

PRACTICE LEARNING ENVIRONMENT PROFILE

Learning Environment (Care Group): MIDWIFERY

Division: C

GENERAL INFORMATION

Education lead	Lucy Price		
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UHS VALUES	PATIENTS FIRST WORKING TOGETHER ALWAYS IMPROVING Please reflect on what these values mean to YOU		

USEFUL LINKS



INDUCTION INFORMATION

Trust induction	Your induction may take the following format: Initial induction and local induction/orientation on commencement of new placement. Please ensure completion of any relevant items in your assessment of practice document linked to induction/orientation. Students are given an individual orientation to each clinical environment by a practice supervisor or practice assessor and this is recorded in their assessment of practice portfolio.
Orientation / useful documents	Southampton Maternity services a large population and offers Maternity services to the local areas of Southampton city and Hampshire as well as regional services for both fetal medicine and Neonatal intensive care and surgery. The clinical team consists of Consultant Obstetricians, consultant midwives, consultant nurse, specialist midwives, midwives and maternity support workers all providing care for approximately 6000 women and their families every year. Southampton provides some very unique opportunities for students including the 'caseload' model of care, team midwifery; stand alone and alongside birth centres as well as caring for women with complex medical conditions.
Expectations	 Professional behaviour Willing to learn Punctuality Represent university and UHS Adherence to appearance policy (Below) Wear ID badge at all times Theatre induction Expected to do all types of shifts Ensure contacted Practice Assessor prior to commencing placement to arrange meeting points

PROFILE

WARD/AREA	SERVICE & CLIENT GROUP	LOCATION
Labour Ward	This is a high risk birthing environment and has 13 birthing rooms for women in normal labour and for women who need additional help or facilities. This includes full medical and midwifery support for women who have epidurals and caesarean sections. There is also a high dependency unit for women with complications of pregnancy and birth, and a recovery area for women who have undergone caesarean sections. Student midwives are allocated to work on this ward predominantly in years 2 and 3.	Princess Anne Hospital D Level
Broadlands Birth Centre	This is a co-located midwifery led birth centre and provides care for women and their families with a normal pregnancy and birth. The centre offers a 'home from home' relaxed atmosphere and has 6 birth rooms – 2 with birthing pools. There are four postnatal beds, and the average length of stay is between 6 and 24 hours after giving birth. Student midwives are allocated to work on this ward at all stages of their training.	Princess Anne Hospital E Level
Burley Ward and Lyndhurst wards	These are specialised ward for both antenatal and postnatal care, for women requiring consultant led obstetric care either before or after having their babies. Burley has 20 post natal beds and Lyndhurst has 22 antenatal and postnatal beds. There is a room that provides a home like environment for women and their partners who experience a fetal/neonatal loss.	Princess Anne Hospital F Level
Maternity Day Assessment Unit (MDAU)	MDAU is for women who have concerns about their pregnancy or have been referred for investigations. Women are triaged based on how urgently they need to be seen. It is situated in the same area as the high risk labour ward. It has 5 beds and a seated review area. Second and third year student midwives are allocated to work in this area.	Princess Anne Hospital D Level
Outpatients	This department offers a wide range of services and is the first point of contact between women and specialist professionals. Services include: high risk antenatal clinics, joint antenatal and diabetic clinics, regional centre for fetal medicine, ultrasound scan service. Second and third year student midwives have the opportunity to gain experience in all of these services.	Princess Anne Hospital E Level
New Forest Birth Centre	This is a stand alone birth centre located on the edge of the New Forest in Ashurst. It provides care for women and their families with a normal pregnancy and birth. This unit is midwifery led. Women who develop complications in labour or after birth are transferred to the	New Forest Birth Centre, Ashurst

	Princess Anne Labour Ward. The Birth Centre also holds antenatal, tongue tie and postnatal Student Midwife integrated Learning Environment (SMiLE).	
Community	This service delivers antenatal and postnatal care to women and their families across Southampton and the New Forest. Midwives and Maternity Support Workers work in teams based at midwifery hubs. Student midwives are allocated to work across the community setting at all stages of their training.	Midwifery Hubs across Southampton and the New Forest.
NEST Continuity of Care Teams	The continuity of care teams consist of 7-8 midwives who provide antenatal, intrapartum and postnatal care to women requiring extra support during their journey through the maternity service.	Teams across Southampton and the New Forest.

