

Skills for
Health

Apprenticeships in Maternity Services



A RCM
GUIDE
AND
TOOLKIT



The Royal College of
Midwives

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Higher Apprenticeships – important note

Across the United Kingdom there are three levels of Apprenticeships. The highest, in terms of educational achievement, is a Higher Apprenticeship. Broadly Higher Apprenticeships are equivalent to Assistant Practitioner roles and can be developed through Foundation Degrees. Higher Apprenticeships have only recently begun to be developed and at the time of publication **there are no plans to introduce them in maternity services although this may not be the case in the future.**

FOREWORD

The Royal College of Midwives (RCM) is the only professional body and trade union run for and by the maternity team. We have long championed the need of maternity support staff to have access to appropriate learning and development opportunities. We welcome Apprenticeships. Across the United Kingdom they are rightly becoming a growing feature of the NHS workforce. However introducing an Apprenticeship role in any health care service, but perhaps particularly in maternity services, requires careful thought, planning, preparation and on-going support.

Understandably there can be confusions about Apprenticeships: What actually is an Apprenticeship? What do the different levels mean? Are they appropriate for maternity services? What qualifications do Apprentices require? Is financial support available?

This RCM publication, which is supported by NHS Employers and Skills for Health, aims to address these issues. It provides all those concerned with maternity workforce development with the information they need to decide whether Apprenticeships are right for their service. If they do, a step-by-step guide is provided to assist develop and support the role.

The RCM believes that Apprenticeships if introduced appropriately can be an effective means of raising the skill levels and knowledge of maternity support workers, whether existing staff or new recruits.

CATHY WARWICK
General Secretary
RCM

“NHS Employers welcomes this Guide and the RCM’s commitment to supporting the development of maternity Apprenticeships. Apprenticeships provide maternity services with the opportunity to add real value to the development of their support workforce. The best Apprenticeships are developed through partnership working between employers, staff and the College and its representatives, including Union Learning Representatives, locally. I am sure this Guide will help in that process.”

ELIZABETH EDDY
Head of Skills in Employment, NHS Employers.

WHAT THIS PUBLICATION AIMS TO DO

This publication has the following aims:

- To provide clear and accessible information about Apprenticeships
- To explain the rationale for introducing Apprenticeship roles into maternity services
- To provide information on how to develop Apprenticeships
- To explain the learning requirements of Apprenticeships
- To set out the workforce planning implications of introducing Apprenticeships

It is anticipated that the following will find this publication of use:

- Heads of Midwifery
- Midwives
- Training managers
- Human Resource staff
- Directors of Nursing
- Supervisors of maternity staff
- Educations providers
- Commissioners
- Maternity support workers

A full list of references along with sources of further information and contacts are provided at the end of this publication.

1. BACKGROUND

The growth in apprenticeships

Although Apprenticeships have existed in Britain since the Middle Ages, recent years have seen a renewed interest in them as a means of building the workforce's knowledge and skills. Modern day Apprenticeships do not, as was the case in the past, rely on employers alone to provide training and experience: approved education providers now deliver a significant element of Apprenticeships. The various United Kingdom Apprenticeship Frameworks supported by Sector Skills Councils such as Skills for Health, ensure that Apprentices receive high quality and formal job-relevant education, which includes a mix of on the job and off the job learning delivered by approved education providers in collaboration with employers. Funding opportunities vary and are negotiated locally.

Question - What is an Apprenticeship?

An Apprenticeship is a work-based training programme that can be used by both new and existing employees leading to occupational competence. Training takes place both on the job with the support of more experienced staff and off the job in classrooms and/or through distance learning. Apprenticeships result in nationally recognised and regulated qualifications fit for the sector. Apprenticeships are more than just a means of formally training employees. They provide a wide range of work-related skills and knowledge including team working, problem solving and communication skills. Apprenticeship Frameworks set out formal requirements for Apprentices to receive minimum levels of training and contact time with teaching staff.

Some 300,000 people in Britain start an Apprenticeship each year. Over 8,000 of these work in the NHS. Governments across the United Kingdom are committed to increasing the number of Apprenticeships. In England the government has set a target for the economy as a whole of 125,000 further Apprenticeships over the next five years and have pledged a further £250 million a year by 2014/15 to support this growth. In 2009-10 £16 million was allocated by the Scottish government to create a further 7,800 Modern Apprenticeships. This target was exceeded; bringing the total new Apprenticeship starts to over 20,000 - an increase of nearly 90% when compared to 2008-2009. The Scottish Finance Minister announced a record 25,000 new Apprenticeships for 2011-2012.

Alongside the general increase in Apprenticeship in the economy there has also been a substantial rise in the number of Apprentices in the NHS. Between 2008/09 and 2009/10 the number of new Apprenticeships in England rose by 500% from 1,300 a year to over 8,100. The Department of Health has set a target for an additional 6,000 in 2011/12. In 2010 NHS Education for Scotland published *Working to Learn and Learning to Work* encouraging Health Boards to consider introducing Modern Apprenticeships into their workforce. Despite this impressive growth Apprentices are presently a small proportion of the NHS workforce and only a few maternity services have introduced the role.

Across the economy as a whole there are nearly 200 different types of Apprenticeship. These include Apprenticeships in - accountancy, Information Communication Technology (ICT), engineering, veterinary services, hairdressing, floristry and hospitality. While a number of these such as ICT and management are applicable to a range of health care roles, there are also a growing number of specific healthcare Apprenticeships Frameworks developed by Skills for Health, the Sector Skills Council. These include Frameworks for maternity Apprenticeship roles in England and Wales.

Maternity services, workforce challenges and Apprenticeships

“There are clear benefits to the health sector, patients and social context in building Apprenticeships in current roles and developing roles”¹

In 2010 the four United Kingdom Health Departments published the final report of the *Midwifery 2020* programme. This highlighted the pressures and challenges that maternity services face in all four countries. In most parts of the United Kingdom birth rates are rising. Maternal age is also rising, with associated higher rates of complications and adverse outcomes. There are a growing number of multiple births. There is a need to continue to provide women-centred care. Alongside these and other service demands there are significant workforce pressures, particularly shortages of qualified midwives in most parts of the United Kingdom and an increasing trend towards part time working. Furthermore up to 45% of the registered midwifery workforce is due to retire in the next ten years.

