



# End-point assessment plan for the Midwife (Degree) apprenticeship standard at level 6

Standard reference number	Level of this EPA plan	Integrated
ST0794	6	Non-integrated

## Contents

Introduction and overview	2
EPA summary table	3
Length of end-point assessment period:	4
Order of assessment methods	4
Gateway	5
Assessment Methods	6
Weighting of assessment methods	10
Grading	10
Roles and responsibilities	12
Internal Quality Assurance (IQA)	14
Re-sits and retakes	14
Affordability	15
Reasonable adjustments	15
Mapping of KSBs	16

## Introduction and overview

This document sets out the requirements for end-point assessment (EPA) for the Midwife apprenticeship standard. It is for end-point assessment organisations (EPAOs) who need to know how EPA for this apprenticeship must operate. It will also be of interest to Midwife apprentices, their employers and training providers.

Full time apprentices will typically spend 48 months on-programme (before the gateway) working towards the occupational standard, with a minimum of 20% off-the-job training. All apprentices will spend a minimum of 12 months on-programme.

The EPA period should only start, and the EPA be arranged, once the employer is satisfied that the apprentice is consistently working at or above the level set out in the occupational standard, all of the pre-requisite gateway requirements for EPA have been met and that they can be evidenced to an EPAO.

As a gateway requirement and prior to taking the EPA, apprentices must complete all approved qualifications mandated in the Midwife standard.

These are:

- a level 6 degree in Midwifery or (where an apprentice already holds a level 6 degree) a level 7 masters degree in Midwifery, or, where the apprentice is already an NMC registered Adult Nurse, a Level 6 or 7 qualification approved by the NMC
- English and mathematics at level 2

The EPA must be completed within an EPA period lasting a maximum of 3 month(s), beginning when the apprentice has met the EPA gateway requirements.

The EPA consists of 2 distinct assessment methods.

The individual assessment methods will have the following grades:

Assessment Method 1 **Demonstration of Practice** graded pass/fail

Assessment Method 2 **Professional Discussion** graded pass/distinction/fail

Performance in the EPA will determine the overall apprenticeship grades of pass/distinction/fail.

## EPA summary table

<b>On-programme</b> (typically 48 months)	Training to develop the occupational standard's knowledge, skills and behaviours.
<b>End Point Assessment Gateway</b>	<ul style="list-style-type: none"> <li>• Employer is satisfied the apprentice is consistently working at, or above, the level of the occupational standard.</li> <li>• English/mathematics Level 2</li> </ul> <p>Apprentices must complete the following approved qualifications mandated in the standard:</p> <ul style="list-style-type: none"> <li>• a level 6 degree in Midwifery or (where an apprentice already holds a level 6 degree) a level 7 masters degree in Midwifery or, where the apprentice is already an NMC registered Adult Nurse, a Level 6 or 7 qualification approved by the NMC</li> </ul>
<b>End Point Assessment</b> (3 months)	Assessment Method 1: Demonstration of Practice Assessment Method 2: Professional Discussion

## Length of end-point assessment period:

The EPA (including all assessment methods) must be completed within 3 months of the first part of the end-point assessment commencing and within the total EPA period.

## Order of assessment methods

The assessment methods can be delivered in any order.

## Gateway

The EPA period should only start once the employer is satisfied that the apprentice is consistently working at or above the level set out in the occupational standard, that is to say they are deemed to have achieved occupational competence. In making this decision, the employer may take advice from the apprentice's training provider(s), but the decision must ultimately be made solely by the employer.

In addition to the employer's confirmation that the apprentice is working at or above the level in the occupational standard, the apprentice must have completed the following gateway requirements prior to beginning EPA:

- English and mathematics at level 2.
- For those with an education, health and care plan or a legacy statement the apprenticeships English and mathematics minimum requirement is Entry Level 3 and British Sign Language qualification are an alternative to English qualifications for whom this is their primary language.

Apprentices must complete the following approved qualifications as mandated in the standard:

- a level 6 degree in Midwifery or (where an apprentice already holds a level 6 degree) a level 7 masters degree in Midwifery, or, where the apprentice is already an NMC registered Adult Nurse, a Level 6 or 7 qualification approved by the NMC

# Assessment Methods

## Assessment Method 1: Demonstration of Practice

### Overview

Apprentices must be observed by the station independent assessor and overseen by the senior independent assessor completing 4 demonstrations of practice stations in which they will demonstrate the duties and underpinning KSBs assigned to this assessment method. The end-point assessment organisation will arrange when the demonstration of practice will take place. The demonstration of practice stations must be carried out over a maximum total assessment time of 2 hours (+10% at the senior independent assessor's discretion if moving between demonstrations takes more or less time than the allocated 5 minutes). The demonstrations may not be split, other than to allow comfort breaks as necessary. The stations can be assessed in any order.

### Demonstration of Practice

- The senior independent assessor will be in charge of the 4 stations and the station independent assessors during this assessment method
- The demonstration of practice is considered a single assessment
- There will be four stations that assess KSBs mapped to this method
- All four demonstration stations must be passed.
- The station independent assessor will ask follow-up questions to clarify points on the observation and or ask questions on any gaps in the knowledge skills and or behaviours for the station during the question and answer session.
- Some KSBs relate to exceptional circumstances and therefore may not readily be seen and must be included in the station question and answer sessions: K27, K28, K29, K44, K49, K50, S23, S24 and S37.
- The station independent assessors will record the pass/fail for the station they are observing
- The station independent assessors will pass their grade to the senior independent assessor
- The pass/fail grades for the demonstration of practice station will be collated by the senior independent assessor at the end of the demonstration of practice.
- Each station will take a total of 30 minutes:
  - 5 minutes for reading any scenarios
  - 15 minutes to carry out the activity
  - 5 minutes question and answer session
  - 5 minutes to move between stations

### The senior independent assessor will:

- Be in charge of the 4 stations, the station independent assessors and the people involved in the demonstration of practice and will coordinate the assessment
- Select the scenarios for each station
- Determine the final grading decisions
- Check the controlled environment is suitable and has the required equipment for the apprentice to demonstrate the KSBs mapped to the demonstration of practice

