

Future midwife: Standards for pre-registration midwifery programmes

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About these standards

Realising professionalism: Standards for education and training include, the Standards framework for nursing and midwifery education, Standards for student supervision and assessment, and programme standards specific to each approved programme.

Our Standards for education and training are set out in three parts:

Part 1: [Standards framework for nursing and midwifery education](#)

Part 2: [Standards for student supervision and assessment](#)

Part 3: Programme standards already published are:

- [Standards for pre-registration nursing programmes](#)
- [Standards for prescribing programmes](#)

The following draft standards have been developed in line with other Part 3 programme standards:

- Standards for pre-registration midwifery programmes.

These draft standards help [midwifery students](#) achieve the NMC proficiencies and programme outcomes. All midwifery professionals must practise in line with the requirements of [the Code](#), the professional standards of practice, values and behaviours that nurses, midwives and nursing associates are expected to uphold.

Introduction

Our *Standards for pre-registration midwifery programmes* set out the legal requirements including entry requirements and entry routes, length of programme, curriculum, practice learning, supervision and assessment and information on the qualification to be awarded for the pre-registration midwifery education programme.

Student midwives must successfully complete an NMC approved pre-registration midwifery programme in order to meet the *Standards of proficiency for midwives* and to be eligible to apply, and be entered onto, the NMC register.

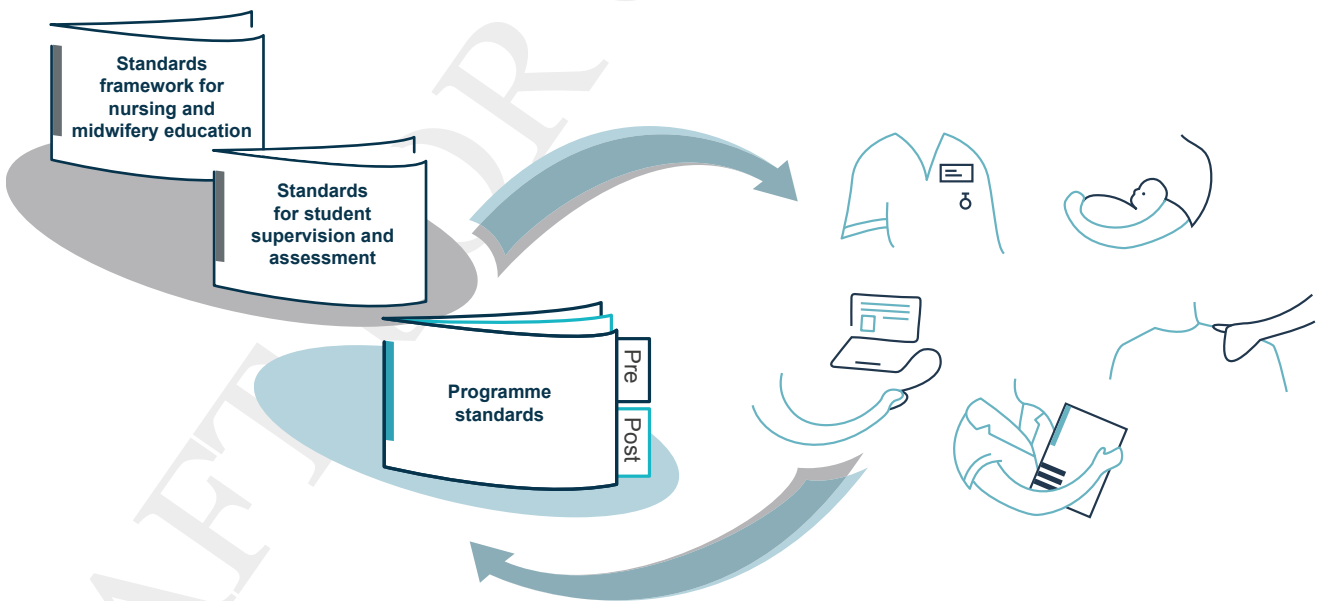
Public safety is central to our standards. Students will be in contact with people throughout their education and it's important that they learn in a safe and effective way.

These specific programme standards should be read in conjunction with the *Standards framework for nursing and midwifery education* and *Standards for student supervision and assessment* which apply to all NMC approved education programmes. Education institutions must comply with all the standards to be approved to deliver any NMC approved programme.

Standards for education and training

Standards of proficiency

for nursing and midwifery professions



Education providers structure their education programmes to comply with our programme standards. They also design their curricula around the published proficiencies for a particular programme. Students are assessed against published proficiencies to ensure they are capable of providing safe and effective care. Proficiencies are the knowledge and understanding, skills and behaviours needed to practise.

