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Preparing for your Preceptorship Midwife interview: a student's guide

Abstract

This is a very busy and exciting time in the academic year as third year students come to the end of their programme of study and start to apply for preceptorship posts. Whilst there remains a shortage of midwives (Royal College of Midwives (RCM, 2015), applications for posts are still very competitive and so candidates need to ensure they are as well prepared as possible to ensure they perform at their very best on the day. This article revisits what constitutes 'a good midwife' (Power, 2015) and then goes on to look at the recruitment process from the perspectives of the interviewer and the interviewee. Paula Briody, Matron for Intrapartum Care (Northampton General Hospital NHS Trust) is actively involved in the recruitment process for her Trust and outlines the key characteristics she looks for in candidates. The article also shares the experiences of third year students who have recently been interviewed for their first midwifery posts. It is hoped that hearing about the process from both perspectives might be useful for all third year students currently applying for their first jobs as they get one step nearer to realising their dreams of becoming a qualified midwife.

Keywords: preceptorship; midwifery recruitment; interviews; 6Cs; VBR; Leading Change, Adding Value

Introduction

The Mid Staffordshire NHS Foundation Trust Public Inquiry (Francis, 2013) highlighted how service users were receiving substandard care where staff did not exhibit core values such as care and compassion. In response to the identification of this basic failing, Health Education England (HEE) published its National Values Based Recruitment (VBR) framework (2014) to encourage Higher Education Institutions (HEIs) to introduce the values of VBR into their recruitment process. VBR is defined by Health Education England (HEE) as:

an approach which attracts and recruits students, trainees and employees on the basis that their individual values and behaviours align with the values of the NHS Constitution, alongside their skills and aptitude

(HEE, 2016: VBR)

At the point of registration, the NMC states student midwives should be able to 'practise safely and effectively without the need for direct supervision' (NMC, 2010:23). The required competencies are divided into four domains:

- Effective midwifery practice
- Professional and ethical practice
- Developing the individual midwife and others
- Achieving quality care through evaluation and research

and map to the Essential Skills Clusters of communication, the initial consultation between the woman and the midwife, normal labour and birth, initiation and continuance of breastfeeding and medicines management (NMC, 2010). Policy dictates that the midwife should support women throughout the childbirth continuum to have a positive and life enhancing experience (Chief Nursing Officers of England, Northern Ireland, Scotland and Wales, 2010). In terms of service users' expectations, women cite theoretical knowledge and clinical competency as key attributes of a 'good midwife'; however 'soft skills' such as good interpersonal skills and moral/ethical values are of equal importance to ensure women feel supported, empowered, and informed. In women's opinions being treated kindly and respectfully, with their dignity being maintained are key to a positive childbirth experience (Borrelli, 2014; Healthcare Commission, 2007).

What does the Service need?



In 2016 the Chief Nursing Officer for England launched *Leading Change, Adding Value: a framework for nursing, midwifery and care staff*. This framework builds on *Compassion in Practice* (Commissioning Board Chief Nursing Officer and DH Chief Nursing Advisor, 2012) which introduced the expected core values and behaviours of healthcare staff, entitled 'the 6Cs' (care, compassion, competence, communication, courage, commitment). The new framework encourages midwives, nurses and care staff to lead change in improving the health and wellbeing of the nation by providing an inclusive service providing high quality care for all. In order to achieve

this, resources need to be used efficiently. In so doing they will be adding value to the 6Cs to ensure better outcomes and experiences for service users with better use of the resources available to them.

As part of the Clinicians in the Classroom series of articles (Power and Briody, 2016) Matron for Intrapartum Care, Paula Briody, discussed how she feels an important part of her remit is to take a proactive role in the recruitment process and since arriving in post in 2013 has been a member of every midwifery interview panel at her Trust. Paula believes that it is the responsibility of managers to ensure the right midwives are recruited to a strong team to ensure women are provided with choices in care that is of the highest quality and is safe and woman/family focused. Equally she believes the Trust has responsibilities for its employees and midwives should feel happy, supported and valued by their employers.