- Check all the stations are set up properly
- Brief the station independent assessors and 'person' (actor) prior to the assessment commencing, using the brief provided by the EPAO, checking they have understood the brief provided
- Use the structured template provided by the EPAO to conduct the assessment
- Use the grading matrix provided by the EPAO to collate the grades provided by the station independent assessors
- Grade the apprentice for the demonstration of practice

#### **The station independent assessors will:**

- Adhere to confidentiality about all aspects of the assessment and the brief they have been provided with
- Observe the station assigned to them by the senior independent assessor
- Ensure the apprentice has demonstrated the duties and KSBs
- Observe one apprentice at a time demonstrating the KSBs that are mapped to that station
- Grade the apprentice using the grading matrix provided by the EPAO
- Pass the grade recorded to the senior independent assessor
- Time the assessment ensuring the apprentice carries out all activities at the appointed times

#### **The 'person' will:**

- Follow the brief to act as the woman at the stations
- Be a person with whom the apprentice can interact with to demonstrate practical assessment techniques or interventions
- Be sufficiently briefed in advance
- Adhere to confidentiality about all aspects of the assessment and the brief they have been provided with

#### **Mannequins:**

Mannequins will be used as part of the demonstrations of practice. The types of mannequin and the range of functions available in the sector varies considerably. The minimum requirements for the mannequins to be used during this assessment are set out below:

- Female mannequin – must be at least a pregnant torso with a fetus plus placenta and umbilical cord
- Baby mannequin – must be a newborn mannequin capable of being used for a simulated resuscitation

Mannequins with a greater level of functionality may be used instead, as long as they still meet the minimum requirements specified above.

#### **The rationale for this assessment method:**

An observation of practice in a live setting was not selected, as this will not cover the breadth and depth of practice required. Instead a demonstration of practice avoids situations where individuals are not available on the day, do not give consent to being observed with the apprentice and other issues around confidentiality. This method will ensure consistency by using simulation in a range of day to day scenarios the apprentice undertakes, where they can be assessed on their knowledge, skills and

behaviours. Mannequins will be used to reduce the numbers of people needed to run the assessment as they can simulate pregnancy, labour and birth. This is a cost-effective way to deliver large number of assessments

## Delivery

Just before the assessment, apprentices must be provided with both written and verbal instructions on the tasks they must complete, including the timescales they are working to.

**The demonstration of practice should be conducted in the following way:**

**The EPAO will:**

- Design 4 demonstration of practice stations to assess the KSBs mapped to this method:
  - **Station 1 – Antenatal:** The apprentice will demonstrate a personalised safe, effective and appropriate antenatal assessment
  - **Station 2 - Labour and birth:** The apprentice will demonstrate personalised safe, effective and appropriate care during labour and birth
  - **Station 3 - Postnatal:** The apprentice will demonstrate personalised safe, effective and appropriate care of a postnatal woman
  - **Station 4 - Care of the newborn:** The apprentice will demonstrate personalised safe, effective and appropriate care of a newborn baby
- Provide a specification of how the stations should be set up, including the equipment and resources required for each one
- Provide a brief for the senior independent assessor to use with the team of station independent assessors and the 'person' (person acting as the woman)
- Provide a grading matrix for the station independent assessors to use at each station
- Provide a grading matrix for the senior independent assessor to use to grade the whole demonstration of practice
- The stations can be completed in any order

**The apprentice will:**

- complete 4 stations, demonstrating that they can:
  - Assess, care and support a woman and baby during the antenatal, labour and postnatal period
  - Make evidence-based decisions
  - Calculate and administer medication
  - Apply their underpinning knowledge to respond to situations as they arise
  - Recognise, refer and escalate deviations from the norm
  - Keep records
  - Communicate effectively
  - adhere to exam conditions during the demonstration of practice

## Overview of individual stations

### Station 1 – Antenatal

- Title: The apprentice needs to demonstrate a personalised, safe, effective and appropriate antenatal assessment.
- Description: The apprentice will conduct a holistic antenatal assessment with a 'person'

At this station the apprentice will:

- Be presented with one scenario
- Communicate appropriately with the woman
- Obtain valid consent
- Take a history and assess the woman's needs
- Conduct an antenatal examination
- Develop a personalised care plan with the woman
- Keep accurate records
- Work safely within their scope of practice

For this station the EPAO will:

- Develop a 'bank of scenarios' of women at various gestations (600 words per scenario)
- Provide a written brief for the 'person' (500 words)
- Ensure the relevant equipment is available to conduct the assessment for this
- Provide a 'female mannequin' to be used as required in conjunction with the 'person' as required
- Provide a 'bank of questions' for the station independent assessors

Scenarios:

The apprentice will be given a scenario of no more than a single page (600 words). Scenarios for this station must focus on a gestation point and the different needs or situations associated with this, below are some examples:

- 36-week antenatal appointments for an uncomplicated pregnancy
- Booking appointment – first contact
- 28-week appointment, non-English speaking not previously booked in this country

These examples are just for illustrative purposes, it is up to the EPAO to develop a suitable 'bank of scenarios' of this type to be used at each station during the demonstration of practice.

### Station 2 - Labour and Birth

- **Title:** The apprentice needs to demonstrate personalised, safe, effective and appropriate care during labour and birth.
- **Description:** The apprentice will provide care and support to a woman during labour and birth that meets her needs holistically



At this station the apprentice will:

- Communicate appropriately throughout the assessment as if the 'female mannequin' is a real woman
- Obtain valid consent
- Assess the woman's needs based on her history
- Provide labour care in line with local and national guidelines
- Implement a personalised care plan including pain relief
- Safely administer medication as required
- Keep accurate records
- Recognise an emergency situation, managing and escalating the situation appropriately

For this station the EPAO will:

- Develop a 'bank' scenarios of women in labour and during birth, including her history (600 words per scenario)
- Provide a written brief for the person acting as a woman in labour (500 words)
- Ensure the relevant equipment is available to conduct the assessment for this
- Provide a 'female' and 'baby mannequin' to be used in conjunction with the 'person' as required
- Provide a 'bank of questions' for the station independent assessors

Scenarios:

The apprentice will be given a scenario of no more than 600 words. Scenarios for this station must focus on different labour and birth experiences and different needs or situations including emergency situations. Below are some examples:

- Normal labour and birth
- Shoulder dystocia
- Breech dystocia
- Intrapartum cord prolapse
- Augmentation of labour

These examples are just for illustrative purposes, it is up to the EPAO to develop a suitable bank of scenarios of this type to be used at each station during the demonstration of practice.