LEARNER INFORMATION

Work pattern (shifts, start and finish				
times)	Early	07:30-15:30	Late	12:30-20:30
	Night	20:00-08:00	Long day	07:30-20:30
	Community shifts are either 8am-4pm or 9am-5pm.			
	ms undertake case loading	ns undertake case loading and their hours are flexible across the week to meet the needs		
	of the women and the service, this includes an on-call system.			
IT and resources	There are library facilities for students available at Southampton General Hospital and the Harley			
	Library which is attached to the university. Both libraries have IT facilities. There is also a computer			
	room on F	level at the Princess Ann	e Hospital which is av	vailable for all student midwives.
Staff room / rest room facilities	There is a staff room for breaks in all clinical areas. There are kettles, fridges, microwaves available			
	for staff to use. Staff toilets are situated within each clinical area.			
Common conditions and Diabetes, breech presentation, p		breech presentation, pre-	eclampsia, intra-uter	rine growth retardation, small for dates, large
assessments for dates, multiple pregnancies, obesity, tongue tie.				
Common procedures and expertise	Normal births, elective/emergency caesarean sections, external cephalic version, vaginal birth after			
	caesarean section, perineal suturing, ultrasound scanning, antenatal/postnatal blood tests, antenatal			
	checks, postnatal checks, baby observations, first medicals on babies, induction of labour.			
Common prescribed medications				
Glossary of terms				
Abbreviations and short terms	A list of al	breviations can be access	ed from mentors wo	orking within specific clinical environments.
Specific learning opportunities and	Attending	MQuEST (Maternity Qua	lity Education and Sa	fety Together) meetings as part of a multi
multiprofessional working	-		-	stetric physio, Consultant clinic, parent
opportunities		· · ·		

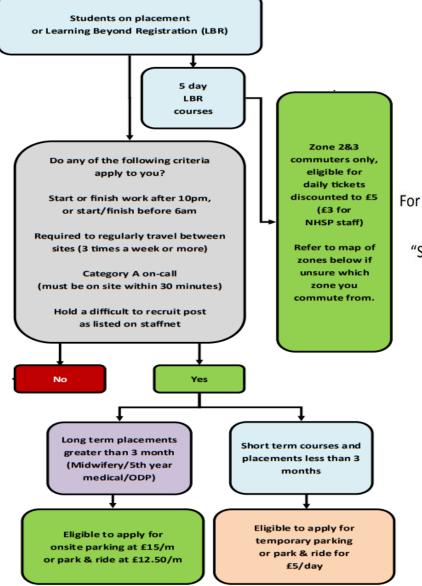
	education, independent midwives, family nurse practitioner (FNP), Social workers, Health visitors, maternity information services, Infant feeding Team, Bereavement team, Radiography, research unit – PAH, diabetes midwives, obesity midwives, children's centres, Pharmacy, perinatal mental health, transitional care, Paramedics, safeguarding - PAH and SGH, public health - smoking cessation, dietician, perinatal mortality meeting, risk reviews.
Recommended reading prior to	Generic reading:
placement	NMC website
	Anatomy and physiology

