



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

**Guideline for the Continuing Professional, Clinical Education and Development Needs and Requirements of the Self-Employed Community Midwife providing Home Birth Services on behalf of the Health Service Executive**

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<b>Revision number</b>	<b>2</b>	<b>Document approved by</b>	<b>Clinical Governance Group for the HSE Home Birth Service, chaired by Mr Bill Ebbitt</b>
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## **1. Guideline Statement**

The Nurses and Midwives Act, 2011 requires midwives to maintain professional competence through participation in continuing professional education and development. This guideline supports, recommends and gives guidance for the approval of the continuing professional, clinical education and development needs and requirements of the Self-Employed Community Midwife (SECM) in order to ensure the provision of a safe, quality service for women and infants availing of the Health Service Executive (HSE) Home Birth Service.

## **2. Purpose**

- 2.1. Defines continuing professional education and development (CPD).
- 2.2. Outlines roles and responsibilities in the provision of the HSE Home Birth Service.
- 2.3. Lists the recommended continuing professional, education and development requirements of SECMs to support optimal clinical care and a quality service for women and their babies in the home setting.
- 2.4. Outlines the approval process for the programmes and development provision for the HSE Home Birth Service.

## **3. Scope**

This guideline's scope refers to the continuing professional, clinical, education and development needs and requirements of SECMs, outlining roles and responsibilities for the HSE, DMO, SECM and Director of Primary Care.

## **4. Legislation, Codes of Practice, Standards and Guidance**

- 4.1. Nurses and Midwives Act, 2011
- 4.2. Health Acts, 1947-2011 and regulations made thereunder
- 4.3. Memorandum of Understanding between the HSE and the SECM (HSE 2014)
- 4.4. Agreement between the HSE and the SECM (HSE 2014)
- 4.5. Safety, Health and Welfare at Work Act, 2005
- 4.6. Safety, Health and Welfare at Work Regulations 1993 to 2013
- 4.7. National Vetting Bureau (Children and Vulnerable Persons) Acts, 2012 to 2016
- 4.8. Criminal Justice Act (Withholding Information on Crimes against Children and Protected Persons) Act 2012
- 4.9. Children First Act, 2015
- 4.10. The Code of Professional Conduct and Ethics for Registered Nurses and Midwives (NMBI 2014)
- 4.11. Children First: National Guidance for the Protection and Welfare of Children (HSE 2011)
- 4.12. Practice Standards for Midwives (NMBI 2015)
- 4.13. The Scope of Nursing and Midwifery Practice Framework (NMBI 2015)
- 4.14. Recording Clinical Practice (NMBI 2015)

This list is not exhaustive and reference should be made at all times to the reference document or database of legislation, codes of practice, standards and guidance (Clinical Governance Group for the HSE Home Birth Service 2018).

## 5. Definitions

- 5.1. **Continuing Professional Development (CPD):** A range of learning activities through which health and care professionals maintain and develop throughout their career to ensure that they retain their capacity to practice safely, effectively and legally within their evolving scope of practice. (Health and Care Professions Council HCP 2012).
- 5.2. **Professional Portfolio:** Organised collection of documents chronicling an individual's career: these accumulated documents may then be drawn upon for jobs or courses, or in order to demonstrate learning. Guidelines for Portfolio Development for Nurses and Midwives, 3<sup>rd</sup> Edition (National Council for the Professional Development of Nurses and Midwives/ (NCNM 2009)).
- 5.3. **Competence:** The attainment and application of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable, compassionate and effective practice as a registered nurse or registered midwife. (NMBI 2015).
- 5.4. **Scope of Practice:** The range of roles, functions, responsibilities and activities in which a registered nurse or registered midwife is educated, competent and has authority to perform (NMBI 2015).
- 5.5. **Relevant:** Appropriate to what is being done or considered. (Oxford English Dictionary Online, September 2015).

Terms and definitions are also outlined in the Quality and Risk Taxonomy Governance Group Report on Glossary of Quality and Risk Terms and Definitions (HSE 2009).

## 6. Roles and Responsibilities

### 6.1 The HSE National Director of Primary Care

shall ensure:

- 6.1.1. The provision of appropriate systems, structures and processes to support, assist, provide for and monitor the SECMs' continuing professional clinical education and development needs and requirements to provide HSE Home Birth Services.
- 6.1.2. That each SECM has undertaken the required CPD to provide a safe and quality service based on best evidence-based practice and are continually updating their CPD.
- 6.1.3. An appropriate standard of CPD provision, ensuring that the providers of programmes and developments are at a recognised standard.