### Station 3 - Postnatal care

- **Title:** The apprentice needs to demonstrate personalised, safe, effective and appropriate care of a postnatal woman
- **Description:** The apprentice will provide care and support to a woman during the postnatal period that meets her needs holistically

At this station the apprentice will:

- Communicate appropriately with the woman
- Obtain valid consent
- Conduct a holistic postnatal examination with a woman that assesses her needs
- Implement a personalised care plan including appropriate referral

- Recognise any deviations from the norm, managing and escalating the situation appropriately
- Keep accurate records
- Work safely within their scope of practice

For this station the EPAO will:

- Develop a 'bank' scenarios of women in the postnatal period, including her history (600 words per scenario)
- Provide a written brief for the 'person' acting as a postnatal woman (500 words)
- Ensure the relevant equipment is available to conduct the assessment for this
- Provide a 'female mannequin' and 'baby mannequin' to be used in conjunction with the 'person' as required
- Provide a 'bank of questions' for the station independent assessors

Scenarios:

The apprentice will be given a scenario of no more than 600 words. Scenarios for this station must focus on different postnatal experiences and different needs or situations. Below are some examples:

- High fundus
- Offensive lochia
- Extremes of emotion
- Issues with bonding
- Excessive bleeding

These examples are just for illustrative purposes, it is up to the EPAO to develop a 'suitable bank' of scenarios of this type to be used at each station during the demonstration of practice.

#### Station 4 - Care of the newborn

- **Title:** The apprentice needs to demonstrate personalised, safe, effective and appropriate care of a newborn baby
- **Description:** Provide holistic care and support to a newborn baby that meets their needs

At this station the apprentice will:

- Communicate and interact appropriately throughout the assessment
- Conduct a holistic examination and assessment of a baby
- Implement a personalised care plan
- Recognise any deviations from the norm, managing and escalating the situation appropriately
- Keep accurate records
- Work safely within their scope of practice

For this station the EPAO will:

- To develop a 'bank' of scenarios of a newborn baby, including their history and that valid consent has already been given (600 words per scenario)
- Provide a 'baby mannequin' and ensure that any other relevant equipment is available to conduct the assessment for this

- Provide a 'bank of questions' for the station independent assessors

#### Scenarios:

The apprentice will be given a scenario of no more than 600 words. Scenarios for this station must focus on newborn babies and their different needs or situations. Below are some examples:

- Baby born blue, floppy, not breathing
- Low temperature noted during initial assessment
- Concerns about feeding

These examples are just for illustrative purposes, it is up to the EPAO to develop a suitable 'bank of scenarios' of this type to be used at each station during the demonstration of practice.

In the event of re-sits or re-takes the apprentice will be presented with a different set of scenarios and they will re-sit or re-take all stations, not just the failed one.

#### Grading the stations

Each station will be graded pass/fail by the station independent assessor in order to determine the overall grade for this method, using the grading matrix provided by the EPAO. See grading section for the mapped KSBs.

#### Questions and resources development

EPAOs will produce specifications to outline in detail how the demonstration of practice will operate, what it will cover and what should be looked for. It is recommended that this be done in consultation with representative employers. EPAOs should put measures and procedures in place to maintain the security and confidentiality of their specifications if employers are consulted. Specifications must be standardised by the EPAO.

EPAOs must develop a 'bank' of scenarios of sufficient size to prevent predictability and review them regularly (and at least once a year) to ensure they, and the specifications they contain, are fit for purpose. The specifications must be varied yet allow assessment of all the relevant KSBs.

#### Venue

Demonstrations of practice must be conducted in one of the following locations:

- a suitable venue selected by the EPAO (e.g. a training provider's premises or another employer's premises)

#### The venue must:

- offer a designated space, in a quiet room that is free from distractions that can facilitate the EPA
- if the stations are set out in the same room the venue must allow for the stations to be placed at suitable intervals to minimise the chance of overhearing or seeing what is happening at other stations since more than one apprentice will be in the room at the same time

- offer a separate room so that apprentices waiting to do their demonstration of practice are not in contact with those who have finished to avoid conferring

## Support material

EPAOs will produce the following material to support this assessment method:

- an outline of each station, how it should be set up and with what equipment
- A brief for the senior independent assessor to use with the station independent assessors and the 'person'
- A structured template for the senior independent assessor to use for managing the assessment to ensure consistency
- A grading matrix for the senior independent assessor to use to ensure consistency and allow for moderation
- A grading matrix for the station independent assessors to use to ensure consistency
- Materials and equipment including mannequins

## EPAOs will also

- Ensure an appropriate controlled environment is provided for the assessment.

## Other relevant information

Apprentices will enter the assessment stations on a rolling basis, moving from one to the other as directed by the senior independent assessors until they have completed all four stations. All stations will be in use simultaneously, each one managed by a station independent assessor who will time and grade the station, using a standardised grading matrix developed by the EPAO. The senior independent assessor will circulate freely between the 4 stations. Apprentices will be under exam conditions for the demonstration of practice so that they cannot discuss the stations and activities with each other. A 'person' will be used on some of the stations to simulate real-life situations.

## Assessment Method 2: Professional Discussion

### Overview

This assessment will take the form of a professional discussion, which must be appropriately structured to draw out the best of the apprentice's competence and excellence and cover the duties and KSBs assigned to this assessment method. It will focus on analysis of a given scenario and coverage of prior learning or activity through discussion.

