



**LSA Forum (UK)**  
**Guidelines for the statutory supervision of midwives**

L

**Guideline and process for investigation into a midwife's fitness to practise by a Supervisor of Midwives on behalf of the Local Supervising Authority**

**Guideline produced by:** Suzanne Cro, Local Supervising Authority  
Midwifery Officer

**Guideline production date:**

**Consultation process:** March 2008 – December 2008

**Guideline approved by:** Local Supervising Authority Midwifery Officer's United Kingdom Forum

**Guideline approval date:** 15<sup>th</sup> December 2008

**Guideline Implementation date:** 1<sup>st</sup> January 2009

**Guideline review Date:** 1<sup>st</sup> January 2011

**LSAMO identified for archiving guideline:** Joy Kirby

*Paper copies of this guideline may not be the most recent version. The definitive version is held at [www.midwife.org.uk](http://www.midwife.org.uk) \*check*



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### **Guideline and process for investigation into a midwife's fitness to practise by a supervisor of midwives on behalf of the Local Supervising Authority.**

#### ***Introduction***

This guideline has been written to inform all Supervisors of Midwives of the process for a supervisory investigation into a midwife's fitness to practise. The purpose is to ensure that there is a thorough and equitable investigation of all untoward incidents, allegations of professional misconduct and/or concerns about lack of competence.

#### ***Principles at a glance***

- All incidents that cause serious concern relating to maternity care or midwifery practice must be notified to the Local Supervising Authority Midwifery Officer (LSAMO) as required by Rule 15 of *The Midwives Rules and Standards* (NMC 2004).
- Following an untoward event or the recognition of circumstances indicating lack of competence, a Supervisor of Midwives, independent of any management investigation, should undertake a full supervisory investigation of untoward incidents or circumstances (NMC 2007).
- Investigations should take place as soon as possible after any untoward event or circumstances, and must be initiated by a Supervisor of Midwives, regardless of any management or employment process.
- The time period, stipulated by the NMC, in which Local Supervising Authority investigations should be initiated and brought to a conclusion, ought to be no more than 20 days. If there are legitimate reasons for delay this should be included in the report.
- The Local Supervising Authority (LSA) must be informed that a supervisory investigation has commenced.
- It is the Supervisor of Midwives who will recommend, to the Local Supervising Authority, what action (if any), needs to be taken on completion of the investigation.
- The named Supervisor of Midwives should provide supervision support to the midwife, or midwives involved, and **should not normally** be involved in conducting the investigation (unless another supporting Supervisor of Midwives has been found for the midwife).



## LSA Forum (UK)

### Guidelines for the statutory supervision of midwives

- The supervisory investigation must be open, transparent and fair and must provide opportunity for a midwife to be involved and present her side of events.
- Midwives have a responsibility to co-operate with supervisory investigations (NMC 2008).
- Supervisory records must be made part of the investigation, including signed statements from any participants.
- Supervisory investigation documents are confidential to the LSA and are not disclosable to employers or to other investigating authorities without a court order or consent from the LSA. If the investigation is carried out jointly with management, there should be 2 separate reports.
- The supervisory investigation records should be stored in accordance with NMC and LSA requirements for the retention of supervisory records.
- The investigation report should include a summary and conclusion of the investigation and what recommendations are made to the Local Supervising Authority for future action.
- If the investigation identifies that system failures have contributed to unsafe practice this must be reported to the Local Supervising Authority and to the Director of Midwifery or equivalent manager of the maternity service.

| Fitness to practise may be impaired by:                    |  |
|--|--|
| <b>Misconduct</b>  | Misconduct is conduct which falls short of that which can reasonably be expected of a registrant.  |
| <b>Lack of Competence</b>                                  | A lack of knowledge, skill or judgement of such a nature that the registrant is unfit to practise safely and effectively in any field in which the registrant claims to be qualified, or seeks to practise.  |
| <b>A Conviction or Caution</b>                             | The types of conviction or caution that could lead to a finding of unfitness to practise include: theft, fraud or other dishonest activities, violence, sexual offences, accessing or downloading child pornography or other illegal material from the internet, illegally dealing or importing drugs.   |
| <b>Physical or Mental ill health</b>                       | Health conditions that might lead to a finding that a registrant's fitness to practise is impaired include: alcohol or drug dependence and untreated serious mental illness.   |
| <b>A fraudulent or incorrect entry in the NMC register</b> |  |
| <b>Concerns raised within the workplace</b>                | <ul style="list-style-type: none"> <li>▪ Low standard of work, e.g. frequent mistakes, not following a task through, inability to cope with instructions given</li> <li>▪ An inability to handle a reasonable volume of work to a required standard</li> <li>▪ Unacceptable attitudes to women and their families</li> <li>▪ Lack of skills in tasks/methods or work required</li> <li>▪ Unacceptable attitudes to work or colleagues, e.g. uncooperative behaviour, poor communication, inability to acknowledge the contribution of others, poor teamwork</li> </ul> |



