



The role of the lead midwife for  
**education**



Royal College  
of Midwives



# Overview

Lead midwives for education (LMEs) play a vital role in overseeing the quality of midwifery education to protect the public, improve standards of maternity care and develop midwives of the future.

The Royal College of Midwives (RCM) and the UK Lead Midwives for Education Strategic Reference Group (LME-SRG) have worked together on a UK-wide approach to the LME role. This will ensure equity between approved educational institutions (AEIs), provide a more consistent recognition of the role, and develop midwifery leadership capacity in education. This project highlights the important roles these professionals play, proposes minimum standards and a blueprint for aspiring LMEs to advocate for the maintenance, visibility and seniority of these roles.

## Purpose:

This document provides the following functions:

1. To outline the minimum requirements for the role of the LME within Nursing and Midwifery Council (NMC) Approved Education Institutions (AEIs) in the United Kingdom (UK).
2. To raise the profile and strengthen the strategic position and understanding of the role of the LME within AEIs.
3. To provide a guide for new LMEs so they understand their role and how it differs from other roles within midwifery education.

# Recommendations

## The LME should:

- be an experienced and senior midwifery educator within the AEI.
- have an in-depth knowledge and understanding of NMC standards relating to midwifery education.
- have strategic responsibility for approved pre- and post-registration midwifery education, which is recognised within the AEI's organisational structures.
- be a member of the senior leadership team or equivalent within the Department/ Faculty or equivalent.
- lead and advise on the strategic direction, development and decision making regarding all aspects of midwifery education and resources.
- be facilitated to attend all LME meetings, including NMC LME-SRG and UK-LME network meetings.
- attend all external meetings, including practice partner meetings, relevant to midwifery education.
- directly collaborate with external stakeholders, such as heads and directors of midwifery, chief midwifery officers, the Nursing and Midwifery Council and Royal College of Midwives.
- be allocated a minimum of 0.4wte for the role of LME within the post-holder's position.
- be recognised and supported to hold an advanced level of responsibility within the organisation.
- be remunerated for this level of responsibility, and that required by the NMC.

We do not recommend that the role of the LME is a rotational post; however, where this is a requirement of the AEI, we strongly recommend that this is for a minimum period of 5 years.

# Background:

The role of the Lead Midwife for Education (LME) is set in statute in Rule 6(1)(a)(ii) and Rule (3) of the Nursing and Midwifery Council [NMC] (Education, Registration and Registration Appeals) Rules 2004.

The title 'Lead Midwife for Education' is therefore a statutory requirement and should only be used within the context of NMC Approved Education Institutions (AEIs). It should not be used to describe clinical educators in practice.

As stated by the NMC <sup>1</sup> (p18) in the Standards for pre-registration midwifery programmes, the AEI must:

- appoint a lead midwife for education who is responsible for midwifery education
- inform the NMC of the name of the lead midwife for education

According to Rule 6(1)(a)(ii) and Rule (3) of the above, the LME will:

- be responsible for midwifery education in the AEI
- be accountable for signing the supporting declarations of health and character for applicants applying for admission to the register after completing a pre-registration midwifery programme or for applicants applying for readmission to the register following a return to practice programme
- be accountable for signing the supporting declarations of health and character for applicants who have successfully completed an adaptation programme in the United Kingdom

This document aims to increase awareness and understanding of the role of the LME within an ever more complex environment, and to outline the minimum requirements and position of LMEs within AEIs, as agreed by the NMC's UK LME-Strategic Reference Group.



# The strategic role of the LME

LMEs are the guardians of midwifery education within AEs. They hold statutory responsibility for ensuring that both pre- and post-registration programmes meet the standards set by the NMC<sup>1</sup>, reflect contemporary practice and are informed by the best available evidence.

Increasingly, LMEs have a strategic role in shaping the quality, safety, sustainability and future direction of undergraduate and postgraduate midwifery education across the UK.