Through our [quality assurance](#) processes we check that education programmes meet all of our standards regarding the structure and delivery of education programmes, that the programme outcomes relate to the expected proficiencies for particular qualifications and that the [approved education institutions](#) (AEIs) and [practice learning partners](#) are managing risks effectively. Using internal and external intelligence we monitor potential and actual risks to quality in education and training. This intelligence gathering includes analysis of system regulator reports.

In accordance with our quality assurance (*QA*) Framework, before a midwifery programme can be delivered, an approval process takes place through which we check that the proposed programme meets our standards.

Legislative framework

Article 15(1) of the Nursing and Midwifery Order 2001 ('the Order')[1]¹ requires the Council to establish standards for education and training which are necessary to achieve the standards of proficiency for admission to the register, as required by Article 5(2) of the Order. The standards for pre-registration midwifery programmes are established under the provision of Article 15(1) of the Order.

Standards for pre-registration midwifery programmes

AEIs and their practice learning partners have ownership and accountability for the development, delivery and management of pre-registration midwifery programme curricula. Pre-registration midwifery programmes may offer various routes to registration.

The *Standards framework for nursing and midwifery education*, the *Standards for student supervision and assessment* and the *Standards for pre-registration midwifery programmes* provide an overall regulatory framework which enables AEIs and practice learning partners to design programmes that meet our requirements while at the same time allowing for local flexibility, innovation and variability within individual curricula.

Midwifery programme curricula must cover the outcomes set out in domains 1–5 and their associated skills of the *Standards of proficiency for midwives*. All midwifery students must comply with the necessary learning and assessment standards in preparation for professional practice as a midwife. Programme learning outcomes must include the content and competencies specified in relevant EU legislation. Midwifery students will learn and be assessed in a range of environments including the AEI, practice learning partner settings and simulated practice environments.

We believe involving women and families in the design, development and delivery of midwifery curricula will promote public confidence in the education of future midwives. We therefore encourage the use of supportive evidence and engagement from people who have experienced care by midwives to inform programme design and delivery.

On successful completion of an NMC approved programme students will be eligible to apply to register as a midwife.

¹ SI 2002/253

The lead midwife for education

We require an AEI to do the following:

- appoint a lead midwife for education (LME)
- ensure the LME or designated midwife substitute responsible for directing the education programme is able to provide supporting declarations of health and character for students who have successfully completed a pre-registration midwifery programme or a return to practice programme
- notify us of the appointment of the LME.

The AEI should inform us of the appointment of the LME on the appropriate form accessed via our website www.nmc.org.uk². The AEI will work strategically with the LME on matters that affect the NMC standards that govern pre-registration midwifery education.

The LME has the knowledge and skills to advise on all matters concerning academic standards and quality relating to pre-registration midwifery education. The LME will:

- be accountable for their signature on the declaration of good health and good character or that of their designated midwife substitute
- have the right to refuse to sign any supporting declaration of good health and good character where the available evidence identifies that the student may not be of sufficient good health and/or good character to carry out safe and effective practice as a midwife³.

² We hold a list of all named LMEs on our website.

³ If an LME can't be assured of a student's good health and good character they must not sign the NMC declaration. The student can't, therefore, be recommended for admission to the midwives' part of the register. In order to reach this decision the LME may need to seek the support of the university's fitness to practice committee and have regard to our health and character guidance. Where a student is already on part one of the register as an adult nurse it may be appropriate to inform us why the student is not being recommended for admission to the register.

The student journey

Standards for pre-registration midwifery education programmes follow the student journey and are grouped under the following five headings:

1. Selection, admission and progression

Standards about an applicant's suitability and continued participation in a pre- registration midwifery programme.

2. Curriculum

Standards for the content, delivery and evaluation of the pre-registration midwifery programme.

3. Practice learning

Standards specific to pre-registration learning for midwives that takes place in practice settings.

4. Supervision and assessment

Standards for safe and effective supervision and assessment for pre-registration midwifery education programmes.

5. Qualification to be awarded

Standards which state the award and information concerning the NMC register.