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### Fitness to practise may be impaired by:

- Lack of awareness of required professional standards
- Acting outside limits of competence/sphere of practice
- A health problem affecting the ability to work competently and safely

## Process for supervisory investigation into a midwife's fitness to practise

### **1. Decision for investigation**

The Supervisor of Midwives needs to decide whether it is appropriate to carry out a formal supervisory investigation. Advice must be sought from the LSA Midwifery Officer if a Supervisor of Midwives is unsure. The Supervisor of Midwives may need to discuss whether it is appropriate for a supervisor to carry out the investigation, as some incidents may need reporting to the police or NHS Counter Fraud, Security Management Service, or a manager, as there may be capability issues.

Once the decision has been made for a formal investigation the LSA must be informed. The LSA should be informed by locally agreed processes. The Supervisor of Midwives may want to start using root cause analysis tools at this point.

### **Recognition of any conflict of interest**

The Supervisor of Midwives needs to make known to the LSA any potential conflict of interest if they identify any. A conflict of interests may arise when anyone has two duties which conflict. E.g. a manager (who is also a SoM) may not be able to investigate an individual because they are also the registrant's manager and as a manager they may need to start a managerial investigation. Also, if the Supervisor of Midwives has had direct involvement in giving care then they should not investigate the incident.

### **Photocopies of records**

Copies of maternal/baby records may be required. All photocopies should be dated, stamped and signed by the individual undertaking the photocopying. All relevant documentation must be secured and stored safely. On conclusion of the investigation the Supervisor of Midwives needs to discuss with the LSAMO how all the documentation will be stored and if referral to the NMC is required how the information will be securely sent to the LSA.

### **2. Support and timeliness of investigations**

The Supervisor of Midwives can contact the LSAMO for support, advice and guidance at any time during the investigation process.



## LSA Forum (UK)

### Guidelines for the statutory supervision of midwives

The Supervisor of Midwives must seek employer's support in terms of protected time for the investigation, as this will facilitate the investigation happening in a timely manner.

It is in the interest of protection of the public that such investigations take place and are concluded promptly. It would be reasonable for the 20-day investigation period to start once the LSA has been informed (20 working days = 4 weeks). The LSAMO must be kept informed of the investigation progress and the reasons for any delays beyond the 20 day period.

### **3. Identification of those involved in the incident**

Some investigations of serious untoward incidents may involve more than one midwife, so it is important for the supervisor to identify who was involved in providing care and also who else was present on duty at the time of the incident.

#### **Statements**

Statements may be requested from practitioners if it is identified that they were involved in the incident (**see example letter 4 requesting statements from health professionals**). If the case requires referral to the NMC the witnesses must be informed that their statements have been sent to the NMC.

#### **Student midwives**

If a student midwife is involved in an incident the Supervisor of Midwives needs to contact the University before approaching the student to discuss the best way forward. This includes when the Supervisor of Midwives would like to request a statement of their involvement. This is to ensure that the student has University identified support during the investigation. The student midwife may want to contact her named Supervisor of Midwives for support.

### **4. Continuance at work**

Consideration needs to be given as to whether it is appropriate for the midwife/midwives to continue to work whilst the investigation is in progress. In certain circumstances it may be considered appropriate for the midwife to continue at work whilst the investigation takes place.

If the midwife is employed then continuance at work should be discussed with the midwife's manager and consideration should be given to:-

- Providing the midwife with supervision in the workplace until the matter is investigated.
- Removing the practitioner from some duties (this may include allocation to a non clinical function for the duration of the investigation).
- Excluding the practitioner from the workplace (this is a managerial responsibility).