The LME role is pivotal in developing a skilled, reflective, and innovative midwifery workforce that can deliver safe, compassionate, and women-centred care in complex and evolving maternity systems. The RCM has emphasised that “*excellent midwifery education is fundamental to effective midwifery practice*”.<sup>2 (p 4)</sup> This message is echoed in major maternity investigations,<sup>3,4,5,6</sup> all of which highlight the urgent need for

education-led responses to systemic failings in care. National reviews continue to call for the strengthening of midwifery education to restore confidence and improve safety.<sup>7,8</sup>

The World Health Organisation (WHO) Framework for Action,<sup>9</sup> endorsed by the International Confederation of Midwives,<sup>10</sup> reinforces the need to strengthen midwifery education by prioritising strong leadership. Within this global and national context, LMEs play a statutory and strategic role, leading the design, delivery and quality assurance of midwifery programmes and ensuring alignment with professional standards and public need.<sup>1</sup>

The NMC’s Principles for Advanced Practice<sup>11</sup> underscore the need for an educated midwifery workforce that is research-active, capable of working across boundaries, and confident in leading service improvement. LMEs ensure that these principles are embedded in postgraduate midwifery education and workforce development, therefore positioning advanced midwifery practice within workforce transformation strategies.



# Lead Midwives for Education:

- have a strategic role in influencing national policy and supporting sustainable workforce developments that are essential in addressing the increase in birth complexities, staffing pressures, and health inequalities.<sup>12</sup>
- ensure that a personalised, holistic approach to care remains central to midwifery education.<sup>1</sup>
- provide a strong link between academia and practice, enabling the development of graduate midwives who are not only clinically competent but also compassionate, reflective, and ready to lead.

In summary, LMEs are accountable leaders of midwifery education in their AEI. They are highly qualified and experienced to lead and advise on matters relating to the quality, design and future direction of midwifery education. Their strategic influence ensures the long-term quality and sustainability of midwifery education and the future midwifery workforce. Through a nationally networked LME community, they provide expert leadership that supports the transformation of maternity care and contributes directly to restoring public trust in maternity services.

## The challenge for LMEs

The RCM State of Midwifery Education report<sup>2</sup> demonstrates how the role of the LME varies in terms of its strategic and implementational importance and influence.<sup>2,13</sup> This compromises the impact of LMEs, including their influence over curriculum leadership, quality assurance and stakeholder engagement. Ultimately, this affects the overall strategic development and enhancement of midwifery education, which has a negative effect on NHS service improvement and quality maternity care.





# Key responsibilities set out by the NMC: the LME



- ensures that midwifery programmes comply with the Nursing and Midwifery Council (NMC) Standards for Pre-Registration Midwifery Programmes.<sup>1</sup>
- is accountable for their own practice in accordance with the NMC Code<sup>14</sup> and is required to fulfil registration requirements.
- is responsible for signing health and character declarations for student and apprentice midwives and those undertaking Return to Practice (RtP) programmes.
- is accountable for signing the declaration of health and character. If there are concerns about a student's health or character, the LME should decline to sign the declaration and seek support from the AEI's Fitness to Practise Committee and the NMC.
- ensures that midwives undertaking non-medical prescribing programmes are appropriately supported.
- has oversight of Advanced Practice programmes where midwives undertake these.
- is responsible for the annual reporting of midwifery education to the NMC, working in partnership with the Official Correspondent to compile this via the NMC's Annual Self Report system.

# Strategic oversight: the LME

- is the key reference point for the AEI on all professional issues relating to midwifery. They advocate for midwifery as a distinct profession with specific standards, expectations and requirements.
- leads the development, delivery and management of midwifery education programmes, ensuring they are fit for purpose, meeting NMC standards.
- considers concerns relating to professionalism and competence throughout midwifery education, taking a fair and consistent approach, and referring through AEI Fitness to Practise channels for objective review and action where necessary.
- works closely with university placement teams, healthcare providers and other stakeholders to ensure that practice placements are of high quality and meet educational standards.
- assesses and manages risks to the provision of midwifery education in theory and practice.

Strategic influence and responsibilities of the LME can depend on the management structure within the AEI. LME and senior manager roles (eg Programme/ Course Director, Head of School, Principal Lecturer) may overlap. This should not, however, impact on the professional leadership role of the LME.



# Collaboration with stakeholders: the LME

- should develop strong relationships between themselves and the relevant directors of midwifery/heads of midwifery to ensure that midwifery education aligns with clinical practice needs and is both proactive and responsive to the changing clinical context.
- should develop relationships with stakeholders at different layers of partner organisations. Clinical midwifery educators (whatever their title) should have good oversight of student issues and experience.
- should identify opportunities for joint initiatives and projects with clinical staff to enhance midwifery education and practice. This provides greater integration between academic and clinical environments.