1. Selection, admission and progression

- 1.1 AEs together with practice learning partners must confirm on entry to the programme that students.
 - 1.1.1 have completed a minimum of twelve years of general education ensuring that all those enrolled on pre-registration midwifery programmes are compliant with Article 40(2) of Directive 2005/36/EC regarding general education length as outlined in Annexe 1 of this document.
 - 1.1.2 are suitable for midwifery practice.
 - 1.1.3 demonstrate values in accordance with the Code.
 - 1.1.4 have capability to learn behaviours in accordance with the Code.
 - 1.1.5 have capability to develop numeracy skills required to meet programme outcomes.
 - 1.1.6 can demonstrate proficiency in English language⁴.
 - 1.1.7 have capability in literacy to meet programme outcomes.
 - 1.1.8 have capability for digital and technological literacy to meet programme outcomes.
 - 1.1.9 have health and character that is sufficient to enable safe and effective practice on entering and throughout the programme and when submitting the supporting declaration of health and character in line with the NMC's [health and character decision-making guidance](#). This includes satisfactory occupational health assessment and criminal record checks.
 - 1.1.10 are fully informed of the requirement to declare immediately any cautions or convictions, pending charges or adverse determinations made by other regulators, professional bodies and education establishments and that any declarations are dealt with promptly, fairly and lawfully.
- 1.2 The LME or designated midwife substitute will provide supporting declarations of health and character for students who have successfully completed a pre-registration midwifery programme.
- 1.3 NMC registered nurses are permitted entry to a shortened pre-registration midwifery programme which complies with Article 40(1)(b) of Directive 2005/36/EC included in Annexe 1 of this document.

⁴ See our English language requirements at www.nmc.org.uk/registration/joining-the-register/english-language-requirements.

- 1.4 Students require support throughout the programme to continuously develop their abilities in numeracy, literacy, digital and technological literacy to meet programme outcomes.
- 1.5 Where there is an interruption to the midwifery programme of education the programme providers must ensure that the student's acquired knowledge and skills remain valid, enabling them to achieve the necessary standards required to complete the programme⁵.
- 1.6 It is the responsibility of AElS to decide whether or not to accept an application for transfer. Students may transfer their programme with credit for prior learning only where:
- they transfer from one NMC approved pre-registration midwifery programme to another
 - they meet our requirements for good health and good character and these are confirmed by the LME
 - the student's prior learning can be mapped against the programme they wish to transfer to enabling them to meet all the necessary outcomes and standards on completion of the programme.

⁵ For the purpose of this standard, interruption means any absence from a programme of education other than annual leave, statutory or public holidays. When a student returns to a programme it is recommended that they have a period of orientation appropriate to the length of interruption.

2. Curriculum

AEIs together with their practice learning partners must:

- 2.1 ensure practice learning partners, women, families and advocacy groups are involved in the design, development, delivery and evaluation of pre-registration midwifery education programme(s).
- 2.2 ensure that midwifery programme(s) comply with the *Standards framework for nursing and midwifery education*, which includes the appointment of an appropriately qualified and experienced external examiner(s) who is in addition a midwife.
- 2.3 ensure that midwifery programmes comply with the *Standards for student supervision and assessment*.
- 2.4 ensure that the midwifery programme learning outcomes reflect the *Standards of proficiency for midwives* and the Code.
- 2.5 design and deliver midwifery programmes that support students and provide relevant and ongoing exposure to midwifery practice.
- 2.6 set out the general and professional content necessary to meet the *Standards of proficiency for midwives* and programme outcomes.
- 2.7 ensure technology-enhanced and simulated learning opportunities are used effectively and proportionately to support learning and assessment; especially where clinical circumstances occur infrequently but where a proficiency is nevertheless required.
- 2.8 ensure the midwifery curriculum provides an equal balance of 50 percent (2,300 hours) theory and 50 percent (2,300 hours) practice learning using a range of learning and teaching strategies.
- 2.9 ensure that programmes delivered in Wales comply with legislation which supports use of the Welsh language.
- 2.10 ensure that pre-registration midwifery programmes leading to registration as a midwife reflect Annexe 5, Point 5.5.1 of Directive 2005/36/E (see Annexe 1 and Article 40 and 42).
- 2.11 ensure that all pre-registration midwifery programmes meet the equivalent of the minimum programme length of three years set out in Article 40(1) of Directive 2005/36/E (see Annexe 1). Only where a student is already registered with the NMC as a nurse level 1 (adult) can the programme be shortened to no less than 3000 hours (18 month programmes) or 3600 (two year programmes).
- 2.12 all programme outcomes, including proficiencies, must be completed and achieved prior to successful completion of the programme.

