Valuing MSWs

MATERNITY SUPPORT WORKERS (MSWs)

RCM MATERNITY SUPPORT WORKER

MCA
HCA
Auxiliary
Clerk
CSW
Nursery Nurse
Families
Babies
Midwives
Mothers
Teams

THE ROYAL COLLEGE OF MIDWIVES

Promoting - Supporting - Influencing

www.rcm.org.uk/msw
Throughout my career I have worked with great Maternity Support Workers (MSWs). They are very important members of the maternity team and really make a difference to women and families’ experience of maternity care. I am committed to working for the continued development of this role with clear competencies and training. MSWs are part of the positive future for maternity care and we value them as members of the RCM.

Gill Walton
Chief Executive
The Royal College of Midwives
In 2017, Health Education England commissioned the RCM to undertake a scoping project on the Deployment, Education and Development of Maternity Support Workers (MSWs) in England. The RCM worked with Kings College London to undertake this work and surveyed MSWs across the UK about their jobs, training, career development and pay. A significant number of MSWs responded to our survey and a snap shot of these results can be found in this publication. Please visit [www.rcm.org.uk](http://www.rcm.org.uk) to view the full report.

We want MSWs to be seen as an integral part of the maternity team as well as our union and professional organisation.

The RCM welcomes support workers (bands 1-4) in maternity including MSWs, HCAs, MAs, Community Support Workers or those in clerical or administration roles into membership and to get more involved in our organisation.
Maternity Support Workers – job titles

The scoping report shows us that a total of 22 different titles are used to describe MSW roles across England! The titles most frequently used are:

- Maternity Support Worker: 61%
- Maternity Care Assistant: 22%
- Healthcare Assistant: 10%
- Other job titles: 7%

A loyal and stable workforce

- 67% of MSWs have worked in their current workplace for over six years and 43% for ten years or more.
- Less than 5% want to leave healthcare employment, nearly 25% would like to train to be a Midwife or Nurse.

Training

The scoping report showed that nearly 80% of MSWs surveyed had received training at some point in the last two years. The majority of training was linked to personal development, supported by managers and felt to be valuable. Most training (86%) was undertaken at work. A large proportion (78%) would like to access more training and 39% felt they needed more training to be able to use their skills effectively. The following reasons were put forward as barriers to training:

- Lack of funding: 44%
- Lack of opportunity: 41%
- Workload: 39%
- Unable to take time off: 31%
- Lack of support: 25%
- Family and other: 25%
Key responses

- In the scoping project we found that over 83% of MSWs said they were "clear about what was expected of their role"
- 75% said they were clear about their organisation's delegation policy and procedure, although 25% were not
- 80% agreed or strongly agreed that midwives had confidence in their role
- 70% said that midwives valued the role
- 20% were frustrated with their current role

Key messages

- MSWs have job satisfaction
- They are clear about their role boundaries
- There is still a lack of clarity about job titles
- They have concerns about workload
- They feel valued by midwives and are integrated into teams
- They feel underpaid for the work they do
- Pay banding is seen to be inconsistent
- They feel they could contribute more to services and to assist midwives but are frustrated by the lack of career development opportunities
- They would like access to more training but funding, lack of opportunity and workload prevents them
- They support the role being regulated

RCM MSW Roles and Responsibilities

The RCM Roles and Responsibilities guide was first published in 2011. An expert reference group was convened to support its development.

The expert reference group was convened as a consequence of the uncertainty of midwives and MSWs in what tasks MSWs could undertake. MSWs were frustrated that they were being stopped undertaking tasks that they were skilled and competent to undertake whilst others wanted to take on tasks that were inappropriate. Some midwives were not confident to delegate tasks to MSWs whilst others wanted MSWs to undertake tasks that had the potential to compromise safety and place themselves and the MSW at risk of disciplinary action and legal challenge.

The objective of the publication was to provide guidance on what tasks a MSW could not undertake and those that they could, subject to the appropriate education and training and assessment of competence.

