



The MINT Project

Midwives IN Teaching

Evaluation of whether Midwife Teachers bring a unique contribution particularly in the context of outcomes for women and families

SUMMARY

April 2009 – September 2009

1.0 BACKGROUND

The Nursing & Midwifery Council exists to safeguard the health and wellbeing of the public and sets the standards of education, training and conduct that midwives need to deliver high quality healthcare consistently throughout their careers.

Over 50% of pre-registration student learning is undertaken in NHS funded maternity units; whilst universities have limited control over the environment of care provided by individual maternity units, midwife teachers (MTs) have a key role in influencing student learning in both academic and practice environments. The term 'midwife teacher' is used throughout to reflect the NMC definition although it is recognized that different titles are used in different organisations.

NMC education standards (NMC 2009) are explicit in their expectations of the Lead Midwife for Education (LME) and the responsibility of MTs in the application of subject knowledge to midwifery practice

This summary provides an overview of an NMC commissioned study, and the work undertaken so far.

2.0 OBJECTIVES & METHODS

The aim of the project is to evaluate whether Midwife Teachers (MTs) bring a unique contribution particularly in the context of outcomes for women and families. This aim is to be achieved through:

1. Identifying the various models for delivery of pre-registration midwifery education in the UK.
2. Gathering information about specific contributions made by midwife teachers.
3. Evaluating whether these variables affect the quality of care that qualified midwives can provide to mothers and their babies.
4. Determining the value brought by midwife teachers regardless of the model of education provision.

5. Developing metrics to quantify the value brought by midwife teachers.

The project is being completed in three phases over an 18-month period (March 2009 – September 2010). Each phase focuses on particular project objectives while still contributing to the overall aim.

- Phase 1 : On-line UK wide survey of LMEs, MTs, and Local Supervising Authority Midwifery Officers (LSAMOs) (May – August 2009)
- Phase 2 : Case study research (June 2009 – March 2010) undertaken within six UK universities to include: data collection through questionnaires & Focus Group Interviews (FGIs) (students); completion of Activity Analysis Tool & FGIs (MTs); and individual interviews with pre-registration Programme Leads (PLs) and telephone interviews with LMEs.
- Phase 3 : Prospective Diary study (October 2009 – August 2010) of newly qualified midwives during the first three – six months in their first post, supplemented by questionnaires to their respective Preceptors and Supervisors of Midwives (SoMs) and follow up joint interviews with a sample of preceptors and preceptees.

Outcomes of midwifery education from both three year and shortened (18 month) pre-registration programmes are being examined during Phases 2 (Part A – three year courses & Part B –shortened courses) & Phase 3.

3.0 PHASE 1 – NATIONAL SURVEY

Phase 1 survey response rates included 93% (n= 51) from LMEs, 50% (n= 228) from MTs and 88% (n=14) from LSAMOs; the respondents representing all four countries of the UK. The LME and LSAMO contact details are in the public domain and hence the response rates for these two groups relates to the whole population. In order to contact Midwife Teachers for permission to send them a survey to complete, each LME was asked to request e-mail details from all their staff willing to

participate. The response rate of 50% is therefore from the population of MTs who agreed to participate. There is no UK record of the whole population of MTs employed in that role in Higher Education.

A response rate of 50% could be considered reasonable for an online survey; however, the research teams were anticipating a better response since agreement to participate had already been obtained from 456 MTs. All four countries of the UK and nearly all universities are represented in the Midwife Teacher response.

Preliminary results are only available to the MINT team at this early stage of the study.

4.0 PROGRESS ON PHASE 2 – CASE STUDIES

At the time of this summary, Phase 2 (Part A) Case study data have been collected from the six sites; student data from five sites (no long three year programme completing at this time of year on one site). Response rates include: student questionnaires 80% (n=98); student focus groups 67% (n=82); MTs to complete Activity Analysis 58% (n=39); Programme Leads 100% (n=6)

A total of 43 students (35% of total student sample) have volunteered to participate in Phase 3 as newly qualified midwives, although this will be dependent upon them securing jobs in the provider maternity services where Research and Development (R&D) approval has been obtained.

UK wide ethical approval has been obtained to complete Phase 3; however R&D approval from the 17 individual NHS Maternity Units who have/will be employing Phase 3 volunteers poses real challenges for the project team because of delays in some of their processes.

5.0 CONCLUSION

To date good progress has been made and the project is delivering results within the time lines set. The main risk factor to recruitment and participation of all willing volunteers to Phase 3 depends on the success

of team members in dealing with requirements of the local NHS R&D departments and the new midwives securing employment.