The scenario will be previously unseen by the apprentice, developed and provided by the EPAO to support the professional discussion. The scenario can be either written or a video:

- a written scenario is between 400 and 500 words
- a video scenario is 2 minutes in duration

The scenario will present the apprentice with a situation that they are allowed to first prepare and then discuss with the independent assessor what they have read or seen and to give examples from their own experiences of how they have acted in similar situations. The independent assessor will have prepared several discussion areas using a 'bank of questions' provided by the EPAO that will enable the apprentice to evidence the required skills, knowledge and behaviours mapped to the professional discussion assessment. The independent assessor can ask follow up questions during the discussion.

The apprentice is allowed 20 minutes preparation, prior to the 40-minute discussion, to read, look at or watch the scenario and make notes for the discussion.

The EPAO will devise a 'bank of scenarios' and 'bank of questions' of sufficient size to prevent predictability, review them regularly (and at least once a year) to ensure that they, and the specifications they contain, are fit for purpose. The EPAO will ensure that scenarios are of comparable demand.

In the event of re-sits or re-takes the apprentice will be presented with a different scenario.

The professional discussion can take place in any of the following:

- employer's premise
- a suitable venue selected by the EPAO (e.g. a training provider's premises)

The rationale for this assessment method is:

A professional discussion is not simply a question and answer session but a two-way dialogue between the apprentice and independent assessor. It allows the apprentice to use standardised 'scenarios' as a starting point to explore their own practice and experiences with the independent assessor. A professional discussion is a well-recognised method of checking knowledge, skills and behaviours and is widely used within the health sector.

## Delivery

The independent assessor will conduct and assess the professional discussion. The apprentice will have time to prepare and review the scenario before the professional discussion begins

The professional discussion must last for 60 minutes (+ 10% at the independent assessor's discretion to allow an apprentice to finish the answer they are giving). 20 minutes is allocated for reading and preparing the scenario and 40 minutes for the discussion. Further time may be granted for apprentices with appropriate needs, for example where signing services are required.

The professional discussion will allow the apprentice to demonstrate the depth and breadth of their midwifery knowledge, skills and behaviours required to practice both safely and effectively. As a structured, in-depth two-way conversation between the independent assessor and apprentice, the professional discussion will provide an effective holistic assessment of complex understanding and knowledge. This is valuable in determining not only what and how an apprentice is performing, but also:

- how they work in line with statutory regulation
- how they provide programmes of care and support to women
- how they work as an effective member of the wider health and social care team

The discussion format is an excellent method to cover the range of knowledge, skills and behaviours required.

The Professional Discussion will assess the KSBs mapped to the following discussion areas:

- **Area 1 – Professionalism:** How the apprentice practices in accordance with the NMC standards, within the limits of own competence and experience, developing and improving their own practice
- **Area 2 – Programmes of care:** How the apprentices determines and provides programmes of care and support for women
- **Area 3 – Teamwork:** How the apprentice works as part of the wider health and social care team

The apprentice must evidence how they have carried out the duties and KSBs assigned to the professional discussion assessment. See grading section for the mapped KSBs.

During the discussion, the independent assessor will generate follow-up questions themselves, covering any gaps in the discussion using the discussion areas outlined by the EPAO.

The professional discussion will be conducted as set out here:

The professional discussion is led by the independent assessor with the apprentice on an individual basis. Video conferencing can be used to conduct the professional discussion, but the EPAO must have processes in place to verify the identity of the apprentice and ensure the apprentice is not being aided in some way.

The independent assessor must use the assessment tools and procedures that are set by the EPAO to record the professional discussion.

The professional discussion is graded distinction/pass/fail. The independent assessor will make all grading decisions.

## Venue

The professional discussion should take place in a quiet room, free from distractions.

## Other relevant information

A structured question and scenario bank must be developed by EPAOs. The bank must be of sufficient size to prevent predictability. It must be reviewed regularly (and at least once a year) to ensure that it, and its content, are fit for purpose. The scenarios relating to the underpinning knowledge, skills and behaviours, must be varied yet allow assessment of the relevant KSBs. The EPAO will provide a discussion template for the assessor to record assessment decisions.

EPAOs must ensure that apprentices have a different structured discussion point template in the case of re-sits/re-takes.

Independent assessors must be developed and trained by the EPAO in the conduct of professional discussions and reaching consistent judgement.

EPAOs will produce the following material to support this assessment method:

- A written (400 to 500 words) or video (2 minutes) scenario.
- a structured discussion point template for the independent assessor to use during the professional discussion
- The discussion areas and mapped duties and KSBs
- A grading matrix for the independent assessor to use

## Scenarios

The apprentice will be given a scenario. The scenario will aim to draw out the KSBs for this method through discussion where the independent assessor will draw discussion points from the template provided and use follow up questions to ensure that all the discussion areas are covered. The apprentice must also draw from their own experience examples to demonstrate the KSBs.

Below are some examples of the types of scenarios that may be used:

- Safeguarding
- Professional conduct
- Health and safety
- Ethical dilemmas
- Confidentiality
- Planning for and providing antenatal, labour/birth and postnatal care
- Empowerment
- Public health
- Delegation
- Teamwork

These examples are just illustrative, it is up to the EPAO to develop a suitable 'bank of scenarios' of this type to be used during the professional discussion to enable the apprentice to evidence their KSBs for this method.

In the event of re-sits or re-takes the apprentice will be presented with a different scenario.

## Weighting of assessment methods

All assessment methods are weighted equally in their contribution to the overall EPA grade.

## Grading

### Assessment Method 1: Demonstration of Practice

The demonstration of practice is graded pass or fail.