If the midwife is self employed or works for an agency, the Supervisor of Midwives must seek advice from the LSAMO.



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### **5. Informing the midwife**

When the decision has been made that a supervisory investigation needs to take place all the midwives involved in the incident being investigated need to be informed as soon as that decision is made (unless suspected of fraud or other criminal activity).

The Supervisor of Midwives **must also write** to the individual(s) to inform them and explain the process of investigation (**see example letter one**). If the midwife is informed at a face to face meeting then her named Supervisor of Midwives, another colleague or trade union/professional organisation representative should be present, to provide support and after the meeting a letter must also be sent to the individual.

### **6. Ensuring support for the midwife**

The investigating Supervisor of Midwives should not be the named Supervisor. If the named Supervisor of Midwives needs to carry out the investigation then another named Supervisor should be found to provide support for the practitioner. The midwife may prefer to seek support from his/her trade union/professional organisation.

### **7. Gathering information and fact finding**

The Supervisor of Midwives should gather information and try to establish the facts of the incident (ideally within 2 weeks).

The Supervisor of Midwives may wish to use National Patient Safety Agency tools and techniques as having an understanding of the contributory factors is crucial.

<http://www.npsa.nhs.uk/nrls/improvingpatientsafety/patient-safety-tools-and-guidance/rootcauseanalysis/>

### **Involving parents**

If considered appropriate the Supervisor should involve the parents in the investigation of a serious untoward incident. If parents have raised the concerns about a midwife's fitness to practise, then it is important for the Supervisor to explain about the role of supervision in protecting the public and inform the parents how they can be involved in the supervisory investigation. The Supervisor of Midwives should contact the LSAMO for advice before meeting with the parents.

The Supervisor may wish to write to the parents and inform them of the investigation, asking them to reply only if they wish to be involved. If the parents do contact the Supervisor of Midwives the first thing that needs to be established is how much they want to be involved. The Supervisor of Midwives may wish to interview the parents to



## LSA Forum (UK)

### Guidelines for the statutory supervision of midwives

establish the facts and ask questions, but the parents may not want this. The parents may want to only to make a formal statement of fact.

If the parents agree to be involved formally, then they need to be kept informed of the investigation progress and be updated as they wish. A final copy of the report will not be given to the parents but a summary report will be given outlining the recommendations. The Supervisor of Midwives needs to establish whether the parents want to be named in the final report (this might be sent to the NMC). Within the report the parents should be advised of whom they can contact in the future, should they want information on implementation of the recommendations.

#### ***8. Invite for investigation interview***

Once the fact finding has been completed the Supervisor of Midwives must invite the midwife/midwives to attend for an interview to discuss the event (**see example letter 2**). The letter should detail the incident being investigated or the concerns about the midwives fitness to practise that have been raised. It should be made clear to the midwife that she can bring someone to the meeting for support and who that support can be.

Prior to the interview taking place the midwife should have the opportunity to review all relevant information. Adequate time should be given for this.

#### ***9. Preparing for interviews***

The Supervisor of Midwives needs to prepare separately for each interview and to do this should prepare a schedule of questions to ask each of the individual's involved. The standards that the NMC upholds and requires of midwives, and which the public is entitled to expect, are set out in The Code and the Midwives Rules.

The Supervisor of Midwives should undertake a root cause analysis to help identify if there has been a systems or organisational failures that contributed to the untoward event, which would need to be addressed through the organisation or management of services.

#### ***10. Conducting the interview***

The aim of the interview is to discuss the case/incident and the midwife's involvement. The investigating Supervisor of Midwives must consider, with the midwife, the context in which the incident happened as well as the details of the incident itself.



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

The investigation may be carried out concurrently with any management investigation or employment investigation, but should not be undertaken by the same person, as roles and responsibilities are different.

The aim of the interview is to highlight areas of good practice, as well as discussing any concerns in relation to standards of practice being below NMC standards or where it is alleged that NMC Rules have been breached.