Developing the maternity support workforce provides maternity teams with additional capacity and capability allowing midwives to spend more time directly assisting mothers and babies. The RCM's *Maternity Support Workers Learning and Development Guide* published in 2010 highlights ways in which support workers can appropriately complement the role of midwives, address workload pressures and help meet service needs.

Key to developing maternity support staff is ensuring access to appropriate and high quality learning. Apprenticeship Frameworks provide maternity services with

¹ Final Report of the Department of Health National Advisory Committee on Apprenticeships, October 2011.

a complementary model to traditional vocational qualifications to develop their support staff - one that is directly linked to health and service needs. Additionally Apprenticeships can also be a means of increasing workforce diversity by attracting young and disadvantaged people into work in the maternity team. Potential recruits, who may not have considered this type of work to be accessible, may be attracted by an Apprenticeship role.

2. THE VOCATIONAL QUALIFICATIONS SYSTEM

Introduction

Vocational qualifications are work-related qualifications. The vocational qualification system can sometimes appear confusing. There are a plethora of qualifications available to employees each at different levels of educational attainment. This section briefly describes the system and associated frameworks. For further information please see the reference section at the end of this publication.

England, Wales and Northern Ireland

A number of changes have recently been introduced to the frameworks that cover vocational qualification in England, Wales and Northern Ireland. Most work-related health care qualifications are now set out in the Qualifications and Credit Framework (QCF) and regulated by Ofqual. The aim of the QCF is to simplify the vocational qualification system.

Qualifications are placed at the appropriate level of the QCF depending on their degree of educational attainment. QCF levels begin at *Entry* level and rise to Level 8. The levels most relevant to Apprenticeships are:

- Level 1** – equivalent to GCSEs Grade D-G
- Level 2** – equivalent to GCSE Grade A*-C
- Level 3** – equivalent to A Level
- Level 4** – equivalent to Certificate of Higher Education
- Level 5** – equivalent to a Foundation Degree

Units within a qualification also have a QCF level along with a credit value attached to them. One credit equals ten hours of learning. Credits are a means of formally recognising learning achievement. Units within the QCF can be combined structure to provide flexibility for employers and employees seeking work-related qualifications. The QCF levels, as explained in the next section, also distinguish between the different types of Apprenticeship.

A further change is that National Vocational Qualifications (NVQs) have been replaced by QCF qualifications that are described as: Awards, Certificates, or Diplomas depending on their credit values (Award = 1 – 12 credits, Certificate = 13-36 Diploma = 37+).

Scotland

The qualification framework in Scotland, called the Scottish Credit and Qualifications Framework (SCQF), remains unaltered. The SCQF commences at *Entry* level (level 1) and progresses to Doctoral level (level 12). The different levels of qualification that Apprentices achieve within the SCQF distinguish the different types of Modern Apprenticeship in Scotland as follows:

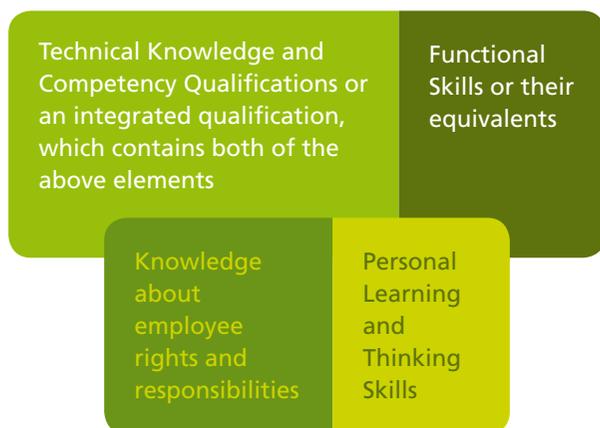
- **Modern Apprenticeship Level 2** – SCQF level 5/6
- **Modern Apprenticeship Level 3** – SCQF level 6/7
- **Modern Apprenticeship Level 4** – SCQF level 8

3. THE ENGLISH APPRENTICESHIP FRAMEWORK

Introduction

Four linked but distinct elements comprise the Apprenticeship Framework in England (see Figure 1, below). Each needs to be completed before an Apprentice can receive an *Apprenticeship Certificate*. The *Specification of Apprenticeship Standards for England (SASE)* published by The Department of Business, Innovation and Skills sets out in detail the minimum requirements that need by law to be met for a recognised Apprenticeship. The actual application of the SASE to the health sector is led by Skills for Health, the sector’s skills council. Frameworks and their relevant components are ‘Issued’ by an Issuing Authority. Skills for Health is the Issuing Authority on behalf of the health sector and has developed all the Frameworks issued to date.

Figure 1: Apprenticeship Framework



Apprenticeship levels

There are three types of Apprenticeships described as Apprenticeship *levels*. Each type relates to different levels of the QCF:

- **Intermediate Apprenticeships** (QCF Level 2)
- **Advanced Apprenticeships** (QCF Level 3)
- **Higher Apprenticeships** (QCF Level 4 or 5)

The various components of each Apprenticeship level is summarised in Figure 2. **At the time of publication there are no plans to develop Higher-level Apprenticeships for maternity staff. This means that maternity support workers will have access to Intermediate and Advanced Apprenticeships.**

Employees normally complete a single Apprenticeship but may also progress through two or even all three levels. It is a matter of local workforce planning linked to local service need which levels are required and whether they stand-alone or provide a linked career framework. In all cases the majority of learning is likely to take place in the workplace as Apprentices gain experience. It is expected that on average each level will take between 1-2 years to complete.

Figure 2: Apprenticeship Levels

Intermediate Apprenticeship: Completing this level provides the employee with a qualification equivalent to five good GCSEs. Apprentices work towards work based learning qualifications such as a level 2 QCF Certificate/Diploma, functional skills in literacy, numeracy (or their equivalents) and relevant technical knowledge qualification as well as having to evidence other components within the Framework.

Advanced Apprenticeship: On completing this level the employee will have a qualification equivalent to two A Levels. Apprentice’s work towards work based learning qualifications such as a level 3 QCF Certificate/Diploma, functional skills at level 2 in literacy, numeracy (or their equivalents) and relevant technical knowledge qualification as well as having to evidence other components within the framework.