3. Practice learning

AEIs together with their practice learning partners must:

- 3.1 provide practice learning opportunities that allow midwifery students to develop and meet the *Standards of proficiency for midwives* to deliver safe and effective care.
- 3.2 ensure that students experience the variety of practice expected of midwives to meet the holistic needs of women and their families.
- 3.3 ensure students experience the range of hours expected of practising midwives, taking account of students' individual needs and personal circumstances when allocating their practice learning opportunities including making [reasonable adjustments](#) for students with disabilities.
- 3.4 ensure that students are [supernumerary](#).
- 3.5 ensure all students experience continuity of carer and follow a number of women throughout the continuum of care.
- 3.6 ensure students experience midwifery care for a diverse population across a range of settings including when complications and additional care needs are required.
- 3.7 ensure students have learning opportunities enabling them to gain the broad principles of pharmacology and associated knowledge and numeracy skills necessary to
 - a. sell, supply and administer medicines specified under the Midwives' exemptions detailed in Schedule 17 of the Human Medicines Regulations
 - b. progress to gain a qualification in independent prescribing after initial registration.

4. Supervision and assessment

AEIs together with their practice learning partners must:

- 4.1. ensure that support, supervision, learning and assessment for student midwives complies with the *Standards for student supervision and assessment*.
- 4.2. provide students with constructive feedback throughout the programme to support their development.
- 4.3. ensure throughout the programme that midwifery students meet the *Standards of proficiency for midwives* and programme outcomes.
- 4.4. ensure all midwifery programmes include a numeracy assessment related to midwifery proficiencies and calculation of medicines which must be passed with a score of 100 percent.
- 4.5. assess midwifery students to confirm proficiency in preparation for professional practice as a midwife.
- 4.6. ensure that there is equal weighting⁶ in the assessment of theory and practice.
- 4.7. ensure that all proficiencies are recorded in an ongoing record of achievement which must demonstrate the achievement of proficiencies and skills set out in *Standards of proficiency for midwives*.
- 4.8. ensure the knowledge and skills for midwives set out in article 40(3) and the activities of a midwife set out in Article 42 of Directive 2005/36/EC have been met (see Annexe 1).

⁶ Weighting in this context means equal value is given to the assessment theory and practice.

5. Qualification to be awarded

AEIs together with practice learning partners must:

- 5.1 ensure that the minimum award for a pre-registration midwifery programme is a bachelor's degree.
- 5.2 notify student midwives during and before completion of the programme that they have five years to register their award with the NMC. In the event of a student failing to register their qualification within five years they will have to undertake additional education and training or gain such experience as specified in our standards⁷.

⁷ <https://www.nmc.org.uk/globalassets/sitedocuments/registration/registering-more-than-five-years-after-qualifying.pdf>

Annexe 1

Directive 2005/36/EC of the European parliament and of the council on the recognition of professional qualifications (as amended by Directive 2013/55/EU)

Article 40

The training of midwives

1. The training of midwives shall comprise a total of at least:
 - (a) specific full-time training as a midwife comprising at least three years of theoretical and practical study (route I) comprising at least the programme described in Annex V, point 5.5.1, or
 - (b) specific full-time training as a midwife of 18 months' duration (route II), comprising at least the study programme described in Annex V, point 5.5.1, which was not the subject of equivalent training of nurses responsible for general care.

The Member States shall ensure that institutions providing midwife training are responsible for coordinating theory and practice throughout the programme of study.

The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the amendment of the list set out in point 5.5.1 of Annex V with a view to adapting it to scientific and technical progress.

The amendments referred to in the third sub-paragraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

2. Admission to training as a midwife shall be contingent upon one of the following conditions:
 - (a) completion of at least 12 years of general school education or possession of a certificate attesting success in an examination, of an equivalent level, for admission to a midwifery school for route I;
 - (b) possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V for route II.

3. Training as a midwife shall provide an assurance that the professional in question has acquired the following knowledge and skills:
- (a) detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology;
 - (b) adequate knowledge of the ethics of the profession and the legislation relevant for the practice of the profession;
 - (c) adequate knowledge of general medical knowledge (biological functions, anatomy and physiology) and of pharmacology in the field of obstetrics and of the newly born, and also knowledge of the relationship between the state of health and the physical and social environment of the human being, and of his behaviour;
 - (d) adequate clinical experience gained in approved institutions allowing the midwife to be able, independently and under his own responsibility, to the extent necessary and excluding pathological situations, to manage the antenatal care, to conduct the delivery and its consequences in approved institutions, and to supervise labour and birth, postnatal care and neonatal resuscitation while awaiting a medical practitioner;
 - (e) adequate understanding of the training of health personnel and experience of working with such personnel.