# Quality assurance: the LME

- oversees the quality assurance of all midwifery programmes at the AEI. Although the LME has oversight of all aspects of quality assurance, they may delegate duties as appropriate.
- should ensure the academic education provision meets the NMC Standards for pre-registration midwifery programmes<sup>1</sup> and is in accordance with the AEI's approval documentation. This includes implementation of any changes to NMC standards.
- is responsible for continuous monitoring and evaluation, having a key role in the quality assurance process, ensuring standards leading to registration are maintained and enhanced where possible.
- will advocate within the university to preserve a staff: student ratio that enables student engagement and responsive support. The RCM recommends an academic assessor: student ratio of no more than 1:19.<sup>2</sup>

# Practice education: the LME

- must be assured that every practice placement is an appropriate learning environment for student midwives. This includes monitoring learning environment profiles/practice audits, student practice evaluations, reports of concerns such as the Care Quality Commission, Health Inspectorate Wales, Healthcare Improvement Scotland and the Regulatory Quality Improvement Authority (Northern Ireland).
- has overall responsibility for adequate preparation of practice assessors and practice supervisors within placement learning environments.
- exceptionally reports to the NMC and commences remedial actions, in collaboration with the trust/health board, where concerns are raised regarding a placement provider's ability to fulfil the expectations of the Standards for Student Supervision and Assessment (SSSA).<sup>15</sup>
- develops action plans, in collaboration with the trust/health board, where negative feedback or negative reporting has been identified.
- meets with practice-based colleagues to assess challenges, and feed back to the AEI's senior management/leadership teams to effect change or anticipate challenges.



# LMEs and advanced practice

While LMEs may not currently view themselves as advanced practitioners, there is clear alignment between the role and the principles of advanced practice as defined nationally.<sup>11, 16</sup>

The breadth of the LME role already spans the four pillars: education, leadership and management, research, and in some cases clinical practice. This requires levels of autonomy, accountability and decision-making within complex environments that are commensurate with advanced practice. LMEs influence midwifery education, workforce development, policy, and service transformation through curriculum leadership, regulatory compliance, and academic research, as well as through partnerships with clinical services.

Looking ahead, positioning the LME role more explicitly within advanced practice frameworks offers an important opportunity to strengthen its strategic influence, professional identity and career progression. This aspirational direction could support future regulatory recognition, ensuring parity with clinical advanced roles and embedding LMEs more firmly within system-wide transformation of maternity education and workforce development.



# Key responsibilities of AEIs

## The AEI should provide:

- **Robust governance and accountability**  
Establish clear governance structures for LMEs that align with legal, regulatory and professional standards. Ensure accountability frameworks support autonomy and high performance, enabling LMEs to uphold educational quality and professional credibility.
- **Culture of interprofessional excellence**  
Promote a collaborative and inclusive academic culture where LMEs can work closely with healthcare and academic partners to ensure quality in curriculum, placements and research.
- **Structured opportunities for development**  
Support LMEs to develop and deliver education that reflects the four pillars of practice (clinical, education, research and leadership), offering appropriate resources and protected time for continued professional development.
- **Leadership capacity building**  
Enable LMEs to take on visible leadership roles in shaping maternity education, policy and workforce transformation at local, regional and national levels.
- **Opportunity to lead educational innovation and service change**  
Support LMEs to lead and evaluate innovative teaching and service delivery models that respond to current and future challenges in maternity care.
- **Psychological safety and advocacy**  
Foster a psychologically safe academic environment where LMEs are empowered to raise concerns, challenge poor practice, and advocate for midwifery education and student wellbeing.



# Preparing to become LME

## To prepare for the LME role in an AEI, consider focusing on these key areas:

### 1. Regulatory & quality assurance knowledge

- NMC Standards for pre-registration midwifery programmes – ensure a deep understanding and knowledge of the regulatory framework and SSSA standards.<sup>115</sup>
- Course approval processes – gain experience in writing and reviewing course documentation for NMC approval. Have a deep understanding of your own programmes/courses of study to be able to support and advise peers as necessary.
- Quality assurance and enhancement – understand how midwifery programmes align with other standards, such as the Quality Assurance Agency (QAA) and institutional policies.
- External Examiner role – become an External Examiner for another institution to broaden experience of other midwifery curricula and programmes.

### 2. Leadership & strategic planning

- Academic leadership – strengthen ability to lead and inspire faculty staff, ensuring high-quality midwifery education. There may be opportunities within the team/faculty for leadership e.g. programme/course lead, practice lead, marketing and recruitment lead, student engagement lead. Experience could be gained through deputising or shadowing.
- Strategic development – engage with institutional priorities, funding models, and workforce planning.
- Stakeholder engagement – build strong relationships with healthcare providers, professional bodies, and students.