### ***Introductions and process details***

At the start of the interview it is important that the Supervisor of Midwives:-

1. Checks that the midwife considers herself fit to be interviewed.
2. Establishes whether the midwife has the support she considers necessary (the midwife may bring a Supervisor of Midwives, union representative or another work colleague to the interview for the sole purpose of acting as their support). If the midwife wants to bring a family member or a friend to the interview then the Supervisor of Midwives needs to advise the midwife because of confidentiality and the need to discuss patient details that this is not possible because of a potential breach of confidentiality.
3. Checks that the midwife has had the opportunity to review any relevant information before the interview commences.
4. Checks that the midwife understands the purpose of the interview.
5. Informs the midwife of the role of any other persons present and their involvement in the process. There may be a:-
  - o Note taker.
  - o Support for the investigating Supervisor of Midwives.
  - o Witness to the proceedings
  - o Student Supervisor of Midwives
  - o Manager (if this is a joint supervisory managerial interview).
  - o Human resources representative (if managerial involvement)
6. Gets agreement that detailed notes may be taken or permission that the interview may be tape recorded.
7. Advises the midwife to give truthful answers to the questions asked.
8. Informs the midwife of what the next steps will be once the interview is complete.
9. Gives an approximate end time for the interview and suggests that anyone can stop the interview if a break is required.

#### **Fact finding during the interview - considerations for the Supervisor of Midwives**

##### **SELF**

##### **The individual's health and other factors**

- Does the individual have a physical illness?
- Is the individual depressed or suffering mental illness?
- Might alcohol or substance misuse be involved?
- Has there been a recent major life event?

##### **COMPETENCE**



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### Fact finding during the interview

#### - considerations for the Supervisor of Midwives

##### Knowledge, skills, behaviour and attitude

- Is there a difficulty with clinical knowledge?
- Does the individual have the necessary skills?
- How does the individual use best available evidence to deliver care?
- How has the individual kept their knowledge and skills up to date?
- What learning and practice activities have been undertaken?
- Might a deficiency in education, supervision or continuing professional education be contributing to the problem?
- Was the midwife's induction appropriate or sufficient?
- Does the individual have difficulty understanding the limits of their competence?
- Is the problem predominantly one of the practitioner's behaviour or attitude?
- Is this new behaviour or is it an exacerbation of long-standing problem?

##### CONTEXT

##### The work environment

- Are there team difficulties?
- Have there been major organisational changes?
- Could issues relating to equality and diversity be a problem?
- Could bullying or harassment be a problem?
- Are there any systems issues that contributed to the performance difficulty?
- Any other mitigating factors

### ***On conclusion of the interview***

The interview should end with the midwife having a clear idea of what will happen next.

The midwife should know:-

- When a copy of the interview notes or interview transcript will be sent to her for her to sign and agree as a correct record.
- When the final investigation report will be ready
- What the possible recommendation to the LSA may be
  - no further action
  - recommend a period of developmental support
  - recommend a formal period of supervised practice
  - recommend referral to the NMC

### **11. Interview notes**

The notes should be typed up and then checked by the investigating Supervisor of Midwives before being sent to the midwife for signing. Two copies of the interview notes must be sent to the midwife to agree as a correct record of the interview. The Supervisor of Midwives should request that the midwife send back any alterations/deletions/changes within 5 days of receiving the notes. If the midwife is satisfied that the record is correct then she should sign and date every page and return one copy of the record to the Supervisor of Midwives and keep one for herself.

If the midwife requests that alterations, deletions or corrections need to be made, then the midwife should send back the notes to the Supervisor of Midwives, with the changes



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

clearly marked. If the Supervisor of Midwives agrees that the change is appropriate, then the corrected notes should be sent back for signing. If the Supervisor of Midwives does not agree that the change is a correct record, then the Supervisor of Midwives should seek advice from the LSAMO.

### 12. Writing the supervisory investigation report

The investigating Supervisor of Midwives, once she has collected all the information and met everyone involved in the incident(s), needs to conclude the investigation and write a report, which will contain any recommendations of action to the LSA. The purpose of the report is to provide a formal record of the investigation process, therefore the report should be clear and logical, and demonstrate that an open and fair approach has taken place.

When drawing the investigation to a conclusion and making a recommendation to the LSA, the Supervisor of Midwives should be aware that the NMC now use the civil standard of proof - which means 'on the balance of probabilities' – but this standard must be flexibly applied. This means that the more serious the allegation or the more serious the consequences if the allegation is proved, the stronger the evidence must be.

