will do her best (but cannot promise!) to accommodate them.

The Spires, JR

Pat Hutson allocates mentors to students in this area. Please phone the Spires on **01865 221666** about 2 weeks before your placement starts, to find out what shifts you will be working.

Level 5, JR

Ward managers Jane Hamilton and Cathy Brawn allocate mentors to students. Please phone the ward a fortnight before the start of your placement in order to find out who your mentor is, and therefore what shifts you will be working. The number is **01865 221886** or **01865 221880**.

Level 6, JR

Ward managers Alison Wright and Helen Ranson allocate mentors to students. Please phone the ward a fortnight before the start of your placement in order to find out who your mentor is, and therefore what shifts you will be working. The number is **01865 221721** or **01865 221722**. Alternatively, visit Level 6 in person and look into "off duty folder" if allocation of mentors available.

Level 7, JR

Ward manager, Sandra Oakes, allocates mentors to students. You can phone the ward approximately 2-3 weeks before the start of your placement in order to find out who your mentor is and what shifts you will be working. The number is **01865 221663**.

Observation Area, JR

Ward managers Amanda Lee (amandaj.lee@ouh.nhs.uk) and Susan Marks (susan.marks@ouh.nhs.uk) allocate mentors to students. You can phone the ward approximately 2-3 weeks before the start of your placement in order to find out who your mentor is and what shifts you will be working. The number is **01865 221996**.

Banbury Horton Hospital

The managers are Lesley Helyer (MLU) and Emma Rigby (antenatal clinics/DAU). Please phone the clinical area 2-3 weeks before the start of your placement to find out who your mentor is and what shifts you will be working. MLU number is **01295 229459**.

Banbury Community

Lesley Helyer is Banbury Community Team Lead who allocates mentors to students. Please email her, three weeks before your placement is due to start, for details of your mentor and the shifts you will be working (lesley.helyer@ouh.nhs.uk).

Breastfeeding Week

In your bf week, you should attend at least 1 breastfeeding clinic, either at Banbury, Chipping Norton or the JR. You can book yourself into this clinic through a new shared diary, available via a link on the breastfeeding section of the midwifery moodle page.

Please do not book yourself in more than a month in advance, as clinic dates may change. By the same token, don't leave it til the night before, as the Infant Feeding Team get requests from all over the world to come and see them at work, so you may find all the slots have gone.

For the rest of the week, you can choose to attend 1 or 2 drop ins that are local to you, or the ones in the JR. You should continue to attend your normal placement around these. Don't forget to record your attendance in your breastfeeding portfolios, and to get your hours sheets signed.

The shared diary also contains information about other drop ins that you may wish to attend. You should always contact the session facilitator before turning up. I would like to make this a collaborative document, so if you know of other breastfeeding drop ins or classes in your locality, and they are happy to have students observe, please add their details (with the facilitator's permission!)

Zumba 4BUMP

This is a community engagement initiative led by OxBUMP research lead, Lesley Smith and Ethel. It comprises one hour of Zumba dancing alongside pregnant women and new mums, followed by a half hour of chat on topics and questions raised by the attending women. The dancing is led by Zumba instructor, George Martini, and has been tailored with pregnancy in mind. <https://clubbump.org.uk/zumba-4-bump/>

Please note that you are required to attend a minimum of one Zumba 4BUMP session per year. You can come along at any time during the year, and to book, please email Ethel - eburns@brookes.ac.uk at least one, ideally two weeks beforehand so that she can inform you of any schedule changes.

There is one Zumba 4BUMP session per week on Saturday morning, from 10-11.30 at the Methodist Church Hall, 40 High Street. **Witney. Oxon. OX28 6HG**

Oxford City Community

Oxford city midwives comprise two teams, Isis and Blenheim, serving the South and East of the city and the North and West respectively. The office locations for each are as follows:

Isis: Florence Park Children's Centre, Rymers Lane, OX4 3JZ, tel: 01865 779284

Blenheim: Level 7, The Women's Centre, John Radcliffe Hospital tel: 01865 220457

though many of the midwives start their day at a clinic based in a GP's surgery.

Clare Alexander is the team leader for Blenheim, and Pauline Ellaway the team leader for Isis. The team leaders will do the allocations, normally notified via the Link Lecturer.

Once you receive an e-mail from the Link Lecturer with your named mentor, please e-mail them ASAP directly asking for your shifts (e-mail follows a formula: name.surname@ouh.nhs.uk).

Vale Community Team (Abingdon and Wantage)

Debbie Wells is the manager for the Vale Community team: debbie.wells@ouh.nhs.uk (NB: Manager from September 2018 to be confirmed)

Abingdon community are based in the Midwives Office in Abingdon Hospital, Marcham Road, Abingdon OX14 1AG. The office number is 01865 904876.

Wantage midwives are based at the midwifery led unit in Garston Lane, Wantage OX12 7AS. The office number is 01865 904832.

You will receive an email from the link lecturer with your named mentor, and will be provided with contact details for them. You can then contact your mentor directly to confirm your shifts.

