



Royal College
of Midwives

getting the midwifery workforce right

4: Lifelong learning and development

Lifelong learning and development

The learning journey of a midwife is an ongoing process that extends beyond the completion of degree level education. Evidence-based care evolves over time, along with knowledge and skills required.

This ongoing learning encompasses mandatory training, career development, specialisation in specific areas of maternity care, and potential career shifts into education or research. Each of these paths enriches both the midwifery workforce and the quality of maternity care provided.

The RCM welcomes any development of the midwife's role which enhances their skills and expertise, or which makes midwifery care more accessible and responsive to women's needs.

Empowering women to exercise choice about the care they receive is reliant on there being midwives in the workforce who are competent to work in:

- different settings and to address particular needs which impact on maternal and neonatal wellbeing (for example, smoking cessation, substance use, homelessness, domestic violence).
- new ways and partnerships to meet the range of women's needs by, for example, promoting seamless care, learning new skills or reducing unnecessary delays or barriers, such as distances in accessing care.
- alignment with the NMC standards of proficiency for midwives¹ and able to provide evidence during revalidation that gaps in knowledge and skills are addressed.

The mandatory requirements for continuing professional development are set out in NMC revalidation and promotion of lifelong learning can lead to further opportunities for career development across clinical practice, education, research and leadership. The continued development of the role of MSWs/MCAs should also be considered.

NHS bodies in England, Scotland and Wales have already embarked on system reforms and maternity change programmes². In addition, there are reactive responses to reviews into maternity safety failings, including the Ockenden Review³ and the Kirkup Report⁴ into maternity services.

These developments will require a range of responses, from simple adaptations and changing emphasis within the role of midwives and support workers, to incorporating new and additional skills, to fundamental changes to the way in which maternity services are organised and provided.

This section will cover the following:

- Preceptorship
- Apprenticeship routes
- Supporting education and learning
- Supporting research

1. [NMC \(2019\) Standards of proficiency for midwives](#)
2. [Three year delivery plan for maternity and neonatal services](#) (NHS England 2023), the [Best start](#) forward plan for maternity and neonatal services in Scotland (Scottish Government 2017), and the [Maternity and neonatal safety support programme](#) (Welsh Government 2023)
3. [Maternity Services at the Shrewsbury and Telford Hospital NHS Trust: Ockenden Report - GOV.UK](#)
4. [Maternity and neonatal services in East Kent: 'Reading the signals' report - GOV.UK](#)

Preceptorship

Newly qualified midwives are proficient at the point of registration. They have been assessed and confirmed competent over a number of years and are approved for entry to the NMC register by the Lead Midwife for Education.

Preceptorship is an enhanced period of support to help new midwives in their first post following qualification. It is not a retest or re-assessment of capability but is a structured period of further development to enhance confidence and relational belonging into the team to promote positive cultures. It should complement a formal induction and orientation and is in addition to mandatory training that all staff complete. The impact of a successful preceptorship cannot be underestimated in promoting job satisfaction as well as improving the recruitment and retention of midwives.

With numbers of midwives leaving the profession at its highest, we cannot become complacent that graduates will stay in the area where they were educated or even take up employment as a midwife at all. Employers must ensure that their area is an attractive place to work and supporting midwives at the start of their careers is the essential first step to recruitment and retention.

The RCM preceptorship position statement⁵ and Preceptorship Guide⁶ outline the best practice principles practical suggestions and there are excellent examples of implementation across the UK.

Practical example

NHS Grampian prioritises investing in newly graduated midwives by inviting them to a recruitment open day. This event allows them to meet various teams, tour clinical areas, and gain insights into the interview process. Candidates are provided with interview questions to help them prepare thoughtful responses and valuable experience in interviews.

Before starting their posts, all new graduate midwives (NGMs) attend a welcoming day to celebrate their career beginnings and connect with peers and colleagues. A minimum of two weeks of supernumerary period is offered, during which the newly qualified midwife follows the same working pattern as their Flying Start supervisor. Flying Start is a national preceptorship development programme in Scotland designed for midwives, nurses, and AHPs. A personalised progression plan is developed based on the preferences and experiences that the new midwife aims to acquire. A knowledge and skills self-assessment aids in the decision-making process.

Peer support is also encouraged through the Connect 5 network, which connects Band 5 midwives. This network aims to support the transition from student to registered practitioner by addressing five key emotional concerns of humans: appreciation, affiliation, autonomy, role, and status. Connect 5 is a person-centred network that fosters a safe space for discussions, promoting a healthy workforce. It emphasises professionalism, shared experiences, and camaraderie to encourage reflection, self-care, and continuous learning.

The RCM Preceptorship position statement (RCM 2022) and Preceptorship Guide (RCM 2023) outline the best practice principles, practical suggestions and excellent examples of implementation across the UK.