- Widen stakeholder links – widen stakeholder awareness and regional/ national links by developing relationships and attending or shadowing regional/ national meetings including links with key drivers such as NHS England Workforce Training and Education (NHSE WTE), NHS Education for Scotland (NES), Health Education and Improvement Wales (HEIW), Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC), the Council of Deans for Health and the Office for Students (OfS).
- Professional suitability – engage in activities and investigations where appropriate that involve concerns over student performance/behaviour that may come under university internal investigation procedures/fitness to practise procedures.

### 3. Curriculum development & innovation

- Designing inclusive and flexible curricula – incorporate innovative teaching approaches, including digital and simulation-based learning, also considering equality, diversity and inclusion (EDI) principles.
- Embedding neurodiverse and diverse learning needs – continue developing strategies to support all learners inclusively.
- Interprofessional education – strengthen collaboration and learning between midwifery and other healthcare disciplines.

### 4. Research & scholarship

- Educational research – stay updated on contemporary midwifery education and pedagogy research.
- Supervision and mentorship – develop skills in supporting academic and research projects for students and staff.
- Engagement with policy and evidence-based practice – translate research into curriculum improvements.

- Project management- seek out opportunities for project work with a view to improving teaching, learning and assessment processes and the student experience, including consideration of EDI principles.
- Conference presentation/publication- share research outputs and/or project work to wider networks via publication and/or conferences.

#### 5. **Workforce & student experience**

- Student recruitment, retention, and well-being – develop strategies to support student success and manage attrition. Become actively engaged in the selection and recruitment processes for students.
- Workforce readiness – ensure graduates are equipped for contemporary midwifery practice and future workforce needs. Seek out supporting opportunities to review completion, retention and continuation data with the LME and/or course/programme leader and devising strategic plans to improve this.
- Capacity negotiations- work with the LME, Head of Department or other allocated member

of AEI staff to determine workforce planning and AEI targets and how to align these often disparate requirements.

- Equality, diversity, and inclusion (EDI) – embed inclusive practices in education and placement experiences. Engage in widening participation planning and implementation at departmental, faculty and wider university level where appropriate.

#### 6. **Professional development**

- Identify own learning needs and ensure these are included in annual appraisal.
- Shadow meetings/visits with an experienced LME.
- Attend AEI meetings within the leadership team.
- Develop a portfolio to demonstrate leadership – this might include external courses or internal CPD for development.
- Stay abreast of issues in midwifery education, maternity services, workforce development and Higher Education.
- Demonstrate insight and be proactive in seeking out opportunities, including this in annual appraisals.



# Succession Planning

Succession planning ensures that the LME function continues to provide strategic direction in midwifery education while remaining embedded in national and institutional priorities.

## LMEs:

- Are required to have a 'designated substitute' who must be a registered midwife, as stated in the NMC Standards for pre-registration midwifery programmes.<sup>1,18</sup>
- May invite the designated substitute or another member of the midwifery team to attend in their absence or shadow them at Open UK/NMC LME meetings.
- May invite another member of the midwifery team to attend in-person meetings, either to shadow them, or in their absence, for professional development.
- Should report back on meetings/visits they have attended to the midwifery team so all members of the team are aware of their discussions.

## Key considerations for succession planning include:

- Identify talent early: map out potential LME successors through appraisal, teaching observation, and leadership exposure to enable personal and professional development into the role.
- Create development pathways: offer co-lead roles, shadowing opportunities, and support for academic advancement to ensure a smooth handover of the LME role.
- Institutional support: universities must recognise the strategic importance of the LME role and resource its succession adequately within workforce planning.
- Succession should aim not only to provide continuity and preserve institutional memory but also to innovate, enabling future LMEs to co-design curricula that reflect emerging priorities such as digital maternity care, health equity, and global midwifery leadership.





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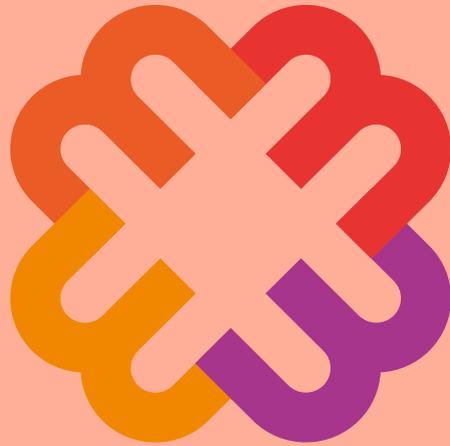
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