#### Pass criteria

To achieve a **pass** in the demonstration of practice the apprentice will:

1. Demonstrate how they use a range of suitable and effective assessments to care and support a woman and baby during the antenatal period, applying their knowledge, skills and experience to make reliable and valid judgements, and responding appropriately to the presenting situation in line with professional regulatory standards and codes of conduct (K12, K13, K14, S12, S13, S14, K26, K27, K28, K29, S21, S22, S23)
2. Demonstrate how they use a range of suitable and effective assessments to care and support a woman and baby during labour and birth, applying their knowledge, skills and experience to make reliable and valid judgements, and responding appropriately to the presenting situation in line with professional regulatory standards and codes of conduct (K32, K33, K34, K35, S26, S27, S28, S29, K36, K37, K38, K39, S39, S31, S32)
3. Demonstrate how they use a range of suitable and effective assessments to care and support a woman and baby during the postnatal period, applying their knowledge, skills and experience to make reliable and valid judgements, and responding appropriately to the presenting situation in line with professional regulatory standards and codes of conduct (K40, K41, K42, K43, K44, S33, S34, S35, S36, S37)
4. Demonstrate how they use a range of suitable and effective assessments to care and support a newborn baby, applying their knowledge, skills and experience to make reliable and valid judgements, and responding appropriately to the presenting situation in line with professional regulatory standards and codes of conduct (S38, S39, S40, S41, K45, K46, K47, K48, K49)
5. Demonstrate accurate calculation and safe administration of medication (K50, K51, S42)
6. Recognise deviation from the norm, referring and escalating appropriately and in a timely manner (K30, K31, S24, S25, S41, K49)
7. Keep accurate and timely records (K52, S43)
8. Communicate clearly, effectively and professionally at all times (K8, K9, K10, K11, S8, S9, S10, S11)
9. Consistently display the behaviours expected of a midwife (B1, B2, B3, B4, B5)



## Assessment Method 2: Professional Discussion

The professional discussion is graded pass, distinction or fail.

### Pass criteria

To achieve a **pass** in the professional discussion the apprentice will:

1. Critically analyse how they have worked in line with legislation, standards, codes of conduct, national and local policies and procedures relevant to their practice as a midwife (K1, K4, K7, S1, S2, S4, S6, S7)
2. Describe, analyse and evidence how they have developed, implemented, assessed, reviewed and adjusted plans of care with women, making evidence-based decisions as an autonomous practitioner and evaluating their impact. (K15, K16, K17, K18, K19, K20, K21, K22, K23, K24, K25, S15, S16, S17, S18, S19, S20)
3. Evidence how they have worked effectively as part of the wider health and social care team, delegating, supervising and referring as required. (K53, K54, K55, K56, K57, S44, S45, S46, S47, S3, K2, K3)
4. Evidence how they have effectively developed themselves personally and professionally (K5, K6, S5)
5. Consistently display the behaviours expected of a midwife (B1, B2, B3, B4, B5)

### Distinction criteria

To achieve a **distinction** in the professional discussion the apprentice will achieve all of the pass criteria listed above plus:

1. Critically evaluates, appraises and synthesises evidence across two or more KSBs and demonstrates the application of them in their practice as a midwife within the framework of clinical accountability and responsibility. (K1, K13, K16, K45, S1, S13, S38, B1, B2, B4).
2. Give examples that show they have worked with women in complex circumstances, such as when the woman does not want to be empowered or take ownership of their care and onward wellbeing or when there have been safeguarding concerns or emergencies, to assess and review the situation making autonomous and reliable decisions to enable the best outcome for the woman and baby (K11, K15, K16, K17, K18, K19, K20, K21, K22, K23, K24, K25, S15, S16, S17, S18, S19, S20, S31, S41)
3. Explores and evaluates a range of solutions or options and selects for implementation the one that will benefit their practice and improve patient care (B2, B4)
4. Shows commitment to continuous professional and personal development, giving examples of how they have evaluated and reflected on their own practice to assess, measure and improve it appropriately using local and national standards and reflective frameworks that impact on patient outcomes (K5, K6, S5)
6. Proactively lead a change process that results in either improved patient outcome or improved efficiency (K15, K16, K17, K18, K19, K20, K21, K22, K23, K24, K25, S15, S16, S17, S18, S19, S20)
5. Give an example of how they have led risk assessment and or put measures in place to mitigate risks (K38, K39)

## Overall EPA grading

The apprentice must pass both the demonstration of practice and the professional discussion to pass the EPA.

Grades from individual assessment methods should be combined in the following way to determine the grade of the EPA as a whole:

Assessment Method 1 – Demonstration of Practice	Assessment Method 2 – Professional Discussion	Overall Grading
Fail	Fail	Fail
Fail	Pass	Fail
Fail	Distinction	Fail
Pass	Fail	Fail
Pass	Pass	Pass
Pass	Distinction	Distinction

## Roles and responsibilities

Role	Responsibility
Apprentice	<ul style="list-style-type: none"> <li>● complete the on-programme element of the apprenticeship</li> <li>● prepare for and complete the EPA</li> </ul>
Employer	<ul style="list-style-type: none"> <li>● identify when the apprentice is ready to pass the gateway and undertake their EPA</li> <li>● notify the EPAO that the apprentice has passed the gateway</li> </ul>
EPAO	<ul style="list-style-type: none"> <li>● As a minimum EPAOs should:</li> <li>● appoint independent assessors to administer and grade the EPA</li> <li>● provide training and CPD to the independent assessors they employ to undertake the EPA</li> <li>● Create learner specifications detailing the EPA, process, content etc</li> <li>● ensure there is no direct connection with the apprentice, their employer or training provider i.e. there must be no conflict of interest between the assessor, apprentices and employer.</li> <li>● have processes in place to conduct internal quality assurance and do this on a regular basis</li> <li>● organise standardisation events and activities in accordance with this plan's IQA section</li> <li>● organise and conduct moderation of the independent assessors' grading in accordance with this plan</li> <li>● have, and operate, an appeals process</li> <li>● conform to the requirements of the nominated EQA provider</li> <li>● provide the materials and resources stipulated in each assessment method</li> </ul>