The investigation report presents the culmination of all the work undertaken by the Supervisor of Midwives. It must convey all the necessary information about the incident, the investigation process and the outcome of the investigation. The LSA will use the investigation report as the basis for judging the quality of the investigation process, the findings, conclusions and recommendations.

The report should contain a risk analysis (if appropriate), as this will establish the likelihood of the event occurring again and may contribute to the decision about whether supervised practice is needed for the midwife or midwives involved. In addition, it will establish whether further training is needed generally for midwives within the relevant services.

If there are concerns about a midwife or midwives' practice as a finding of the investigation, the Supervisor of Midwives should seek further advice from the LSAMO or the NMC.

The investigation may reveal that there is no cause for concern and no lack of competence or misconduct, or it may reveal a need for system changes. The investigating Supervisor of Midwives should report all of these findings to the Local Supervising Authority.

#### Criteria for use of supervised practice

- Supervised practice should be used when there are serious concerns about the midwife's attitude or the safety of their practice. It provides an opportunity to address identified shortcomings in practice and to assess formally a midwife's competence to remain on the



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### Criteria for use of supervised practice

- NMC Register.
- Supervised practice should not be used for minor, non-recurring mistakes that can be corrected through developmental support, advised and guided by the supervisory mechanism.
- Supervised practice should be used only after a thorough supervisory investigation has concluded that development and assessment of competence is required; irrespective of the clinical outcome that relates to an incident or series of events.
- Supervised practice should normally take place in the midwife's usual care environment and place of employment, with an explicit rationale if this is not the case.

*NMC Standards for supervised practice for midwives (2007)*

If the Supervisor of Midwives identifies that there is clear evidence that the practice of the midwife poses significant risk to women or babies or to themselves, then the Supervisor of Midwives needs to discuss this urgently with the LSAMO, as the LSA may decide to suspend the midwife from practice and also refer her to the NMC. If the LSA makes this decision, the midwife will be informed of this by the LSA in writing and simultaneously referred to the NMC (see national guideline for LSA suspensions from practice).

### 13. Submitting the report to the LSA

A final draft of the report should be reviewed by the LSAMO before it is sent to the midwife ([see template for supervisory investigation report](#)).

The final report, with the conclusions and recommendations for action, should be shared with the midwife and her named Supervisor of Midwives ([see example letter 3](#)). If the midwife wishes to share a copy of the report with her trade union or professional representative it is up to the midwife to forward a copy of the report to them (confidentiality must be maintained for all those involved). The supervisor must inform the midwife in writing of the outcome of the investigation. Within the letter the midwife must be informed of the appeals process and the name of the LSAMO to whom she should write formally. A final copy of the supervisory investigation report should be sent to the LSA.

The Supervisor of Midwives should submit an outcome summary report to the organisation if this appropriate (this may be to the Director of Midwifery or equivalent). Any positive outcomes from the investigation should be shared with other services or clinical stakeholders, to enable learning from good practice or good processes. If system failures are identified during the investigation, the Supervisor of Midwives must inform the LSAMO. The appropriate senior maternity and clinical governance leads must also be informed.

The investigating Supervisor of Midwives may share an outcome summary of the report and recommendations arising from the investigation with the woman and her family on behalf of the LSA.



## LSA Forum (UK)

### Guidelines for the statutory supervision of midwives

Should members of the public or peer colleagues refer the midwife to the NMC, outside of the statutory supervision process, then the NMC fitness to practise process would automatically come into play and the allegations would be investigated by the Council.

#### **14. Appeals process**

The LSA must have a formal appeals process in place, as a midwife may want to raise concerns about **the process** of a supervisory investigation. An appeal must not delay the start of any supervised practice programme.

If a midwife wants to raise concerns about the supervisory investigation process, this must be done in writing to the LSAMO within 10 days of receiving the investigation report. Any such appeal should include specific evidence, supporting where the supervisory investigation processes have not been followed.

Once the LSAMO is in receipt of the appeal then the LSAMO must set up a review process. The LSAMO may call for a statement from the investigating Supervisor of Midwives, in response to the concerns raised. The LSAMO will also review all investigation documentation to ensure that a fair equitable process has been followed, using this guideline to inform this process. The LSAMO may consider it appropriate for another experienced Supervisor of Midwives (independent of this investigation) or another LSAMO to review the entire document and the investigation processes. The LSAMO will write to the midwife informing her of the outcome of the appeal.