Higher Apprenticeships: Apprentice’s work towards work based learning qualifications such as a level 4 or 5 QCF Certificate/Diploma and relevant technical knowledge such as a HND of a Foundation Degree that meets both competence and knowledge elements along with functional skills at level 2 in literacy, numeracy (or their equivalents) as well as having to evidence other components within the framework.

The qualifications component of Apprenticeships

All three levels of Apprenticeship require completion of the following qualifications: Competence, Technical Knowledge and Functional Skills. Competence or Technical Knowledge qualifications may be delivered separately or within a single integrated qualification that include both elements. In the health sector Skills for Health have developed Apprenticeship Frameworks. These include all relevant qualifications and components to meet the needs of the employers and related workforce and are linked to National Occupational Standards². The Frameworks have been developed in collaboration with stakeholders including professional bodies. The following are applicable to maternity support workers:

- **Intermediate level** – Health (Clinical Healthcare Support).
- **Advanced level** – Health (Maternity and Paediatric Support).

Question - What entry routes are there into Apprenticeships?

People can join Apprenticeships from a wide range of routes including from work, work experience, unemployment, school, and college, Young Apprenticeships and with a wide range of qualifications. Apprentices may be current employees or new recruits to the organisation.

The qualification provides an Apprentice with the skills they need to perform the tasks and responsibilities their job requires. Examples for maternity support workers might be supporting and facilitating skills to assist mothers to breastfeed following training to the *UNICEF BFI* standards, or monitoring vital signs and responding appropriately to clinical emergencies in order to maintain safe care. The Technical Knowledge qualification provides the necessary understanding of the Apprentices occupation and industry, as well as an understanding of theoretical concepts and technical functions. The knowledge requirements are included within the qualification.

Question - Do Apprenticeship schemes require a lot of paper work?

Apprenticeships have been designed by the government to have the minimum bureaucracy. Education providers are required to ensure that the training they provide Apprentices is of a high quality and employers need to provide on-the-job training. Help is also available from the *National Apprenticeship Service* and others.

² National Occupation Standards describe the competences that health workers require to undertake their roles. For maternity support workers they include: Communicate with and complete records for individuals, support the health and safety of yourself and individuals, obtain and test specimens from individuals and undertake physiological measurements.

Functional skills

All Apprentices are required to have sufficient functional skills so that they have competence in numeracy, literacy and in some Frameworks ICT. Apprentices who already possess the necessary Mathematics or English GCSEs (or O Level) or A Level or other equivalent qualifications listed within the Framework can be exempted from the functional skills element of the Apprenticeship.

Question - What do Apprentices receive when they have completed the Framework?

Completing an Apprenticeship level means that an Apprentice has successfully passed met all the requirements of the framework. In recognition they receive an *Apprenticeship Completion Certificate*.

Employee Rights and Responsibilities (ERR)

All three Apprenticeship levels require Apprentices to learn about their rights and responsibilities as employees. The learning outcomes from this part of the Apprenticeship Framework are:

- Legal rights in respect of employment, equality and health and safety
- Organisational documentation and procedures including codes of practice
- Where to access information about employment rights and responsibilities including details of additional learning support
- The relevance of the role and available career pathways
- Representative bodies such as the RCM
- Information about the industry, occupation and training and careers
- Issues of public concern that affect the industry

ERR may be delivered as part of an induction programme offered by employers but is assessed through a qualification within the Apprenticeship Framework.

Personal Learning and Thinking Skills (PLTS)

The final element of the Apprenticeship Framework is again common to all three levels. In all cases Apprentices are required to be taught PLTS. The SASE identifies six learning outcomes:

- **Independent inquiry** – for example the ability to investigate information, plan what to and how to do it, to take well-reasoned decisions while respecting different beliefs and attitudes.

- **Creative thinking** – the ability to generate and explore ideas, problem solve and provide imaginative solutions.
- **Reflective learning** – to be able to evaluate one’s strengths and weaknesses, set goals and monitor performance.
- **Team working** – to work confidently with others and form collaborative relations.
- **Self-Management** – this includes: organisation, personal responsibility, initiative, a commitment to learning and an ability to cope with change.
- **Effective participation** – engages with workplace and learning issues and those around them, plays a full part in the life of the workplace and college.

Question - Who delivers the training for Apprenticeships and how is it delivered?

Further Education colleges, independent training providers and (particularly for Higher Apprenticeships) universities may deliver Apprenticeships, however to attract government funding for level 2-3 frameworks, the Apprenticeship Educational Provider must be an approved supplier with the Skills Funding Agency.

Guided Learning Hours (GLHs)

The Apprenticeship, Skills, Children and Learning Act (2009) require Apprenticeship Framework to have requirements for a minimum number of hours of learning. All GLHs outcomes must be clearly evidenced.

4. SCOTTISH MODERN APPRENTICESHIPS

Apprenticeships in Scotland

Apprenticeships are known as the Modern Apprenticeship (MA) programme in Scotland. In the October 2010 publication, *Skills for Scotland: Accelerating the Recovery and Increasing Sustainable Economic Growth*, the government declared that:

“The Modern Apprenticeship programme is crucial to a strong economic recovery for Scotland”.

The Scottish government’s positive approach towards MAs and other components of Scotland’s National Training Programmes is part of a wider policy movement to produce a skilled workforce that is able compete within the increasing international economic. The main focus in Scotland has been the development of 16-19 year-old apprenticeships.

There are currently over 80 Frameworks many of which are relevant to health care including:

- Dental nursing
- Health and Social Care
- Life Sciences
- Pharmacy technicians
- Business and administration
- Hospitality
- Information and Communications Technology
- Management

The aim of the Scottish MA is to combine practical experience within the workplace with a nationally recognised type of formal learning. The MA is similar to other vocational courses in this respect, but it goes further by developing an individual’s skills base outside their core learning area. Every MA Framework contains a Scottish Vocational Qualification (SVQ) at their core, usually at level 2 or 3 but also available at level 4, to provide the trainee with the fundamental knowledge and skills to do their job. This means that every MA is connected to the levels of the Scottish Credit & Qualifications Framework (SCQF). By combining the SVQ with the development of an apprentice’s Core Skills,³ (information technology, numeracy and literacy) and with additional sector requirements, such as Higher National Certificates and Diplomas (HNC /HND), the MA provides an excellent learning solution for new employees that goes beyond traditional vocation qualifications (see Figure 3 below):

Figure 3: The structure of Scottish Modern Apprentices



³ Known as functional skills in England

The MA is available to anyone over the age of sixteen and each MA framework is structured in partnership with the employers and relevant sector bodies to ensure apprentices are adequately equipped to succeed within their training. There are a number of groups involved in the management, delivery and regulation of MAs in Scotland. All MA Centres must be registered with the Sector Skills Council to ensure acceptable standards are met and trainees become sufficiently competent within their roles. The Modern Apprenticeship Group (MAG) is the independent body responsible for the approval of MAs and encouraging best practice among MA deliverers. The immediate delivery of the MA is the responsibility of the approved training provider. Once an MA has been approved, the training provider can apply to Skills Development Scotland (SDS) for funding.