The RCM Roles and Responsibilities booklet was written for MSWs, midwives and other stakeholders that worked in the maternity setting. In 2016 the publication was updated. It is still widely used in NHS Trusts and Health Boards across the UK as a benchmark for job descriptions and competency frameworks.

RCM MSW Position Statement 2014

The RCM supports the deployment of maternity support workers in the maternity services to support midwives to fulfil their role efficiently and effectively.

The positive contribution made by MSWs in the maternity service is maximised when they are appropriately trained, pay banded, managed by midwives and work as an integral part of the maternity care team.
Valuing MSWs

MSW Career Framework

The RCM career framework (opposite) has been developed for midwives and MSWs. It describes a number of roles across clinical practice, management, education and research.

We have included case studies of people in those roles who describe their personal journeys and future aspirations. If you are thinking about making a change in your current role or looking for development opportunities, it helps you understand the knowledge and skills you will need to work towards achieving that progression. These will include existing resources within i-learn as well as a new programme of courses and workshops that we plan to launch in the near future. Included is a section on “What next” to help you think where your current or new role might take you. The RCM career framework can be accessed in RCM i-learn.

RCM Leadership

The RCM understands the importance of effective leadership in supporting and developing safe care for women and babies.

We believe that leadership is everybody’s role and we aim to support members at all levels to achieve their leadership potential. The RCM runs interactive workshops designed to help all members whatever their role or workplace. In addition to face to face workshops, RCM i-learn and i-folio provides additional learning opportunities and reflective activities.

Job Evaluation

The NHS Job Evaluation (JE) Scheme determines the basic pay of staff covered by Agenda for Change.

The pay banding of a post is determined by measuring the job across a range of factors and allocating relevant levels according to the job role being considered. Each of these levels has an allocated points score and the total points determine the appropriate pay band for the job. If applied correctly it ensures the principle of ‘equal pay for equal work’ as required by the Equality Act 2010.
Pay Banding

Most NHS jobs are matched to a NHS Job Profile.

MSWs are matched against the following job profiles:

- Clinical Support Worker, Band 2
- Clinical Support Worker, Higher Level, Band 3
- Maternity Care Assistant, Band 4

The following briefly describes the responsibilities of each of these pay bands:

The MSW (Band 2) can carry out a range of tasks that focus on housekeeping, administration and the personal care of mothers and babies. They will work in a range of maternity settings under the direct supervision of a midwife.

The MSW (Band 3) will undertake a range of delegated clinical duties. These may be in addition to the tasks undertaken in a Band 2 MSW role. They may work in a range of maternity settings including delivering care to mothers and babies in their homes in the absence of a midwife.

The MSW (Band 4) in addition to the duties that a MSW Band 3 could undertake will have additional responsibilities that require higher communication and organisational skills. Examples include leading on a public health initiative e.g. smoking cessation, providing support to vulnerable women and their families or having responsibility for the training and development of other MSWs. The MSW Band 4 will be able to communicate complex or sensitive information to women and their families.

If a MSW believes that their post has been incorrectly banded they should contact their local RCM steward for further advice.

The RCM has produced a guide for MSWs on pay banding and job evaluation and can be found on the RCM website www.rcm.org.uk.

Further information on the NHS Job Evaluation Scheme can be found on www.nhsemployers.co.uk
**MSWs in Northern Ireland**

MSWs are valued members of the multidisciplinary team in Northern Ireland (NI) and investing in their education and training needs enhances the valuable contribution they make to maternity services throughout the country and enhances the skill mix of maternity teams.

The impetus to support the education and training of MSWs has come from the recognised need to develop a flexible and sustainable workforce which contributes to the delivery of high quality maternity services.