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

This guideline should be read in conjunction with:

NMC (2004) the midwives rules and standards.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=169>

NMC (2008) The Code: Standards for performance, conduct and ethics for nurses and midwives.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=3954>

NMC (2007) The standard for the supervised practice of midwives.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=3288>

DH (2006) Handling concerns about the performance of health care professionals: Principles of Good Practice.

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4140207](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4140207)

NMC (2004) Reporting lack of competence: A guide for employers and managers.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=66>

NMC (2004) Reporting unfitness to practise: A guide for employers and managers.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=65>

NMC (2004) Complaints about fitness to practise: A guide for members of the public.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=204>

NMC (2004) Standards for proficiency for pre registration midwives.

<http://www.nmc-uk.org/aFrameDisplay.aspx?DocumentID=171>



## LSA Forum (UK) Guidelines for the statutory supervision of midwives

### CHECKLIST TO BE USED WHEN UNDERTAKING A SUPERVISORY INVESTIGATION

| Action |   |
|--------|---|
| 1      | Name of investigating Supervisor of Midwives<br><br>First name Surname<br><br>Date Investigation started Date   |
| 2      | Inform LSA you are proceeding with an investigation and agree appropriate levels of supervisory support<br><br>Date<br><br>Name of LSAMO  |
| 3      | Commence log (diary) of supervisory activities (this can be included in the report).<br>Any delays in the investigation process should be recorded with the reasons.  |
| 4      | Collect photocopies (dated, stamped and signed by person) and secure all relevant documentation.  |
| 5      | Inform the midwife, verbally and in writing, of the investigation and the process for investigation. Also advise them of the supervisory support available.<br><br>(See example letter 1)<br><br>Meeting Date<br><br>Letter sent Date<br><br>SoM support Name |
| 6      | Consider (or discuss with the appropriate manager), redeployment to another appropriate area or suspension from duty. Confirm this advice in writing and keep a copy of the letter.<br><br>Name of manager First name Surname<br><br>Date of meeting          |
| 7      | Identify the persons who may be able to provide evidence and request statements, as per LSA template, in relation to the events based on access to the documentation.   |
| 8      | Devise timeline with potential systems, and/or person failures and HIGHLIGHT the areas of safe and effective practice.  |
| 9      | Undertake a root cause analysis if appropriate and devise questions for additional exploration at interview/s based on the conduct you might have expected of the persons under the circumstances.  |



## LSA Forum (UK)

### Guidelines for the statutory supervision of midwives

|     |   |
|-----|---|
| 10  | <p>Invite relevant persons to interview and advise that they may be accompanied by appropriate professional support and that access to relevant records will be made available at interview.</p> <p>1. Name</p> <p>Letter sent Date</p> <p>2. Name</p> <p>Letter sent Date</p>  |
| 11  | <p>Conduct interview/s ensuring records are taken</p> <p>Date of interview           with Name</p> <p>Date of interview           with Name</p>   |
| 12  | <p>Consider all the information collected against NMC rules, standards and guidance as appropriate</p> <p>Burden of proof at the NMC – Civil Standard</p> <p><a href="http://www.nmc-uk.org/aArticle.aspx?ArticleID=3141">http://www.nmc-uk.org/aArticle.aspx?ArticleID=3141</a></p>  |
| 13  | <p>Consider whether you will recommend to the LSAMO,</p> <ul style="list-style-type: none"> <li>• no action for the midwife/midwives,</li> <li>• developmental support,</li> <li>• supervised practice,</li> <li>• referral to the NMC with LSA suspension from practice</li> <li>• recommendations for the organisation if relevant</li> </ul> |
| 14. | <p>Produce and send the report for the LSAMO (as per template) identifying any mitigating circumstances prior to sending the report to the midwife with all signed statements.</p>  |
| 15  | <p>Following discussion with the LSAMO, share the report and relevant recommendations verbally and in writing with the midwife.</p>   |
| 16  | <p>Send an outcome summary of the report and relevant recommendations to the HoM/LME and/or organisation if required for appropriate action.</p>  |
| 17  | <p>The Supervisor of Midwives, if requested, may share an outcome summary report with the woman and her family.</p>   |