Modern Apprenticeships in health care

In a recent publication developed in partnership by SDS and NHS Education for Scotland (NES) called *Working to Learn and Learning to Work: A Guide to Modern Apprenticeships for NHS Scotland*, the Modern Apprenticeship Programme was described as:

‘a key platform for helping people to establish themselves in a new career’

The NHS is the largest employer in Scotland and the Scottish government sees MAs as a vital way in which to attract and train staff for the NHS Scotland. There are numerous MA Frameworks that relate directly to healthcare including: Dental Nursing, Pharmacy Technicians and Health and Social Care. There are also a number of non-clinical MAs within NHS Scotland such as: Management and Administration.

There are multiple models for MA delivery within NHS Scotland: the Internal Delivery model whereby the employer is entirely responsible for all areas of the MA programme, the External Delivery model whereby the employer contracts out every aspect of the MA and most commonly, the Hybrid model which combines Internal and External model to various degrees. Any NHS Board that wishes to provide an MA must guarantee that all aspects of the approved MA Framework are fulfilled regardless of what model is followed.

To date there have been no examples of maternity MAs in Scotland. Maternity support workers described as Maternity Care Support Workers are currently developed through a national competency framework and associated SVQ level 8 learning programme.

5. APPRENTICESHIPS IN WALES

The Welsh Assembly Government supports Apprenticeships in Wales. In *Skills That Work for Wales* the Welsh Assembly Government committed to expanding and strengthening the Apprenticeship Programme. The Apprenticeships, Skills, Children and Learning (ASCL) Act introduces the Specification of Apprenticeship Standards for Wales (SASW). The SASW sets out the minimum requirements to be included in recognised Apprenticeship Frameworks in Wales and will take effect from August/October 2011.

The Issuing Authorities, designated by Welsh Ministers, are responsible for ensuring that only those Apprenticeship Frameworks, which comply with the SASW, are issued as recognised Welsh Apprenticeship Frameworks. The main components within an Apprenticeship Framework are detailed below:

Figure 4: Welsh Apprenticeship Framework



Vocational Qualifications (competencies and technical knowledge)

Apprenticeship Frameworks must specify qualifications that have been accredited to at least the level of the framework that includes:

- A competence element i.e. the practical competencies required for a specific occupation or job role – at least **10 credits** in Wales
- A knowledge element i.e. the technical skills and theory specifically relating to the occupation or job role together with the knowledge and understanding of the industry and its market – at least **10 credits** in Wales

These may be separate qualifications, or combined into a single, integrated qualification. Where a single integrated qualification is used, the two elements must be separately identified and separately assessed.

Essential Skills Wales (ESW)

- An Apprenticeship Framework **must specify** as a Welsh certificate requirement, ESW qualifications in Communication and Application of Number to at least Level 1 for a Level 2 (Foundation) Apprenticeship Framework and to at least Level 2 for a Level 3 Apprenticeship Framework.
- An Apprenticeship Framework **may specify** as a Welsh certificate requirement, ESW qualifications in Information and Communication Technology (ICT) to at least Level 1 where the Issuing Authority in consultation with employers in the sector and other relevant partners, determines that ICT is required to perform the skill, trade or occupation to which the framework relates.

Employee Rights and Responsibilities (ERR)

- An Apprenticeship Framework must specify the standard of attainment and how it is to be evidenced in the skill, trade or occupation to which the framework relates. It must specify where ERR is located within the framework, for example, whether ERR is a standalone unit or module or if it is contained within another qualification.
- An Apprenticeship Framework must specify the outcomes which an Apprentice is to achieve in the rights and responsibilities of employees in their current occupation and those occupation(s) to which the framework leads.

In addition to the three compulsory components of an Apprenticeship Framework Apprenticeships can also include:

Wider Key Skills

Apprenticeship Frameworks **may specify** the standards of attainment in one or more of the Wider Key Skills of:

- Improving own learning and performance
- Problem solving
- Working with others

if directly relevant to effective performance in either the occupation or the employment sector.

On and Off the Job Training

An Apprenticeship Framework **must specify** the minimum number of on the job training hours and the minimum number of off the job training hours an Apprentice must receive to complete the framework and how these are to be evidenced.

There are three levels of Apprenticeship for those aged 16 and over and employed:

Foundation Apprenticeship, equivalent to five good GCSE passes. The Knowledge and Competency qualifications equate to a Level 2 Diploma on the Credit and Qualifications Framework for Wales (CQFW)

Apprenticeship, equivalent to two A-level passes. The Knowledge and Competency Qualifications equate to a Level 3 Diploma on the QCFW. To start this Programme, Apprentices should ideally have five GCSEs (grade C or above) or have completed a Foundation Apprenticeship

Higher Apprenticeships. The Knowledge and Competency Qualifications equate to a Level 4 and above on the QCFW

6. NORTHERN IRELAND APPRENTICESHIPS

ApprenticeshipsNI aim to promote learning and skills and to prepare people for work as well as supporting the economy. Apprenticeships are available at level 2 and level 3 and normally last between two and four years. They provide a range of formal technical skills, practical and essential skills leading to nationally accredited qualifications at either level 2 or 3. Every apprenticeship framework must be registered with the relevant sector skills council and provide at least 21 hours of contracted employment per week. Apprenticeships are available to anyone over school leaving age. To date Apprenticeships have not been introduced into Health and Social Care maternity services in Northern Ireland.