In NI MSWs undertake a regional training programme which has enabled a standardised approach to the preparation and development of MSWs and contributed to the clarity of the MSW role and delegated functions. This approach also supports lifelong learning and equips MSWs to function across the range of maternity care settings including: antenatal clinics, community, midwife led units and obstetric led units working effectively and in partnership with midwives, contributing to the delivery of exemplary maternity care.

The benefits of a regional programme are wide ranging and include:

- Provision of a comprehensive and innovative educational experience for MSWs
- Reward MSWs with accredited learning
- Enable MSWs to work flexibly across a range of maternity settings
- Provide transferability of skills within maternity settings
- Identify unambiguous roles and tasks that may be undertaken by MSWs
- Support midwives to have a better understanding of what MSWs are trained to do and what tasks may be delegated to them
- Clarification for midwives in relation to delegation of tasks to MSWs
- Raise the profile of MSWs within maternity services
- Enhance Continuing Professional Development (CPD) opportunities for MSWs

The MSW programme is provided by the ProQual centre in the Southern Health and Social Care Trust (SHSCT) in partnership with the Clinical Education Centre (CEC). The programme is normally completed within 10mths and during this time participants are supervised and assessed by midwives who meet the criteria required for ProQual programmes. They are also supported and taught by other members of the midwifery team. The participants are awarded a ProQual Level 3 Diploma in Healthcare Support (Maternity) on completion of the programme and on appointment as a MSW they work at a Band 3 in either hospital or community based services.

In Northern Ireland the title Maternity Support Worker is reserved for those who have completed the training and are working in the role.

**MSWs in Scotland**

In 2017, the University of the West of Scotland (UWS) reintroduced* the Maternity Care Assistant Course in Scotland and trained 29 MCAs, 19 of which passed the course with distinction.

The current course has 30 MCAs starting the training programme in September 2018. This course differs slightly in that it is a Certificate of Higher Education, SCQF level 7. This means that learners must meet the course entry requirements;

- Passes in Scottish National Qualifications in five subjects including one a Higher level; English should be achieved at Higher Level
- Passes in GCSE and GCE in four subjects normally including one at Advanced Level (A level)
- With other academic, vocational or professional qualifications deemed to be equivalent

The course runs for 30 weeks and is broken down into 3 weeks theory and 27 weeks practice placements. The theory elements include looking at the role of the MCA, providing holistic care to women and meeting the needs of women and their families. Practice placements take place in their own workplaces, with some remote and rural MCAs undertaking elements of their practice in other maternity units to gain experience in working in that environment, such as assisting in labour ward. The course follows the existing NHS Education for Scotland (NES) Maternity Care Assistants Skills Passport, which uses a traffic light system to show tasks that MCAs can undertake, what tasks they can do with additional training and tasks that MCAs should not perform.
All MCAs start their training on a Band 4 and will continue as a Band 4 on completion of the course.

UWS has developed a buddy system for the MCAs which encourage them to buddy up with another trained MCA in their workplace and midwives have been given mentorship training as part of this course, so they can provide on-going support and guidance.

Following completion of the programme, there is a variety of possible career pathways available including:

- General Acute Maternity Services – working within large consultant-led inner city maternity units as part of the multi-disciplinary team
- Community Maternity Services – working within rural and/or midwife-led midwifery units, promoting normality in childbirth
- Parenthood Education Supporter – assessing need, planning content and undertaking parenthood education sessions e.g. infant feeding, transition to parenthood, postnatal support
- Breastfeeding Supporter – promoting, advising and supporting breastfeeding and undertaking breastfeeding support groups
- Access to other Diplomas of Higher Education Programmes of study such as Diploma in Health Studies and Childhood Studies
- Fulfils part of the entry criteria required to access BSc Midwifery programme

The programme seeks to create a caring, competent and confident MCA fit for purpose through the integration of knowledge, understanding, skills and attitudes. The students will develop the professional and personal maturity, skills and attributes necessary to work effectively within a multidisciplinary environment supporting ‘woman centred’ holistic care.