5. [RCM position statement Preceptorship for newly qualified midwives \(2022\)](#)

6. [RCM Preceptorship Guide \(2023\)](#)

Apprenticeship routes

Registered Midwifery Degree Apprenticeships (RMDAs) provide an employer-led model of pre-registration midwifery education. While midwifery degree apprenticeships have thus far only been developed in England, they are attracting widespread interest and there is every likelihood that similar programmes will eventually be developed in other parts of the UK.

The apprentice is typically an existing maternity support worker (MSW), who remains employed by the Trust for the duration of the midwifery programme. They enter the programme with existing knowledge of the NHS, maternity services and the role of the midwife.

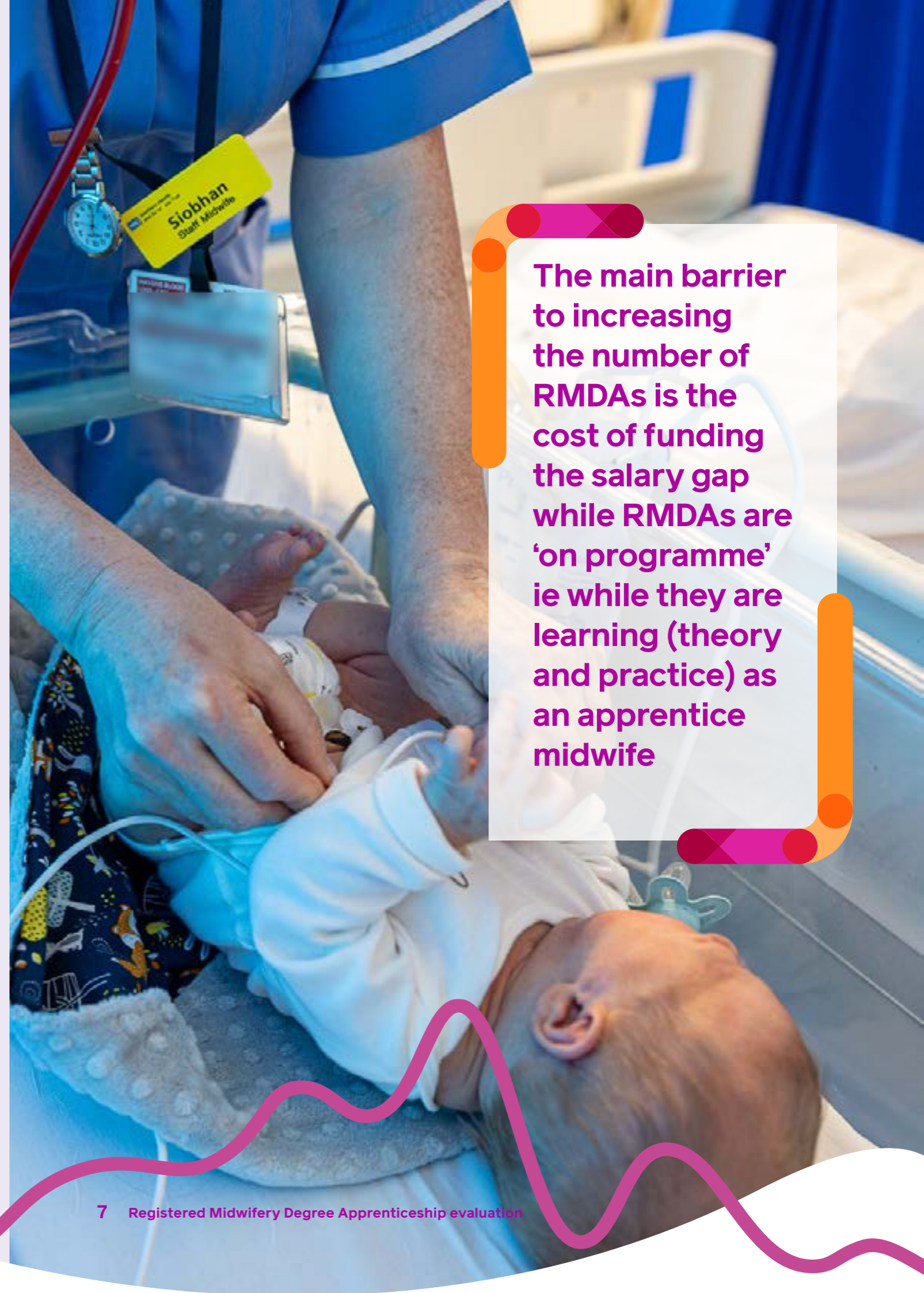
The national MSW competency, education and career development framework⁷ in England sets out an education pathway that facilitates transition into midwifery programmes (NHSE 2024). The university sector is being encouraged to incorporate the level 3 MSW qualification gained through the Senior Healthcare Support Worker Apprenticeship (Institute for Apprenticeships and Technical Education 2023) and relevant skills and experience gained in practice as entry criteria to RMDA programmes.