7. DELEGATION ISSUES AND APPRENTICESHIPS

As with any new role introduced into maternity services careful consideration needs to be given to the boundaries of Apprenticeships and the appropriate delegation of tasks. Registered midwives are the key professionals responsible for the provision of care to women through low risk pregnancies, birth and postnatal care. The role and training requirements of qualified midwives are defined by the European Union's *Midwives Directive – 80/155/EEC* and by *The International Confederation of Midwives*. Midwives are responsible for delegation of tasks to support workers and are required to ensure that adequate supervision and support is available to guarantee safe care. Support workers are accountable for accepting any tasks delegated to them. As the *Midwifery 2020* Final Report points out:

“Delegation must always be for the benefit of women and families and where aspects of care are delegated this must not disrupt the provision of holistic care or reduce the quality of care”.

In February 2010 the RCM published a *Position Statement* on Maternity Support Workers. The Statement recognises the valuable role support workers can play in helping women and healthcare professionals through the undertaking of:

“...work for which midwifery training and registration are not required either by statute or by professional guidelines”.

The RCM Statement establishes clear principles in the respect of role boundaries in order:

“...to ensure consistency in standards of care, to protect the public and sustain a defined body of midwifery knowledge”.

Traditionally support workers in maternity services have undertaken administration and housekeeping tasks such as cleaning and bed making. Recent years however have seen the development of higher-level maternity support roles performing a range of more advanced tasks. While these higher-level roles exist across the United Kingdom and are increasingly being supported by regional or national education programmes there is presently no single definition of the tasks that they can and, just as importantly, cannot undertake.

In Scotland the RCM has worked with NHS Education for Scotland and others to develop a national competence framework and associated learning programme for higher-level support workers. The box below lists examples of tasks taken from this programme that are regarded as being: inappropriate for support workers to undertake, those that they can readily perform (tasks more readily associated with traditional support roles) and those they could undertake with appropriate training (tasks more readily associated with higher level maternity support roles).

What tasks can maternity support workers undertake?⁴

In August 2008 NHS Education for Scotland published A Skills Passport for maternity support workers that seeks to set out the tasks that are ideal for support workers with appropriate training and those that are not to be undertaken. The Passport reminds support workers to focus on the skills that they can undertake in their area of work, that they should work within their sphere of responsibility and that all clinical tasks should be delegated and reported back to a qualified midwife. Tasks should only be delegated that support workers are appropriately trained and supported to do.

WORK NOT TO BE UNDERTAKEN BY SUPPORT WORKERS IN MATERNITY:

Maternal history taking	Assessment of uterine activity
Diagnose pregnancies	Auscultation of fetal heart
Monitor progress of pregnancies	Drawing up of an injection
Interpretation, decision-making and planning of care for the woman and her baby	Run through an intravenous infusion
Providing primary advice and information including over the telephone	Removal of skin staples/sutures
Give advice and information on pain relief	Administration of any medication
Diagnose onset of labour	Insertion of a Nasogastric tube
Monitor progress of labour including maternal and fetal wellbeing	Attachment of a fetal monitor
Monitor the birth process	Interpretation of a cardiocograph
Assess postnatal or postoperative recovery	Delivery of a baby
Supervise student midwives	Episiotomy
Discharge and transfer of care to an appropriate professional	Perineal repair
Second person attending a home birth	Initial examination of the newborn
Obtain consent for any invasive procedure	Apgar score
Assisted delivery	Postnatal examination of the woman
Fetal blood sampling	Initial and discharge postnatal examination of the baby
Antenatal assessment of a woman	Supra pubis pressure during shoulder dystocia
Abdominal, speculum or vaginal examination of a woman	Rubbing up a contraction during a post partum haemorrhage

⁴This list is provided only as a guide

WORK THAT SUPPORT WORKERS CAN UNDERTAKE:

The following are appropriate for support workers only following appropriate training and support:

Removal of an epidural catheter	Prepare equipment and assist health professionals with: ultrasound scan, trans vaginal scan, placing women in lithotomic position.
Removal of an indwelling urethral catheter	
Assist midwife with neonatal resuscitation	
Baby yoga/massage	Theatre duties (such as cleaning and preparing theatre, setting up instruments, perform catheterisation of bladder if required, handle, package and send specimens and check swabs/needles during and post procedure)
Newborn hearing screening	
Aromatherapy	
Smoking cessation	Breastfeeding promotion, information and support
Venepuncture	
Cannulation (midwife to flush or attach IV)	Artificial feeding advice and support including principles of sterilisation and preparation of feeds.
Daily baby check (but not initial, on transfer, discharge or if concerns)	Parenting skills
Umbilical cord Ph	Care of the healthy term baby including bathing, weighting, eye and cord care, obtain capillary sample of blood via heel prick and newborn blood spot. Describe, undertake and record healthy term baby vital signs (temperature, respiratory and heart rates).
Cup feeding	
General housekeeping tasks (such as making of beds and restocking of equipment)	In an emergency support workers may undertake the following:
General duties (such as obtaining test results using computer system, filling and maintaining the birthing pool)	Knowledge of emergency contact numbers
Care of the woman tasks: calculation of BMI, assisting woman with bathing, oral hygiene, chaperone, obtain urine specimens and perform urinalysis, care of woman with indwelling urinary catheter, record fluid intake and output, care of and removal of IV cannula, obtain a capillary sample of maternal blood for glucose estimation, apply a TENS machine, describe, undertake and record a normal range of maternal vital signs, assist and promote skin to skin contact, measure and apply TED stockings, report lochia/blood loess, assist women with postnatal exercises and assist midwife with transfer and discharge.	Obtain appropriate help
	Obtain emergency equipment
	Scribe/document as required
	Assist with placing women
	Manoeuvre the bed
	Care of the partner and baby
	First aid

Delegation Checklist

When considering developing maternity support roles, the following steps should be taken to ensure safe and appropriate delegation of tasks:

1. Read the RCM's *Position Statement* on Maternity Support Workers.
2. Identify for example by using the list above tasks that support workers can safely perform. These should be those that do not exclusively require midwifery education and registration.
3. Define the maternity support worker role including its boundaries.
4. Where support worker identified tasks require delegation ensure that staff are clear of responsibilities and that these are recognised in Job Descriptions.
5. Identify any knowledge and skills gaps and appropriate learning needs to perform identified support worker tasks.
6. Ensure that appropriate direction, guidance and support is in place to allow appropriate and safe practice. The level of support will depend on the needs of mothers and the nature of the task and activity along with the knowledge and experience of the support worker.