Paula states that her main objective when interviewing is to see and feel that midwives have a passion for midwifery, that they understand the importance of the 6Cs and how both a positive /negative birth experience will have long lasting implications not only on the woman but the whole family unit.

Newly qualified midwives must have a clear understanding and belief in the physiology of birth and have an awareness of factors that will both optimise and inhibit this process. The questions asked during the interview process aim to explore whether candidates possess the right qualities. Paula believes that the clinical skills required when caring for women e.g. monitoring fetal wellbeing, epidural management, setting up and monitoring intravenous infusions etc. can be taught; however it is much harder to 'teach' qualities and values such as being able to care and show compassion and courage.

Advocacy is so important and requires courage, which are advanced skills for a newly qualified midwife. Women can so often feel vulnerable and disempowered during labour/birth and so it is important that midwives build relationships with women and their partners to create an environment during labour that will promote a positive birth outcome. It is important that midwives have an awareness of how feeling disempowered can have a long-term negative effect on a woman and ultimately her family. Women should feel that they have been part of the decision making process and as midwives we need to ensure that they have a voice (Blunt, 2014). These qualities are assessed at interview by asking candidates to reflect on an experience when they acted as an advocate for a woman/family they were caring for.

In 2013 Paula's Trust secured some funding to improve the birth environment and some of the monies were used to develop a birth centre. This attracted a lot of interest from out of area midwives as it could provide a wide range of choice of working environment from an obstetric unit for higher risk pregnancies to the award winning home birth team and birth centre for women on the low risk pathway.

This popularity was advantageous to the unit as it is always exciting to have midwives from different units/areas join the team, sharing new ideas and bringing suggestions from practises they have seen work in their previous Trusts; however one disadvantage to this popularity was that one year not all of the students who had their clinical placements at the Trust were able to secure a position. This led to Paula facilitating a regular session at the university to talk about preparation for interview in order to help students to be as well prepared and therefore as competitive as possible for the limited number of vacancies.

Student midwives' tips for preparation for interviews

When I prepared for interviews I thought about having good responses to the expected questions i.e. Why this Trust? What can you bring to this Trust? And the really horrible ones 'Tell me about yourself' and 'Why do you want to be a midwife?' I also recapped on supervision and recent reports, policies and guidelines. It appeared that they wanted to see what type of person I was and how I interacted with people in a stressful situation rather than it all being about my answers to their questions.
(Katy)

For my interview preparation I read and refreshed my knowledge on recent Government reports, read my local policies and in particular obstetric emergencies. I looked at the 6Cs and how I implement them within my practice and practised drug calculations online.
(Suzanna)

I prepared by ensuring I was fully educated in relation to the hospital's procedures, policies and their ethos as a whole. I also made sure I was up to date with current issues within midwifery care, including future things on the horizon for midwifery care.

I found the interview a great experience as a whole. I felt prepared so therefore felt confident. Individual preparation is key.

My advice would be to educate yourself as best as you can in relation to the Trust you are applying for and what their ethos is within midwifery care. Be confident, this is your time to shine! Be sure to inform the interviewers how you can benefit them, it's one moment to really make that important impression for your future!
(Rachael)

In summary

It is clear that the contemporary midwife requires a wide range of skills and attributes to meet the diverse demands of the service user, government policy, the NMC and their employer. Using VBR, HEIs aim to recruit students who possess the core attributes which align to the values of the NHS Constitution (DH, 2015), to then nurture and develop these values throughout the student journey. As students reach the end of their studies and approach qualification they apply for their first preceptorship posts and prospective employers expect to hear evidence of how candidates have implemented the 6Cs in practice as well as their academic achievement and clinical competency. Competition to securing a place on a midwifery undergraduate programme is fierce and despite staff shortages this competition is still evident when applying for jobs. The midwife of today must be 'all singing, all dancing'; clinically competent and confident, kind and caring with a brain the size of mars to ensure practice is based on best-evidence. To all student midwives about to qualify: congratulations on your huge achievement and the very best of luck in securing your first post and becoming a member of a very special profession.

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