Article 41

Procedures for the recognition of evidence of formal qualifications as a midwife

1. The evidence of formal qualifications as a midwife referred to in point 5.5.2 of Annex V shall be subject to automatic recognition pursuant to Article 21 in so far as they satisfy one of the following criteria:
 - (a) full-time training of at least three years as a midwife, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 4,600 hours of theoretical and practical training, with at least one third of the minimum duration representing clinical training;
 - (b) full-time training as a midwife of at least two years, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 3,600 hours, contingent upon possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V;
 - (c) full-time training as a midwife of at least 18 months, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 3,000 hours, contingent upon possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V, and followed by one year's professional practice for which a certificate has been issued in accordance with paragraph 2.
2. The certificate referred to in paragraph 1 shall be issued by the competent authorities in the home Member State. It shall certify that the holder, after obtaining evidence of formal qualifications as a midwife, has satisfactorily pursued all the activities of a midwife for a corresponding period in a hospital or a health care establishment approved for that purpose.

Article 42

Pursuit of the professional activities of a midwife

1. The provisions of this section shall apply to the activities of midwives as defined by each Member State, without prejudice to paragraph 2, and pursued under the professional titles set out in Annex V, point 5.5.2.
2. The Member States shall ensure that midwives are able to gain access to and pursue at least the following activities:
 - (a) provision of sound family planning information and advice;
 - (b) diagnosis of pregnancies and monitoring normal pregnancies; carrying out the examinations necessary for the monitoring of the development of normal pregnancies;
 - (c) prescribing or advising on the examinations necessary for the earliest possible diagnosis of pregnancies at risk;
 - (d) provision of programmes of parenthood preparation and complete preparation for childbirth including advice on hygiene and nutrition;
 - (e) caring for and assisting the mother during labour and monitoring the condition of the fetus in utero by the appropriate clinical and technical means;
 - (f) conducting spontaneous deliveries including where required episiotomies and in urgent cases breech deliveries;
 - (g) recognising the warning signs of abnormality in the mother or infant which necessitate referral to a doctor and assisting the latter where appropriate; taking the necessary emergency measures in the doctor's absence, in particular the manual removal of the placenta, possibly followed by manual examination of the uterus;
 - (h) examining and caring for the newborn infant; taking all initiatives which are necessary in case of need and carrying out where necessary immediate resuscitation;
 - (i) caring for and monitoring the progress of the mother in the post-natal period and giving all necessary advice to the mother on infant care to enable her to ensure the optimum progress of the newborn infant;
 - (j) carrying out treatment prescribed by doctors;
 - (k) drawing up the necessary written reports.

V.5. MIDWIFE

5.5.1. Training programme for midwives (Training types I and II)

The training programme for obtaining evidence of formal qualifications in midwifery consists of the following two parts:

A. Theoretical and technical instruction

a. General subjects

- Basic anatomy and physiology
- Basic pathology
- Basic bacteriology, virology and parasitology
- Basic biophysics, biochemistry and radiology
- Paediatrics, with particular reference to newborn infants
- Hygiene, health education, preventive medicine, early diagnosis of diseases
- Nutrition and dietetics, with particular reference to women, newborn and young babies
- Basic sociology and socio-medical questions
- Basic pharmacology
- Psychology
- Principles and methods of teaching
- Health and social legislation and health organisation
- Professional ethics and professional legislation
- Sex education and family planning
- Legal protection of mother and infant.

b. Subjects specific to the activities of midwives

- Anatomy and physiology
- Embryology and development of the fetus
- Pregnancy, childbirth and puerperium
- Gynaecological and obstetrical pathology
- Preparation for childbirth and parenthood, including psychological aspects
- Preparation for delivery (including knowledge and use of technical equipment in obstetrics)
- Analgesia, anaesthesia and resuscitation
- Physiology and pathology of the newborn infant
- Care and supervision of the newborn infant
- Psychological and social factors.