MSWs in Wales

In Wales, training MSWs to a national standard provides greater consistency and ensures clarity in terms of roles and tasks to be delegated to them.

This standardised approach is intended to ensure equitable educational provisions for MSWs that will support lifelong learning and equip MSWs to function across the range of maternity care settings: antenatal clinics, community, birth centres, midwifery led care units and obstetric led care units. One of the key features of a standard approach is that it will equip MSWs with the knowledge and skills to work in a flexible way across a range of maternity care settings rather than focusing on roles in specific areas. MSWs are essential members of the multidisciplinary team and investing in their education and training needs recognises the valuable contributions they make to maternity services throughout the NHS and adds to the skill mix of maternity teams. Providing a curriculum that is accredited is responsive to CPD needs of support workers and demonstrates commitment to investing in high quality education and training for non-registered staff.

The RCM was a key partner in the development of the All Wales Curriculum for MSWs which was designed to offer a standardised, coherent, flexible and transferable curriculum recognised throughout Wales. RCM Wales remains supportive of the curriculum because it affords MSWs the opportunity to maximise their skills and competencies within a framework of recognised qualifications that encapsulates theoretical knowledge and practical skills. The curriculum encompasses a range of teaching, learning and assessment strategies which enables MSWs to support midwives, women and babies in a range of maternity care settings. Learners who successfully complete the programme will then be able to apply for relevant grade 3 posts. Please see link below to access the programmes: http://ow.ly/FAET30m9JRQ

RCM Wales has developed a training offer to MSWs through the Wales Union Learning Fund. There is an established partnership to deliver bereavement training with SANDS which has been delivered to around 100 support workers in 2017 and 2018. RCM Wales has been able to offer study days to MSWs in North and South Wales for some years now, including very popular training days in ‘MSW month’ in 2017 and ‘MSW week’ in 2018. In 2018, accredited mental health awareness and digital productivity training has been offered to MSWs and there are plans to expand this training in the next few years.
**RCM MSW Advocate**

As a result of research undertaken by the RCM in 2014 the role of the RCM MSW Advocate was created.

The role of a MSW Advocate is to be a spokesperson and provide peer support to MSW members.

- Both Midwives and MSWs can be a MSW Advocate
- Work with other RCM activists in branches and workplaces
- Keep MSW members and other RCM colleagues informed of changes in the workplace and news and information from the RCM
- Attend RCM training for the MSW Advocate role
- Advise the RCM on the development of its membership offer to MSWs
- Communicate and network with other MSW Advocates and RCM staff to share information and ideas
- Promote the RCM as the union of choice for MSWs in their workplaces

This is an elected RCM role, the MSW Advocate will be voted in by branch members and this typically takes place at the branch AGM. Speak to your branch officers, workplace reps (WPR) or regional/national officer or organiser about seeking election to this role. Please go to RCM ilearn and access the MSW Advocate course for more information.

Words frequently used in the evaluation of 2017 MSW Advocate training day:

- Inspirational
- Enjoyable
- Valuable
- Educational
- Interesting

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**MSW Advocate case studies**

In 2015 when the RCM introduced a new role of MSW Advocate I decided to jump in with both feet. Being an MSW Advocate has provided me with training opportunities and increased personal development and means I can provide peer support to MSW members, work with other RCM activists both within my workplace and the wider RCM.

I am able to keep MSW members informed of changes in the workplace, whilst promoting RCM membership across maternity services and advise the RCM on the development of its membership to MSW members. Access the video here: [https://www.youtube.com/watch?v=EsGcmnFYJmU](https://www.youtube.com/watch?v=EsGcmnFYJmU)

Keelie Barratt, MSW Advocate at East Lancashire Hospital

I decided to step forward as an MSW Advocate after attending the training day and after listening to some other MSW Advocates about their experiences. I feel if I can encourage others to join the RCM and promote it we can have a bigger voice and they will get lots of benefits that accompany this.