The rationale for recruiting RMDAs into midwifery is that they are mostly local, mature applicants, who are already working in maternity services. They do not experience the transition shock that many pre-registration students encounter on their first placement. They are also more likely to complete the programme and stay in midwifery once qualified.

An independent evaluation of RMDA programmes found that apprentices⁸ are more likely to seek employment and remain in the Trust in which they have qualified. Trusts are more likely to invest in them as they have supported them through their RMDA programme. Given the concerns about high midwifery attrition and shortage of midwives, this provides a strong and compelling route into midwifery with the potential to significantly improve retention.

The main barrier to increasing the number of RMDAs is the cost of funding the salary gap while RMDAs are 'on programme', ie while they are learning (theory and practice) as an apprentice midwife. This has limited the number of RMDAs each Trust can support and most Trusts are required to put forward annual business cases to maintain the pipeline of RMDAs. University fees are paid for by the apprenticeship levy but, according to apprenticeship legislation, the levy cannot be used to backfill salaries. Note, however, that the 2023 Agenda for Change pay deal⁹ included a series of non-pay elements, including scope for the NHS Staff Council to agree amendments to terms and conditions to ensure that existing NHS staff will not suffer a detriment to their basic pay when they undertake apprenticeships.

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7. www.england.nhs.uk/long-read/maternity-support-worker-competency-education-and-career-development-framework/
8. www.rcm.org.uk/wp-content/uploads/2024/04/rmdae_short_report.pdf
9. [NHS terms and conditions of service \(Agenda for Change\) | NHS Employers](#)

Supporting education and learning

The RCM State of Midwifery Education Report 2023¹⁰ outlined the current state of the midwifery workforce in academic settings and the multifaceted challenges encountered in supporting the growing number of students, fostering the professional development and well-being of staff and students, and promoting stronger ties between universities and clinical practice.

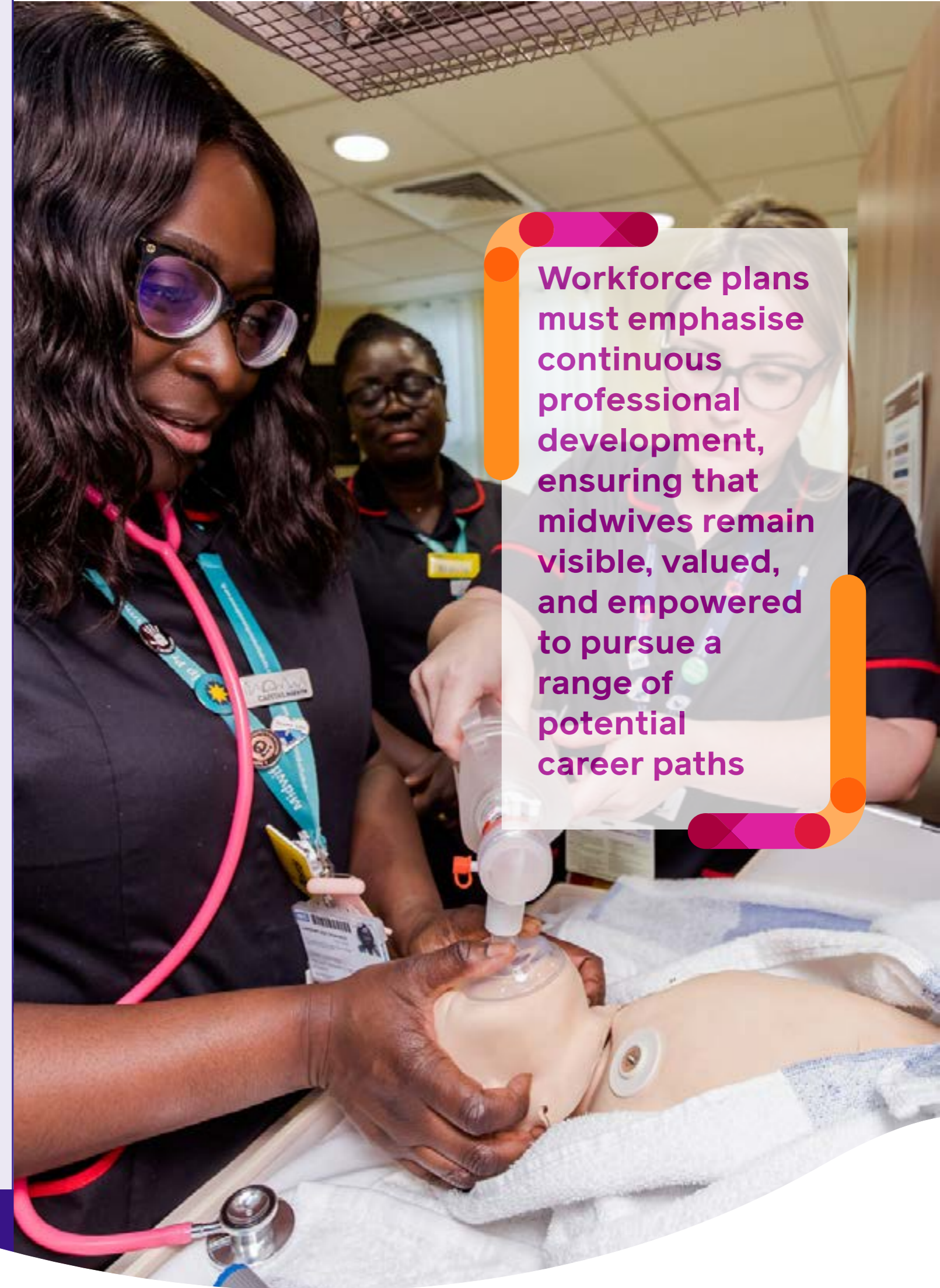
To foster a positive learning environment, shared accountability, and successful student outcomes, it is crucial to establish robust partnerships between universities and clinical settings. These collaborations will pave the way for effective workforce succession planning and facilitate diverse career pathways spanning clinical practice, education, and research.