<p>Senior independent assessor (demonstration of practice) &amp; Independent Assessor (professional discussion)</p>	<p>As a minimum the independent assessor should:</p> <ul style="list-style-type: none"> <li>● be independent of the apprentice, their employer and training provider(s) i.e. there must be no conflict of interest</li> <li>● hold or be working towards an independent assessor qualification e.g. A1 and have had training from their EPAO in terms of good assessment practice, operating the assessment tools and grading</li> <li>● have the capability to assess the apprentice at this level i.e. meet the occupational requirements as set out in the IQA section of this assessment plan</li> <li>● attend the required number of EPAOs standardisation and training events per year (as defined in the IQA section)</li> <li>● Assess if the apprentice has met all the KSBs assigned to each method and make all grading decisions</li> </ul> <p>For the demonstration of practice</p> <ul style="list-style-type: none"> <li>● Be in charge of a team of independent assessors</li> <li>● Be in charge of the 4 stations, the station independent assessors and the 'person' involved in the demonstration of practice and will coordinate the assessment</li> <li>● Check the controlled environment is suitable and has the required equipment for the apprentice to demonstrate the KSBs mapped to the demonstration of practice</li> <li>● Check all the stations are set up properly</li> <li>● Brief the station independent assessors and 'person' prior to the assessment commencing, using the brief provided by the EPAO, checking they have understood the brief provided</li> <li>● Use the structured template provided by the EPAO to conduct the assessment</li> <li>● Use the grading matrix provided by the EPAO to collate the grades provided by the station independent assessors</li> </ul>
<p>Training provider</p>	<p>As a minimum the training provider should:</p> <ul style="list-style-type: none"> <li>● work with the employer to ensure that the apprentice is given the opportunities to develop the KSBs outlined in the standard and monitor their progress during the on-programme period</li> <li>● advise the employer, upon request, on the apprentice's readiness for EPA prior to the gateway</li> <li>● plays no part in the EPA itself</li> </ul>
<p>Station independent assessor</p>	<ul style="list-style-type: none"> <li>● manages a demonstration of practice station</li> </ul>

	<ul style="list-style-type: none"> <li>● grades the demonstration of practice station using the grading matrix developed by the EPAO</li> <li>● passes grades to the senior independent assessor who is responsible for the final grading decisions</li> </ul>
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## Internal Quality Assurance (IQA)

Internal quality assurance refers to the requirements that EPA organisations must have in place to ensure consistent (reliable) and accurate (valid) assessment decisions. EPA organisations for this EPA must:

- appoint senior independent, station independent and independent assessors who are occupationally competent across the whole occupational standard ie a registered Midwife
- appoint senior independent, station independent and independent assessors who have recent relevant experience of the occupation/sector at least the same level as the apprentice gained in the last two years or significant experience of the occupation/sector.
- The station independent assessor will have the following minimum skills, knowledge and occupational competence:
  - hold or be working towards an assessor qualification (see responsibilities section)
  - have experience of assessing at degree or masters level
- The senior independent and independent assessor will have the following minimum skills, knowledge and occupational competence:
  - hold or be working towards an assessor qualification (see responsibilities section)
  - have experience of assessing at degree or masters level
- provide training for senior independent, station independent and independent assessors in terms of good assessment practice, operating the assessment tools and grading
- have robust quality assurance systems and procedures that support fair, reliable and consistent assessment across the organisation and over time.
- operate induction training and standardisation events for senior independent assessors when they begin working for the EPAO on this standard and before they deliver an updated assessment method for the first time

## Re-sits and retakes

Apprentices who fail one or more assessment method will be offered the opportunity to take a re-sit or a re-take.

Apprentices should have a supportive action plan to prepare for the re-sit or a re-take. The apprentice's employer will need to agree that either a re-sit or re-take is an appropriate course of action.

An apprentice who fails an assessment method, and therefore the EPA in the first instance, will be required to re-sit or re-take any failed assessment methods only.

Any assessment method re-sit or re-take must be taken during the maximum EPA period, otherwise the entire EPA must be taken again, unless in the opinion of the EPAO exceptional circumstances apply outside the control of the apprentice or their employer.

Where any assessment method has to be re-sat or re-taken, the apprentice will be awarded a maximum EPA grade of pass, unless the EPAO determines there are exceptional circumstances requiring a re-sit or re-take.

## Affordability

Affordability of the EPA will be ensured by using at least some of the following practice:

- assessing multiple apprentices simultaneously during the demonstration of practice assessment
- using mannequins to reduce the number of people required for the demonstration of practice assessment
- use of videoconferencing for professional discussion assessment

## Reasonable adjustments

The EPAO must have in place clear and fair arrangements for making Reasonable Adjustments for this standard. This should include how an apprentice qualifies for Reasonable Adjustment and what Reasonable Adjustments will be made. The adjustments must maintain the validity, reliability and integrity of the assessment methods outlined in this assessment plan.