B. Practical and clinical training

This training is to be dispensed under appropriate supervision:

- Advising of pregnant women, involving at least 100 pre-natal examinations
- Supervision and care of at least 40 pregnant women
- Conduct by the student of at least 40 deliveries; where this number cannot be reached owing to the lack of available women in labour, it may be reduced to a minimum of 30, provided that the student assists with 20 further deliveries
- Active participation with breech deliveries. Where this is not possible because of lack of breech deliveries, practice may be in a simulated situation
- Performance of episiotomy and initiation into suturing. Initiation shall include theoretical instruction and clinical practice. The practice of suturing includes suturing of the wound following an episiotomy and a simple perineal laceration. This may be in a simulated situation if absolutely necessary
- Supervision and care of 40 women at risk in pregnancy, or labour or post-natal period
- Supervision and care (including examination) of at least 100 post-natal women and healthy newborn infants

- Observation and care of the newborn requiring special care, including those born pre-term, post-term, underweight or ill
- Care of women with pathological conditions in the fields of gynaecology and obstetrics
- Initiation into care in the field of medicine and surgery. Initiation shall include theoretical instruction and clinical practice.

The theoretical and technical training (Part A of the training programme) shall be balanced and coordinated with the clinical training (Part B of the same programme) in such a way that the knowledge and experience listed in this Annex may be acquired in an adequate manner.

Clinical instruction shall take the form of supervised in-service training in hospital departments or other health services approved by the competent authorities or bodies. As part of this training, student midwives shall participate in the activities of the departments concerned in so far as those activities contribute to their training. They shall be taught the responsibilities involved in the activities of midwives.

Glossary

Reasonable adjustments: where a student requires reasonable adjustment related to a disability. We also use it to mean adjustment relating to any protected characteristics as set out in the equalities and human rights legislation.

Approved education institutions (AEIs): the status awarded by the NMC to an institution, or part of an institution, or combination of institutions that works in partnership with practice placement and work placed learning providers. AEIs will have provided us with assurance that they are accountable and capable of delivering NMC approved education programmes.

Educators: in the context of the NMC Standards for education and training educators are those who deliver, support, supervise and assess theory, practice and /or work placed learning.

Equalities and human rights legislation: prohibits unlawful discrimination on the basis of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation and other characteristics. Anti- discrimination laws can be country specific and there are some legally binding international protections.

Health and character requirements: as stipulated in NMC legislation (Articles 9(2)(b) and 5(2)(b) of the Nursing and Midwifery Order 2001) 'good health' means that the applicant is capable of safe and effective practice either with or without reasonable adjustments. It does not mean the absence of a health condition or disability. Each applicant seeking admission to the register or to renew registration, whether or not they have been registered before, is required to declare any pending charges, convictions, police cautions and determinations made by other regulatory bodies.

Practice learning partners: organisations that provide practice learning necessary for supporting pre-registration and post- registration students in meeting proficiencies and programme outcomes.

Quality assurance: NMC processes for making sure all AEIs and their approved education programmes comply with our standards.

Simulation: an artificial representation of a real world practice scenario that supports midwifery student development through experiential learning with the opportunity for repetition, feedback, evaluation and reflection. Effective simulation facilitates safety by enhancing knowledge, behaviours and skills.

Stakeholders: any person, group or organisation that has an interest or concern in the situation in question, and may affect or be affected by its actions, objectives or policies. In the context of the NMC Standards for education and training this includes students, educators, partner organisations, service users, carers, employers, other professionals, other regulators and education commissioners.

Midwifery student: any individual enrolled onto an NMC approved education programme whether full time or less than full time.

Supernumerary: Students in practice or work placed learning must be supported to learn without being counted as part of the staffing required for safe and effective care in that setting. Placements should enable students to learn to provide safe and effective care, not merely to observe; students can and should add real value to care. The contribution students make will increase over time as they gain proficiency and they will continue to benefit from ongoing guidance and feedback. Once a student has demonstrated that they are proficient, they should be able to fulfil tasks without direct oversight. The level of supervision a student needs is based on the professional judgement of their supervisors, taking into account any associated risks and the students' knowledge, proficiency and confidence.



The role of the Nursing and Midwifery Council

What we do

We're the independent regulator for nurses, midwives and nursing associates. We hold a register of all the 690,000 nurses, midwives and nursing associates who can practise in the UK.

Better and safer care for people is at the heart of what we do, supporting the healthcare professionals on our register to deliver the highest standards of care.

We make sure nurses, midwives and nursing associates have the skills they need to care for people safely, with integrity, expertise, respect and compassion, from the moment they step into their first job.

Learning does not stop the day nurses, midwives and nursing associates qualify. To promote safety and public trust, we require professionals to demonstrate throughout their career that they are committed to learning and developing to keep their skills up to date and improve as practitioners.

We want to encourage openness and learning among healthcare professions to improve care and keep the public safe. On the occasions when something goes wrong and people are at risk, we can step in to investigate and take action, giving patients and families a voice as we do so.

These standards were approved by Council at their meeting on (DATE TBC).