Chipping Norton Midwifery led unit

Lead midwife is Amanda Anderson - amanda.anderson@ouh.nhs.uk . The unit's telephone number is 01608 697930, and the address is Russell Way, Off London Road, OX7 5AU.

The link lecturer will email you in advance of your starting date in these areas and put you in touch with the relevant midwife/midwives who shall mentor you during your placement.

Bicester community midwife team

Lead midwife is Louise Grenstead - louise.grenstead@ouh.nhs.uk. The team's office number is 01869 243763, and the address is 5a Lower Farm Barns, Bainton Road, Bucknell, Nr Bicester, OX27 7LT.

The link lecturer will email you in advance of your starting date in these areas and put you in touch with the relevant midwife/midwives who shall mentor you during your placement.

Witney community midwife team

Lead midwife is Jane Roberts - jane.roberts@ouh.nhs.uk . The team's office number is 01993 708742, and the address is Witney Community Hospital, Welch Way, Witney, OX28 6JJ.

The link lecturer will email you in advance of your starting date in these areas and put you in touch with the relevant midwife/midwives who shall mentor you during your placement.

Wallingford and Didcot community midwifery teams

The Wallingford community midwifery team covers the localities of Wallingford, Thame, Wheatley and Didcot.

The Lead Midwife is Jan Corbishley - janet.corbishley@ouh.nhs.uk .

The address for Wallingford Midwife Led Unit is St George's Ward, Wallingford Community Hospital, Reading Road, Wallingford, Oxon OX10 9DU and the telephone number is 01491 826037.

The Thame midwives are based at Trinity Health Centre, East Street, Thame, Oxon, OX9 3JS; the Wheatley midwife is based at Moorland House Surgery, London Road, Wheatley, Oxon, OX33 1YJ. Please contact Jan Corbishley ahead of your placement for details about your mentor and off duty.

Short Placement Areas

Maternity Assessment Unit, level 2, Women's Centre

The manager is Laura Jones and both she and her colleague Jane Ray manage the off duty. Please contact either Laura or Jane to discuss your shifts. You can call MAU on 01865 220221.

Or email Laura: laura.jones@ouh.nhs.uk or Jane: jane.ray@ouh.nhs.uk

Fetal-maternal Medicine Unit, level 6, Women's Centre

The manager is Beth Albert, and you can contact her two weeks prior to your placement in order to discuss your working pattern. The FMU phone number is 01865 221711 or you can email Beth: beth.albert@ouh.nhs.uk

Newborn Care Units

Lesley Mills organises these placements, and will contact students directly to inform them of their shifts. Lesley can be contacted by email should you need to: lmills@brookes.ac.uk or lesley.mills@ouh.nhs.uk

Independent Midwives

Rachel Fitz-Desorgher will co-ordinate your placement with Henley Birthcare independent midwives. Rachel prefers to be contacted by phone/text on 07940166673.

Gynaecology Theatres, level 1, Women's Centre

Tina Odgers organises midwifery student placements, and can be contacted on 01865 222013 or by email: tina.odgers@ouh.nhs.uk

Gynaecology Theatres, Horton Hospital

Val McAvoy organises these placements. She can be contacted by phone on 01865 231539 (West Wing) or 01295 229317 (Horton) or email: valerie.mcavoy@ouh.nhs.uk

Wendy Randall, Consultant Midwife, Women's Centre

Wendy runs the 'Mode of Birth' clinic, and can be contacted via email to arrange an opportunity for you to shadow her: wendy.randall@ouh.nhs.uk

Annie Roberts, Antenatal and Newborn Screening Co-ordinator, Level 5, Women's Centre

Annie can be contacted via email: anne.roberts@ouh.nhs.uk and is happy to students to arrange to shadow her. Annie works Monday to Friday.

Jackie Hitchman, Newborn Hearing Screening Programme, Level 5, Women's Centre

Julie is happy to offer students a half day working with her and the team from 9am to midday. Please contact her via email to arrange this: Jackie.hitchman@ouh.nhs.uk

Antenatal Clinic, Level 1, Women's Centre

Cheryl Keeble and Emma Rigby lead this clinic. They can be contacted by email to arrange shifts:

cheryl.keeble@ouh.nhs.uk and emma.rigby@ouh.nhs.uk

Antenatal Clinic and Day Assessment Unit, Horton Hospital

Cheryl Keeble and Emma Rigby lead these clinics. They can be contacted by email to arrange shifts:

cheryl.keeble@ouh.nhs.uk and emma.rigby@ouh.nhs.uk

ECV Clinic, Level 2, Women's Centre

Anita Hedditch leads this clinic. She is happy to try and arrange for students to attend, although this isn't always possible. Her email address is anita.hedditch@ouh.nhs.uk

Ultrasound Department, Level 4, Women's Centre

Honor Stobart is the manager for this department. She can be contacted by email:

honor.stobart@ouh.nhs.uk

Updated 26/07/18