8. THE CASE FOR MATERNITY APPRENTICESHIPS

The Departments of Health in Wales and England are committed to seeing an increase in the number of Apprenticeships in the NHS. Apprenticeships are not, of course, the only way to ensure that maternity support workers have the necessary knowledge and skills to develop their careers and assist midwives. There are, though, a number of particular advantages with Apprenticeships compared to more traditional means of vocational education.

This section sets out the case for introducing an Apprenticeship into maternity services, as well as some of the challenges that services might face developing the role.

Question - What roles do NHS Apprentices undertake?

In 2009/10 8,167 people started an Apprenticeship in the NHS in England. 44% of those were in clinical support roles, although that figure rose to 67% in the North East. As with the economy as a whole health care Apprentices work in a wide range of areas in the NHS including administration, estates and facilities, nursing assistants, IT, lab technicians, dental nursing, security and pharmacy.

NHS Education for Scotland has highlighted the following clinical support areas as examples of Modern Apprenticeships: Dental nursing, Health and Social Care, Life Sciences and Pharmacy technicians.

The business case

Apprenticeships are a cost effective means of developing staff and improving services. Evidence⁵ suggests that Apprentices help organisations improve their performance and that the initial cost of the role is effectively paid back between one and three years. Eight out of ten employers who employ Apprentices agree that the role made their workplace more productive, while 88 per cent felt they led to a more motivated and satisfied workforce. In addition the research showed:

- 83 per cent of employers use their Apprenticeship programme to provide skilled workers for the future.
- 81 per cent of consumers favour using organisations that take on Apprentices.
- Employers feel training Apprenticeships lead to lower overall training and recruitment costs compared to alternative means.
- Apprenticeships provide employers with a means of developing specialist skills.

A current and important benefit of introducing Apprenticeships is that funding can be available to assist the development of the role.

The benefits for health care

The *Final Report* of the Department of Health's National Advisory Committee on Apprenticeships set out a range of potential benefits for health care organisations that introduce Apprenticeships. These are shown in the box below. The *Report* also highlighted the wider social benefits that can derive from improving people's skills and learning, noting that Apprenticeships will:

"...give health sector organisations the greater credibility and authority that they need to deliver on much of their wider agenda (e.g. public health)".

The benefits of apprenticeships in health care

- Creation of a motivated and loyal workforce
- Build the skills of the workforce to meet service demands
- Addresses workforce demands including an ageing workforce
- Increase the ability to recruit and retain skilled and talented young people
- Provides an framework to develop existing support staff
- An opportunity to rapidly develop innovative roles
- Provision of a consistent level of knowledge and skills

⁵ Source: Survey conducted by Populus on behalf of the Learning and Skills Council, 2009

A review⁶ of those NHS Trusts that have already introduced Apprenticeships in England (albeit not in maternity services) shows a diverse range of reasons behind their decision. A number of these, if not all, are likely to apply to maternity:

- Support a service needs gap arising from an ageing workforce.
- A desire to provide opportunities to young people not in employment.
- Meeting present and future skills gaps.
- Improve retention of existing staff.

Apprentices, Skills for Health state in their publication - *Apprenticeships in the Health Sector*, provide the following benefits to organisations:

"...reduced staff turnover, the new ideas and innovation that apprentices bring and a supply of skilled labour that is often not available through the external job market".

NHS Employers highlight the following benefits arising from the employment of Apprentices:

- A well qualified, highly skilled and motivated workforce.
- Attracts motivated and talented people of all ages.
- Greater staff retention through career progression.
- Improved productivity and performance.
- A long term, ongoing solution to developing skilled staff.

In Wales the National Innovation and Leadership Agency has identified the following benefits for introducing Apprentices into health care organisations:

- Developing the skills for the wider health sector workforce
- Attracting and retaining new and existing staff
- Enhancing staff morale
- Meeting changing service delivery requirements and associated new job roles
- Securing clear routes of progression

The case for introducing Apprenticeships in maternity services

Support workers have long been a feature of maternity services. They undertake a range of tasks and activities including assisting women with breastfeeding, parenting skills, smoking cessation, recording maternal and baby vital signs, observations, general housekeeping tasks such as making beds and assisting midwife's with data inputting. Recent years have seen across the United Kingdom a rise in the number of higher-level support roles alongside more traditional assistant functions.

All the tasks and activities undertaken by support workers require appropriate knowledge and competences. Currently these are delivered through a range of qualifications. An Apprenticeship framework provides a systematic means of

⁶ Undertaken by the Department of Health's National Advisory Committee on Apprenticeships

developing support workers' skills and knowledge linked to service needs, as well as providing career development opportunities and the potential for subsidised educational costs.

The last few years have seen the creation of dedicated maternity support worker education programmes across the United Kingdom. These include: *All-Wales Curriculum for maternity support workers*, NHS Education for Scotland's *Maternity Care Assistant* programme, London South Bank University's *Maternity Support Worker* Foundation Degree and a dedicated Maternity Support Worker level 3 National Vocational Qualification (now the QCF Diploma in Maternity and Paediatric Support) in Northern Ireland (piloted at the Southern Health and Social Care Trust). These programmes are helping to address a long-standing problem for maternity support workers: the lack of dedicated and appropriate training programmes. Apprenticeship Frameworks provide an alternative but complementary training programme.

Question - Why should I consider joining an Apprenticeship scheme?

An Apprenticeship has a number of benefits. It provides the opportunity to gain access to high-quality training. An Apprenticeship will provide you with the latest knowledge and skills including if you need them functional skills but also an opportunity to develop and enhance your career. You will be guaranteed a maximum of 280 hours a year of guided learning. While you train you remain an employee receiving pay, holidays and other benefits. When you have completed your training you will receive recognised and transferable qualifications.

Potential barriers to developing Apprenticeships

Despite the large growth in Apprenticeship starts in the NHS, Apprentices still represent a small proportion of the total health care workforce. While they do exist, Apprenticeships in maternity services are particularly rare (see Section 12 for an example of a maternity Apprenticeship developed in the East of England).

There are a number of potential challenges health care employers introducing Apprenticeships have identified. None are insurmountable, but they do need to be taken seriously and appropriately addressed:

- Current staffing levels and workload to support the Apprentice.
- Lack of understanding of the potential benefits.
- Little knowledge or understanding of Apprenticeship Frameworks.
- Confusion over the different pathways of training available.
- Financial constraints.