## Mapping of KSBs

KSB statement	Methods mapped against
<b>Knowledge</b>	
K1 The national and professional standards, guidelines and current legislation that applies to midwives in the UK, local policies and procedures (D1)	Professional Discussion
K2 The limits of your competence, experience and training (D1)	Professional Discussion
K3 The importance of confidentiality and appropriate situations in which to disclose information (D1)	Professional Discussion
K4 The importance of safeguarding, governance, ethical issues, a duty of care and a duty of candour (D1)	Professional Discussion
K5 The importance of ongoing continuing professional development and being a reflective practitioner (D1)	Professional Discussion
K6 The importance of building personal resilience within your professional life (D1)	Professional Discussion
K7 Ways to promote a healthy, safe and secure environment (D1)	Professional Discussion
K8 A range of communication methods and media, including verbal and non-verbal, written, electronic, listening skills, common barriers to communication, aides and services available to assist with communication (D2)	Demonstration of Practice
K9 Ways to enable the woman to think through their feelings, building trust by responding to their concerns (D2)	Demonstration of Practice
K10 The importance of acting in the best interest of the woman and her baby, maintaining their rights, understanding their preferences, gaining valid informed consent and assessing their capacity for decision making (D2)	Demonstration of Practice
K11 The processes and procedures for dealing with and managing complaints (D2)	Demonstration of Practice
K12 Ways to confirm pregnancy including recognising the indicators of the stage of progression (D3)	Demonstration of Practice
K13 the information and techniques needed to diagnose a woman's needs such as: taking a history, observation, physical examination, biophysical tests and social, cultural or emotional assessments (D3)	Demonstration of Practice Professional Discussion
K14 Anatomy and physiology relevant to midwifery including the physical, psychological, social, emotional, cultural and spiritual factors that may positively or adversely influence normal physiology (D3)	Demonstration of Practice
K15 The importance of practising in a way that respects, promotes and supports individuals' rights, interests, preferences, beliefs and culture (D4)	Professional Discussion
K16 How to use best evidence and clinical judgment to determine and provide programmes of care (D4)	Professional Discussion
K17 The importance of compassionate and woman-centred care (D4)	Professional Discussion
K18 The importance of respecting a woman's right to accept or refuse care and treatment (D4)	Professional Discussion
K19 How to critically appraise knowledge, research and practice to improve the quality of care you offer (D4)	Professional Discussion
K20 Midwifery care within the context of public health policies such as being aware of a range of programmes to improve sexual and reproductive health or reduce maternal and perinatal morbidity and mortality (D4)	Professional Discussion

K21 Ways to involve users and local communities in service development and improvement (D4)	Professional Discussion
K22 How to effectively analyse and share data that has been collected including the importance of seeking feedback from the woman, her partner and family (D4)	Professional Discussion
K23 Ways to identify and target care for groups with particular health and maternity needs (D4)	Professional Discussion
K24 Your role in relation to audit and multi-professional standard-setting (D4)	Professional Discussion
K25 Ways to support parents and babies with additional or complex needs (D4)	Professional Discussion
K26 A range of advice and guidance such as the fetus and baby's development, lifestyle, holistic health and wellbeing, pregnancy, labour care, care of the newborn and mental wellbeing (D5)	Demonstration of Practice
K27 What to do when physiological and psychological assessments are outside of expected parameters (D5)	Demonstration of Practice Q&A
K28 A range of screening tests such as sickle cell disease, thalassaemia, infectious diseases or anomalies (D5)	Demonstration of Practice Q&A
K29 A range of services and support available for a woman experiencing pregnancy loss, bereavement or complex pregnancies including recognising the ways that culture, context and preferences may affect a woman's decisions (D5)	Demonstration of Practice Q&A
K30 The importance of a timely referral and the risks of not doing so (D6)	Demonstration of Practice
K31 A range of services and other professionals that have skills and experience to support the woman in your care such as health, social, financial, psychological, safeguarding or legal (D6)	Demonstration of Practice
K32 Evidence based ways to facilitate all types of labour and childbirth and care for the fetus and newborn during a labour and birth (D7)	Demonstration of Practice
K33 Ways to recognise and respond appropriately to a woman who is anxious, in pain or distress (D7)	Demonstration of Practice
K34 The importance of an active labour, ways to respect a woman's choices and maintain a safe and calm environment (D7)	Demonstration of Practice
K35 Way to check signs of normal and deteriorating physical or mental health including risk indicators (D7)	Demonstration of Practice
K36 Signs and symptoms that indicate a potential emergency (D8)	Demonstration of Practice
K37 Ways to recognise that an emergency needs further support or additional assistance (D8)	Demonstration of Practice
K38 A range of emergency procedures including management until further assistance is available (D8)	Demonstration of Practice Professional Discussion
K39 Risk assessment and management processes including the importance of ensuring your own safety as well as that of those in your care (D8)	Demonstration of Practice Professional Discussion
K40 Physiology of the postnatal period (D9)	Demonstration of Practice
K41 A range of signs and symptoms relating to a woman's health, physical, mental and emotional wellbeing following birth (D9)	Demonstration of Practice
K42 A range of support and advice on feeding methods and caring for babies (D9)	Demonstration of Practice
K43 A range of issues that may affect a woman when considering resuming sexual intercourse following the birth of a baby and how to manage them, taking into account the woman's rights, preferences, beliefs and culture (D9)	Demonstration of Practice



K44 Ways to manage the different stages of bereavement or grief, ways to care for a woman whose baby has been removed due to safeguarding intervention or who relinquish their baby for adoption and a range of services or support groups available (D9)	Demonstration of Practice Q&A
K45 The physical and behavioural assessments that need to be carried out on a newborn baby (D10)	Demonstration of Practice Professional Discussion
K46 A range of screening methods and how to recognise and refer when results are outside of normal parameters (D10)	Demonstration of Practice
K47 Common congenital disorders and abnormalities (D10)	Demonstration of Practice
K48 Ways to care for preterm babies and babies requiring monitoring and invasive procedures (D10)	Demonstration of Practice
K49 Safeguarding babies and children as identified as suffering or likely to suffer harm, abuse or neglect including how to report and act upon your concerns (D10)	Demonstration of Practice Q&A
K50 The principles of the safe management of medicines in midwifery including medications that are under midwives exemption or prescribed (D11)	Demonstration of Practice Q&A
K51 A range of methods to administer medication, including oral, intravenous, intramuscular, topical and inhalation (D11)	Demonstration of Practice
K52 The importance of completing written and electronic records accurately and in a timely manner, protecting data and maintaining confidentiality, and adhering to legal and local requirements for recording, storage and retention (D12)	Demonstration of Practice
K53 Ways to inform and develop the practice of self and others using best available evidence and reflection techniques (D13)	Professional Discussion
K54 How to provide honest, accurate and constructive feedback, respecting the view of others and behaving professionally at all times (D13)	Professional Discussion
K55 The importance of only delegating tasks and duties that are within the other person's scope of competence and that they fully understand what they are required to do (D13)	Professional Discussion
K56 Understand the roles and remit of the multi-disciplinary team, the wider healthcare team and other agencies, identifying who is best placed and able to provide particular interventions to the woman and baby (D13)	Professional Discussion
K57 How to raise and report concerns with service delivery including working across team or organisational boundaries (D13)	Professional Discussion