### 6.2 The Office of Nursing and Midwifery Services Director (ONMSD)

shall ensure:

- 6.2.1. The provision of appropriate systems, structures and processes to support, assist, provide for and monitor the SECMs' continuing professional clinical education and development needs and requirements to provide HSE Home Birth Services.

### 6.3 The HSE National Lead Midwife

shall ensure

- 6.3.1. That he/she provides leadership, consultancy, support and guidance to a wide range of stakeholders on all aspects of professional midwifery matters.

### 6.4 The Designated Midwifery Officer (DMO)

shall ensure:

- 6.4.1. That a copy of this guideline is made available to all SECMs and records same.

- 6.4.2. On behalf of the National Director of Primary Care that in the provision of appropriate systems, structures and processes to support, assist, provide for and monitor the SECMs' continuing professional clinical education and development needs and requirements to provide HSE Home Birth Services, appropriate professional support is provided as required to the SECM.
- 6.4.3. That each SECM has undertaken the required CPD to provide a safe and quality-driven service based on best evidence-based practice, and is continually updating.
- 6.4.4. An appropriate standard of CPD provisions, ensuring that the providers of programmes and developments are at a recognised standard and have NMBI approval.
- 6.4.5. The signing of the Patient Safety Assurance Certificate (PASC) by the SECM on an annual basis and that it is recorded appropriately.
- 6.4.6. That monitoring and audit of this guideline is undertaken on a regular basis.

## **6.5 The SECM**

shall:

- 6.5.1. Be required to demonstrate compliance with this guideline.
- 6.5.2. Maintain a portfolio of evidence of CPD for the DMO to sign off on as part of the contractual agreement and MOU to ensure a safe and quality service.
- 6.5.3. Ensure that all developments, education and programmes undertaken are at an appropriate standard and agreed with the HSE and NMBI.
- 6.5.4. Be required to demonstrate CPD to comply with the pathway of care and practice for the HSE Home Birth Services.

## **7. Procedure for Approved and Recommended Continuing Professional, Clinical, Education and Development Needs and Requirements of the Self-Employed Community Midwife**

The SECM shall be required to provide evidence from time to time of:

- 7.1. Relevant midwifery clinical practice as outlined in the MOU and agreement.
- 7.2. Relevant clinical midwifery practice within the past five years.
- 7.3. Attendance and participation at mandatory education and training programmes as determined by the HSE in its MOU and agreement.
- 7.4. Having participated, if deemed necessary, in an approved back-to-midwifery education programme at an approved centre.
- 7.5. The creation and retention of relevant professional records while being mindful of data protection legislation.
- 7.6. Their own portfolio of continuing professional clinical education and development demonstrating that they are meeting their own needs and requirements to practice as an SECM in accordance with the HSE agreement, MOU and best practice.

## **8. Monitoring and Audit**

The HSE shall ensure that appropriate:

- 8.1. Monitoring of compliance with this guideline shall be undertaken by the DMO.
- 8.2. Audit of compliance with this guideline shall be undertaken by HSE professionals.

## **9. Training**

The SECM shall ensure that she/he has sourced appropriate education and training to support the implementation of this guideline.

## **10. Implementation Plan**

The Clinical Governance Group for the HSE Home Birth Service developed this document, which has been approved for implementation by the National Implementation Steering Group for the HSE Home Birth Service. This document will be piloted for a year from the approval date. It will be disseminated by the Designated Midwifery Officers to relevant healthcare personnel and to all Self-Employed Community Midwives who provide home birth services on behalf of the HSE.

## **11. Membership of Working Group**

The Clinical Governance Group (CGG) for the HSE Home Birth Service commissioned a Sub-Group (members below) to develop this document which was then reviewed by the Quality Assurance Sub Group (members below). A final draft was produced by the CGG members and recommended for approval to the National Implementation Steering Group for Home Births (NISG). Following a 12 month pilot of this document, the NISG have approved its revision and implementation.

### **Sub-Group Members:**

Ms Rosemary Ryan, Head of Client Enterprise Risk Management Services, IPB Insurance (Sub-group chair)

Ms Sheila Sugrue, National Lead Midwife ONMSD

Ms Siobhan Sweeney, Designated Midwifery Officer, HSE South & Project Manager CGG

### **Quality Assurance Sub-Group:**

Dr Karen Robinson, Risk Advisor Clinical Indemnity Scheme (CIS) (Sub-group chair)

Ms Brigid Doherty, Patient Focus

Ms Virginia Pye, National Lead for Public Health Nursing (ONMSD)

Dr Edwina Dunne, Assistant National Director, Quality & Patient Safety (QPS)

## 12. Signature Page

I have read, understand and agree to adhere to the attached:

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<b>Print Name</b>	<b>Signature</b>	<b>Area of Work</b>	<b>Date</b>