Key points to consider

The following points should be addressed if you are considering introducing an Apprenticeship Framework into your maternity service:

1. How are your maternity support workers currently trained?
2. From your services point of view what advantages can you identify that introducing an Apprenticeship might provide?
3. What disadvantages might arise from introducing an Apprenticeship?
4. How do the advantages and disadvantages identified above compare to your current arrangements to develop support staff?
5. What potential barriers can you identify that might inhibit the introduction of Apprenticeships?

9. WORKFORCE PLANNING

Apprenticeships, like any other role in the health sector, should not be developed in isolation to the rest of the workforce or health and service needs. In reviewing the introduction of Apprenticeships within a maternity service the following questions need to be carefully considered:

- Are Apprenticeships the right way forward?
- Are the additional elements with an Apprenticeship Framework compared to traditional vocational qualifications a necessary requirement for staff development?
- Who within your organisation should you contact to discuss introducing Apprenticeships including the workforce planning team, HR Department and Finance?
- How many Apprenticeships are required and at what level(s)?
- Will Apprentices be able to progress through more than one Apprenticeship level or not?
- Will Apprentices be drawn from the existing maternity workforce or more general health care assistant workforce or from outside the trust or a combination of each?
- How do current staff – including support workers – perceive the introduction of Apprenticeships?
- What impact will Apprentices have on existing staff?
- What tasks and duties will Apprentices be expected to carry out?
- Should a specific Apprentice Induction programme be developed?
- Is delegation being managed correctly?
- What capacity and funding is required to introduce and develop the role?
- Which local education providers deliver Apprenticeship training?

Question - How do I find a training provider to deliver Apprenticeships?

It is likely that the education providers your trust currently uses to develop support staff will also deliver apprenticeship training. The *National Apprenticeship Service* will be able to provide details of other providers. The RCM's *Maternity Support Workers' Learning and Development Guide* provides guidance on how to assess the quality of education programmes for maternity staff.

Workforce planning tools and resources are available from both Skills for Health and the NHS Centre for Workforce Intelligence. These can assist services plan the numbers of staff that they require. Addressing the following questions will help you assess how many Apprentices may be introduced into your service:

1. What is the current birth rate in your area?
2. Is the birth rate rising and if so by how much?
3. What is the current ratio of midwife to woman in:
 - a. Pregnancy
 - b. Intrapartum
 - c. Postnatal in patient
 - d. Community
4. Do you have challenges in workforce recruitment and retention to maintain this ratio? What is the current age profile of your workforce? How many staff can you expect to retire in the next 5-10 years? How many staff work part time? What is your current turnover rate?
5. What is your current model of care? Does your maternity unit achieve 1:1 care in labour for women?
6. Reflect on the role of the MSW: where could Apprentices provide additional support to the midwife to improve the quality of care for women and their families?

Question - What are Union Learning Representatives (ULR)?

ULRs are a statutory recognised role that promotes learning in the workplace. This may involve giving support and encouragement to members, raising the profile of training and development, helping to identify learning needs and working with other union members to raise learning issues with employers. They will support the development of apprentices. The RCM is developing a network of ULRs within maternity services across the United Kingdom.

Workforce planning is not, however, just a technical process. It can sometimes be a matter of addressing 'hearts and minds'. It may, for example, be necessary to convince existing staff of the value of introducing Apprenticeships and address any concerns they might understandably have. Partnership working including with local RCM Union Learning Representatives is critical here. Working with the RCM will help, for instance, with addressing any confusion that staff might have about what Apprenticeships are.

The importance of partnership working

Critical to the successful introduction of apprenticeships in maternity services is partnership working. The Final Report of the Department of Health's National Apprenticeship Advisory Committee recommended that:

"Apprenticeship networks, trade unions and professional bodies work together to deliver health sector apprentices" (October 2010, page 15).

Advice published by the NAS, Department of Health, NHS Employers and Skills for Health also stresses the importance of developing apprenticeships in partnerships with trade unions and professional bodies⁷.

Maternity services planning to introduce apprenticeships must consult and involve RCM stewards and Union Learning Representatives.

10. FUNDING

Additional funding may be available to assist organisations deliver Apprenticeships specifically for educational costs. The amounts available vary by country and depend on a variety of factors including the age of the Apprentices, specific geographical areas and specific national educational targets.

Question - What happens after a support worker finishes their apprenticeship?

Once an Apprenticeship is completed the member of staff will continue to work as a clinical support worker. They may also go on to progress to further qualifications or a higher apprenticeship level.

⁷ http://www.nhsemployers.org/SiteCollectionDocuments/Apprenticeships%20logo%20use%20and%20key%20messages%20FINAL_SL080910.pdf

11. CASE STUDY: THE EAST OF ENGLAND

The introduction of the maternity support worker (MSW) Apprenticeship in the East of England came about as part of the response to the safety and quality agenda within the region. NHS East of England have taken a proactive and innovative approach to address its shortage of midwives whilst at the same time impacting positively on the Quality, Innovation, Productivity and Prevention (QIPP) agenda. This initiative forms part of a significant workforce development programme that includes the ongoing recruitment and retention of midwives and the implementation of a unique, responsive leadership programme.

A cross regional skill mix review concluded that the introduction of additional, specifically educated and trained MSWs into the maternity workforce would have the short to mid term impact of improving quality of care and the long term impact of reducing the current required growth in midwifery numbers by ensuring our midwifery resource is appropriately and effectively utilised to deliver safe, high quality care, supporting maternity units to deliver 1:1 care in established labour and meeting local, regional and national targets.

The decision was taken to develop MSWs using an Apprenticeship programme as it offered a flexible way for existing staff to progress in their career (including access to midwifery training). The programme is work based, recognises qualifications currently held by staff and attracts funding. The SHA was cognisant of the Government agenda in promoting Apprenticeships which suggested that the initiative was sustainable.

The SHA had been working with its employers to upskill the 'pre-professional' workforce using the Joint Investment Framework (JIF) for the previous three years. Union Learning Representative numbers had been increased and a positive attitude to obtaining suitable transferable qualifications for this staff group engendered. Partnerships with local training providers had been strengthened and existing NHS training and development centres collaborated with these providers to ensure staff within the Midwifery Units were themselves trained and available to contribute to the teaching and assessment of learners.