Jean Cooper, MSW Advocate at Bristol NHS Foundation Trust
Examples of RCM workplace representation of MSW members

- The RCM guided and supported a MSW through the Agenda for Change job evaluation process in a London trust as she had been down banded from a Band 3 to a Band 2 due to lack of clinical tasks. Through the job evaluation scheme, the RCM were able to prove that the MSW undertook a specialist role in supporting midwives and successfully returned to a Band 3 position.
- We have recently had a cohort of 20+ MSWs undertake training and be integrated into a maternity service. They have required some support, advice and representation and our WPRs have taken a lead on this.
- WPRs and regional officers have represented MSWs with:
  - Sickness absence - long term and short term
  - Collective responses to consultations where down banding was threatened
  - Review of job descriptions in an infant feeding team
  - Disciplinary and Capability processes

RCM MSW Workplace Representatives and Branch Officers case studies

“...The training gave me more of an insight into differing teaching methods and how to find out what members want from a learning rep. Attending the residential training was very useful, as it gave us all the chance to share ideas of what has worked to ensure members engagement in learning events.”

Karen Beecroft, Learning Representative at Oxford and Banbury Trust

“...I have been a RCM Advocate for almost 2 years now, I work in a very busy maternity department and am located in the community. In each area I have put a folder promoting the RCM and the benefits that it offers MCA/MSWs. I have organised a celebration afternoon last year to celebrate the MSW month and also did a trolley dash to offer breakfast and goodies to the night staff at the end of their shift and have another planned. I am well supported by the rest of our active RCM Luton branch...”

Michelle Jenner, MSW Advocate at Luton and Dunstable Hospital

“I am due to attend the WPR training in Leeds November 2018. I am looking forward to supporting/representing our hardworking MSW's and keeping them informed about any changes that would affect them that the RCM are involved in or training/study days provided or run by the RCM.”

Stuart Graham, MSW and newly elected Steward at Ulster Hospital
Having thrived at the challenge of becoming a RCM MSW Advocate I was fortunate to be nominated for the position of Health and Safety representative and became accredited in this role in March 2016. I attended my RCM residential training and on my return to work became fully involved in attending the Trust Health and Safety Committee meetings and undertaking union workplace inspections, initially supported by another experienced representative.

I was also involved in driving the RCM’s Caring for You campaign within our Trust and alongside one of our branch Stewards and the Head of Midwifery, an action plan of staff health and wellbeing improvements was devised.

Keelie Barratt, MSW and Health and Safety Representative at East Lanes

I accepted the role and found it quite an honour. I have since found our branch meetings and discussions very positive. I really enjoy my involvement in fund raising events that are held within our trust.

Jayne Carrington, Branch Chair at Birmingham Women’s Hospital

RCM i-learn and RCM i-folio

RCM i-learn and i-folio are resources which are freely available for all members and accessible through a PC, smart phone or tablet. There are over 100 courses available, all with certificates which can be uploaded to the electronic portfolio.

There are modules specifically written for support workers, although most of the modules are written for RCM members working in maternity, regardless of role, so do not restrict yourself to the support worker section only. Take a look at modules such as “Lone working” for those of you in the community, or “How to recognise maternal sepsis” – as support workers are required to report on maternal observations.

Log in to i-learn and look through the list of titles or search by key word, you can enrol on any course and explore a wealth of knowledge and online learning, all as part of your membership.

5 Reasons to join the RCM

1. Our trade union and professional organisation supports and campaigns on issues relevant to our continually growing support worker membership
2. Workplace and employment advice, representation and support
3. Professional advice on pay banding and roles and responsibilities of support workers
4. Access to RCM i-learn, our free online learning environment
5. Legal advice and representation

To contact us or for further information, please visit www.rcm.org.uk or email msw@rcm.org.uk.
If you are an MSW Category member of RCM you can join our MSW Facebook group www.bit.ly/MSWRCM where you can network and share information with other MSW members.