Furthermore, student midwives and the midwifery workforce should receive support in exploring the profession's fundamental pillars: research, education, clinical practice, and leadership. The future midwifery workforce, comprised of registered professionals operating in clinical and academic settings, will play a pivotal role in delivering evidence-based and competent midwifery care, thus ensuring the profession's sustainability.

Consequently, workforce plans must emphasise continuous professional development, ensuring that midwives remain visible, valued, and empowered to pursue a range of potential career paths. Secondment and joint appointments should be explored as effective strategies for fostering professional growth and enriching the midwifery workforce. Furthermore, leadership development, especially for academics from underrepresented groups is needed to make career choices accessible and ensure diversity amongst midwifery educators.

10. [RCM State of Education Report 2023](#)

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Supporting research

The Nursing and Midwifery Council emphasises that midwives must use research evidence in clinical practice. However, midwives are often positioned solely as knowledge users, not creators, which contradicts the vision for clinical research.

The RCM 2020 research and development strategy¹¹ recognises that midwives' practice is based on research evidence and advocates for midwives who think critically about their care.

The RCM career framework¹² describes various roles that midwives can enact within research, including primary research as part of a higher education degree, clinical academic roles, and roles within the higher education sector. But midwives' work in research outside of clinical settings is often misunderstood and unsupported.

The RCM's State of Midwifery Education report¹⁰ identified the reducing number of midwives in Professor, Researcher and Fellow roles. Therefore, we have fewer midwives who are able to influence research at a senior national level, which may have a consequence of less midwifery led research being conducted. Families cared for in research-active Trusts and Boards have been shown to have improved survival rates and better overall care.

Barriers to creating a research-enabling environment for midwives include limited funding opportunities, a lack of clinical-academic positions, and a lack

of recognition for the benefits of research-active midwives. To address these barriers and promote research engagement among midwives, enablers such as visible and accessible networks, equitable funding streams across the UK, and a cultural shift valuing midwifery research are needed.

Secondment and joint appointment opportunities can offer staff the opportunity to gain experience in higher education and research, which can lead to development or further study opportunities.

Practical example

An NHS England funded project, managed by the University of Portsmouth¹³, offers 80 positions across six integrated care boards for healthcare practitioners to gain university experience while maintaining their current jobs. This initiative aims to retain skilled practitioners, introduce education taught by practitioners, and provide opportunities for participants to explore academic careers or pursue further qualifications. The project's success has led to its expansion to include midwives and allied health professionals. This programme formalises opportunities for staff and fosters a deeper understanding of education and research within an academic team, while allowing participants to enhance their skills and knowledge base. Furthermore it aims to provide a potential retention strategy offering opportunities to those who may be considering leaving the profession and underscores the value of education grounded in real-world experiences. Overall, the project contributes to the development of a robust and adaptable healthcare workforce, ultimately is a transferable solution to enhance the wider midwifery

11. [RCM Research-and-development-strategy-2021-2024.pdf](#)

12. [RCM Career framework](#)

13. <https://www.port.ac.uk/news-events-and-blogs/news/nhs-staff-given-unique-opportunity-to-teach-and-train-at-the-university-of-portsmouth-0>






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