Furthermore, the six counties of the East of England formed County Workforce Groups in this period, which held the budget for training staff in Bands 1 to 4. MSW Apprenticeships became a priority within these devolved budgets because of the business case that emerged from the region wide review mentioned above.

The 17 Midwifery Units identified the numbers of MSWs they would need to train by November 2011 – a total of 191. The process of Apprenticeship development in the East of England involves meeting with the local midwifery staff and the training partner to map the job description of the MSW across to Diploma units available within the Advanced (Level 3) Apprenticeship in Health (Maternity Support) or (Obstetric Theatre Support) pathway. The Certificate in Health (City & Guilds) or the BTEC (Edexcel) is also focused on local needs, as are the key skills.

The development of bespoke Apprenticeships for MSWs was offered to each of the 17 midwifery units and 160 MSWs are going through this training, with nine having already completed.

Most units in the region were keen to think differently about their skill mix. One of the largest, at the Norfolk & Norwich University Hospitals NHS Foundation Trust, had a target of 20 trained MSWs to achieve. In October 2010 as part of a recruitment drive to attract younger people into Maternity Services and diversify the age of the workforce, the Trust advertised three posts specifically as 'MSW Apprenticeships'. The aim is that at the end of the 18 months training is to have achieved the full Apprenticeship and subject to references these three newly trained staff will be taken into substantive posts. In November 2010 these three and additional five existing staff commenced the Apprenticeship. The local training provider, City College Norwich, worked with the Trust to develop the knowledge and expertise to address the Apprenticeship syllabus, and several of the qualified midwives who are existing NVQ Assessors have had additional training by the College for the Apprenticeship framework. Looking ahead the Trust is also placing two Apprentice Receptionists within the Maternity Unit. These Apprentices have been funded via the SHA's SWIFT (Strategic Workforce Funding for Tomorrow) initiative, as part of the county wide 'young persons' project, and it is hoped that their additional support will release clinical staff from administrative duties. As a NHS Foundation Trust the Norfolk and Norwich University Hospital takes its corporate and social responsibilities very seriously and investing in Apprenticeships enables it to develop a 'Grow Your Own' culture, also helping with succession planning and meeting the QIPP agenda.

12. CHECKLIST

The following tables presents a step-by-step guide on the activities required to introduce Apprenticeships.

TASK

Identify service and workforce need for maternity Apprentices (for example to meet skill gaps, to improve career development opportunities for support workers, to increase workforce diversity, support mothers' choice and increase capacity to meet rising birth rates).

Consider whether Apprentices are the most appropriate means of developing support workers compared to other vocational qualifications.

Communicate to maternity staff the rationale and benefit of introducing maternity Apprenticeships.

Establish a group to identify roles and responsibilities (draft Job Description), levels and numbers of maternity Apprenticeships. Plan delivery of apprenticeship.

Identify funding within trust/Health Board and externally.

Ensure that necessary facilities, materials, staffing are available to achieve completion of the Apprenticeship programme.

Identify an approved education provider. It may be possible that existing trust/Health Boards will be able to internally deliver training components of Apprenticeships.

Develop specific Apprenticeship Induction programme

Recruit Apprentices. Consider running an apprenticeship open day.

Ensure equality in recruitment.

Appoint Apprentices.

Deliver on-the-job learning through mentors (consider whether experienced maternity support workers can fulfil this role).

Deliver off-the-job training.

Administration of the Apprenticeship scheme.

Assess and review Apprentices.

Celebrate completion of Apprenticeship programme.

STAKEHOLDERS

Consult with ULRs, RCM stewards, Trust/Health Board staff responsible for workforce planning, development and commissioning.

Consult with ULRs, RCM stewards, Trust/Health Board staff responsible for workforce planning, development and commissioning.

Maternity staff, ULRs, RCM stewards and Trust/Health Board workforce, training and human resource staff.

Maternity staff, ULRs, RCM stewards and Trust/Health Board workforce, training and human resource staff.

Trust/Health Board workforce, training and human resource staff, Skills for Health, NAS.

Maternity staff, ULRs, RCM stewards and Trust/Health Board workforce, training and human resource staff.

Trust/Health Board workforce, training and human resource staff or contact the National Apprenticeship Service in England or NHS Health Board in Scotland.

Trust/Health Board workforce, training and human resource staff.

Trust/Health Board workforce, training and human resource staff.

Maternity managers, ULRs/RCM stewards, Trust/Health Board workforce, training and human resource staff.

Maternity staff, ULRs.

Education provider or approved trust/Health Board centre.

Trust/Health Board workforce, training and human resource staff.

Education providers/mentors.

Everyone.

13. FURTHER INFORMATION AND READING

Sources of further information and support

- The National Apprenticeship Service: www.apprenticeships.org.uk
- Skills for Health: www.skillsforhealth.org.uk
- Ofqual: www.ofqual.gov.uk
- The Apprenticeship and Training Board in Scotland: www.apprenticeshipsinscotland.com
- Skills Development Scotland: www.skillsdevelopmentscotland.co.uk
- The Scottish Credit and Qualifications Framework: www.scqf.org.uk
- NHS Employers: www.nhsemployers.org
- Department for Employment and Learning, Northern Ireland: www.delni.gov.UnitedKingdom/apprenticeshipsni
- National Leadership and Innovation Agency for Healthcare: www.wales.nhs.uk
- Centre for Workforce Intelligence: www.cfwl.org.uk

Department for Business Innovation and Skills (2011), *Specification of Apprenticeships Standards for England*

Department of Health (October 2010), *National Apprenticeship Advisory Committee: Making Apprenticeships an Important and Sustainable Part of the Health Sector Workforce*.

Midwifery 2020 Project (2010), *Delivering expectations*

National Apprenticeship Service (2010), *Apprenticeships: the proven way to train your workforce*

NHS Education for Scotland (2011) *Working to Learn and Learning to Work*

Royal College of Midwives (2010), *Maternity Support Workers: Learning and Development Guide*

Royal College of Midwives (2010), *Position Statement: Maternity Support Workers*

Royal College of Midwives (2006), *Position Paper 26: Refocusing the role of the Midwife*

Skills for Health, *Apprenticeships in the Health Sector (England Only): An Employer's Guide*

Skills for Health, *Higher Apprenticeships in the Health Sector (England Only): An Employers Guide*

Skills for Health, *Apprenticeship Framework: Health (Maternity and Paediatric Support, Wales)*

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