<b>Skills</b>	
S1 Practise in accordance with legislation, standards and code of conduct to support the woman, her partner and family through the pregnancy, labour, birth and postnatal period (D1)	Professional Discussion
S2 Act as an advocate for the woman (D1)	Professional Discussion
S3 Consult with and refer to colleagues when care requires expertise beyond own competence or when the woman or baby's needs falls outside the scope of midwifery practice (D1)	Professional Discussion
S4 Identify, respond to and report any unsafe practice (D1)	Professional Discussion
S5 Take responsibility and accountability for own practice as a midwife, reviewing, developing and enhancing knowledge, skills and maintaining your fitness to practice (D1)	Professional Discussion
S6 Manage and prioritise competing demands (D1)	Professional Discussion

S7 Create and maintain a healthy and safe environment, preventing and controlling infection and promoting health and wellbeing (D1)	Professional Discussion
S8 Communicate in ways that are sensitive and appropriate, taking into account emotional, psychological, cognitive, language, social and other circumstances, checking you have been understood (D2)	Demonstration of Practice
S9 Use interpersonal skills to build rapport with the woman, her partner and family (D2)	Demonstration of Practice
S10 Facilitate informed decision making (D2)	Demonstration of Practice
S11 Handle issues or complaints in line with national and local process and procedure (D2)	Demonstration of Practice
S12 Undertake the initial consultation with the woman (D3)	Demonstration of Practice
S13 Use a range of techniques to assess the physical, social and psychological needs of the woman (D3)	Demonstration of Practice Professional Discussion
S14 Give information surrounding options for screening and overall health and wellbeing (D3)	Demonstration of Practice
S15 Work in partnership with woman to develop plans that are appropriate to the needs, contexts, culture and choices of the woman, her baby and family (D4)	Professional Discussion
S16 Enable and empower the woman to consider plans for pre-pregnancy, pregnancy care, birth, place of birth, plans for feeding babies, needs for postnatal support and preparation for parenthood (D4)	Professional Discussion
S17 Enable and empower the woman to think about their own health and that of their baby, partner and family and how this can be improved (D4)	Professional Discussion
S18 Consider best available evidence and modify programmes of care to improve outcomes for the woman and her baby (D4)	Professional Discussion
S19 Contribute to enhancing the health and social wellbeing of individuals and their communities (D4)	Professional Discussion
S20 Contribute to audit in order to optimise the care of the woman, her baby and family as required (D4)	Professional Discussion
S21 Act as lead carer in normal pregnancies supporting the woman (D5)	Demonstration of Practice
S22 Carry out physiological measurement, psychological assessment and screening tests and refer the woman as appropriate (D5)	Demonstration of Practice
S23 Contribute to providing support to the woman when her pregnancy is complex or if she has suffered pregnancy loss (D5)	Demonstration of Practice Q&A
S24 Make critical decisions in partnership with the woman, her partner and family to support the appropriate referral of a woman or baby to other health professionals or agencies when required (D6)	Demonstration of Practice Q&A
S25 Discuss and negotiate with other professionals about further interventions as appropriate (D6)	Demonstration of Practice
S26 Use appropriate clinical and technical means to monitor the condition of the woman and the fetus to optimise birth outcomes (D7)	Demonstration of Practice
S27 Facilitate the comfort of the woman during labour and birth (D7)	Demonstration of Practice
S28 Promote trust with the mother and birthing partner to facilitate a positive birth experience (D7)	Demonstration of Practice
S29 Care for the woman and the baby once she has given birth including assessing for risk indicators (D7)	Demonstration of Practice
S30 Undertake appropriate emergency procedures to meet the health needs of the woman, fetus or baby (D8)	Demonstration of Practice

S31 Raise concerns immediately in the event of an emergency (D8)	Demonstration of Practice Professional Discussion
S32 Prepare for and manage risks (D8)	Demonstration of Practice
S33 Care for a woman in the postnatal period, facilitating her to manage her physical and psychological wellbeing and transition to motherhood (D9)	Demonstration of Practice
S34 Care for a woman who is recovering following birth including post-operative care for those who have caesarean or assisted births (D9)	Demonstration of Practice
S35 Support and advise the woman on parenting, relationship building, feeding and caring for her baby (D9)	Demonstration of Practice
S36 Facilitate discussions about resuming intercourse and future reproductive choices (D9)	Demonstration of Practice
S37 Care for a woman, her partner and family who are bereaved following pregnancy loss or death of a baby (D9)	Demonstration of Practice Q&A
S38 Examine and care for babies immediately following birth, confirming vital signs and carrying out an assessment and physical examination (D10)	Demonstration of Practice Professional Discussion
S39 Screen babies and refer as required (D10)	Demonstration of Practice
S40 Undertake continuing assessments and care for babies (D10)	Demonstration of Practice
S41 Escalate and report safeguarding issues as required (D10)	Demonstration of Practice Professional Discussion
S42 Administer and manage medication and pain relief to the woman and baby safely, calculating accurately and in line with legislation and the limits of your competence and role (D11)	Demonstration of Practice
S43 Complete, store and retain accurate and contemporaneous records, in line with legislation and best practice (D12)	Demonstration of Practice
S44 Act as a role model for the profession to colleagues, enabling them to reflect on and develop their practice (D13)	Professional Discussion
S45 Delegate tasks and duties appropriately (D13)	Professional Discussion
S46 Work across professional boundaries, developing professional networks (D13)	Professional Discussion
S47 Supervise or monitor the work of other members of the team (D13)	Professional Discussion

<b>Behaviours</b>	
B1 Treat people with dignity and respect	Demonstration of Practice Professional Discussion
B2 Be caring and compassionate	Demonstration of Practice Professional Discussion
B3 Have the courage to speak up and challenge	Professional Discussion
B4 Be competent, reliable and committed	Demonstration of Practice Professional Discussion
B5 Display leadership qualities	Professional Discussion