APPEARANCE

REQUIRED STANDARD	RATIONALE
Clothes/designated uniform: All clothes/uniform should	Professional appearance.
be smart and in good repair. An overall professional appearance which cannot be deemed offensive to patients, colleagues and the public should be maintained e.g. no low necklines, bare midriffs, very short skirts or potentially offensive slogans or tattoos. No denim, leggings, flip flops or strappy vest tops to be worn. The only exception to these standards for clinical environments is where health and safety legislation require a person to wear specialist protective clothing for health and safety purposes.	Health and safety regulations
Hair: Must be clean, neat, and tidy and tied back off the face and off the collar. Hair must not be able to fall forward onto patients. Hair accessories and fastenings should be discreet. Any headwear worn for religious purposes should be clean and laundered daily and should be in keeping with the overall corporate appearance.	Potential for wound contamination from loose hair. Providing hair is clean and tidy the risk of dispersal is minimal. When hair is touched micro-organisms on the hands will transfer to the hair and from hair to hands, potentially increasing risk of infection to staff.
Fingernails: Must be clean and short. Nail varnish, acrylic nails and false nails must NOT be worn.	To avoid transferring bacteria under the fingernails. Reduces the risk of trauma when involved in direct patient contact.
Jewellery: Rings: Only one plain metal band ring may be worn. Watches: No wristwatches are to be worn in any clinical environment. Necklaces: No necklaces are to be worn in the clinical environment. Medic-alert jewellery is not to be worn on the wrist (but could be attached to uniform) and must be cleanable, plain and discreet.	jewellery may be hazardous for the following reasons: Jewellery, even plain gold bands (wedding rings) have been shown to colonise with micro-organisms (Hoffman et al 1985) Rings with stones are hazardous and may cause trauma to patients Stones in jewellery may become dislodged Jewellery that is hanging e.g. necklaces, could be dangerous

	to staff and patients in potentially violent situations Appropriate hand washing techniques are prevented by the wearing of wristwatches
Piercings: Earrings: one pair of small plain metal studs only should be worn. All new visible body piercings must be covered with a blue plaster until the wound has healed. No other visible piercings are allowed.	New wounds shed high levels of bacteria. Professional appearance is important for patient confidence. Food hygiene regulations
ID Badge: As for all staff Trust ID Badges must be worn at all times in a clearly visible	To conform to Trust Security Policy
Footwear: Must be clean, plain, low heeled, non-porous, enclosed and in a good state of repair and ideally have a non slip tread. Shoe style and colour must be in keeping with the overall uniform style. Only staff wearing scrubs may wear white/black shoes/clogs or 'crocks' (without holes). Theatre footwear may be of various colours Footwear for ward based staff should be soft soled to reduce the level of noise particularly at night. In some areas protective footwear must be worn (as detailed in local policies).	Shoes in a poor state of repair and those with no tread are a safety risk. Staff working in a clinical area must take noise issues into account regarding their footwear. It cannot be decontaminated, and/or does not provide adequate protection from spillages and dropped equipment Health and Safety statutory requirement.
Belts/Epaulettes: Belts should not be worn when involved in direct patient contact/care. Epaulettes should be clean and laundered at least weekly	Risk of trauma to patients. Ease of movement for staff. Reduces risk of cross-infection.
Tights/Stockings/Socks : If not wearing trousers, tights must be worn and be plain black or natural colour. In the case of extreme hot weather, deviations from this policy will be communicated to staff by the appropriate authorising manager / professional lead.	To promote a professional appearance.
Designated uniform: Must be changed daily and laundered at 60 C and ironed prior to wearing.	Reduces the risk of cross-infection. Care of Linen Policy. Professional appearance and patient confidence.
Makeup and Perfume: Discreet makeup may be worn. Perfume and aftershaves must be subtle	To promote a professional appearance. For patient and colleagues comfort.
Additional garments e.g. fleece/cardigan: must not be worn when delivering direct patient care. Fleece/cardigans that are worn must be of a plain dark colour, must not have any non Trust logo's and be of smart appearance. Theatre jackets may be worn when the environmental temperature is low (e.g. cardiac) but must be removed if direct patient care is involved.	Reduces the risk of cross-infection
Personal Hygiene: Staff must ensure their appearance is clean, tidy and they are free from body odour when they are at work.	To promote a professional appearance. For patient and colleagues comfort

PARKING



For the list of hard to recruit roles, please search "Staff car parking and permits" on staffnet, or contact Travelwise on Travelwise@uhs.nhs.uk or 023 8120 4133

