



M A C M I D W I F E R Y

MCMASTER MEP NEWSLETTER

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REPORT OF THE STUDENT WORKLOAD COMMITTEE

Many preceptors and faculty have become concerned that there are students struggling with their clinical workload. Students have reported attending very high numbers of births, particularly seconds, as well as a high volume of clinic visits. They are suffering from fatigue, anxiety and distress at the volume of clinical work expected during their placements. The majority of OMEP documents regarding student workload were developed in the 90's prior to the widespread use of shared care call models and thus may not be relevant today. The report of the Student Workload Committee is the first step to examine and propose revisions to the OMEP policies on student workload in order to give better guidance to preceptors. The three Ontario MEPs have worked together this year to produce a report on student workload.

The full report has been presented to practice Education Coordinators for input as well as at the AOM conference. There are seven proposed strategies to address excessive student workload.

1. Planning birth numbers

Clear definitions of the minimum attended primary and second births and maximum attended second births will help to establish an appropriate ratio of student experience in these roles.

2. Clarify student workload expectations

Expand the average number of visits per week from 15 to 20 maximum. This is averaged over the call schedule rotation and includes prenatal and postnatal visits. The increased number of visits reflects shorter visits since the 1994 policy was developed. Clarify that 4 days off call per month is a minimum standard. Student's clinical workload should be slightly less than that of a full time midwife.

3. Modify the half day protected study time policy

Replace protected study time with a 24 hour off call Academic Work Day starting at 1700 on the day prior to the scheduled tutorial. The 24 hours off call will thus encompass the tutorial time, protected study time and rest prior to tutorial.

4. Consider setting maximum work hours per week

Practices can consider a maximum of 40 clinical work hours per week to manage student workload and facilitate student's ability to meet academic requirements.

5. Revise the student fatigue policy

Revise the safety policy for students from being off call for 8 hours if they have 'worked non-stop for 24 hours' to being off call for 12 hours if they have been awake for 24 hours.

6. MEP follow-up with practices exceeding workload norms

Provide guidelines to assist preceptors adjust workload expectations when maximum birth numbers or workload norms are exceeded. MEP faculty can discuss adherence to student workload guidelines with the preceptor, EC and MPG. Preceptor adherence to MEP student workload guidelines should be considered a professional behaviour expectation with AOM and CMO.

7. Review preceptor qualifications

Clarify the role of new registrants working with students. Establish a requirement for preceptor continuing education. At McMaster we would like every preceptor to attend at least one workshop per year. Replace new preceptor requirement for CMO Letter of Professional Conduct with a declaration of good standing.

The plan to implement these strategies will include preceptor input and a review of the workload planning tools. In addition, student input to the report will be sought via surveys at all three sites to include the perspective of all student levels. Faculty and Practice Education Coordinators will take the lead in educating preceptors and implementing policy change once the recommended changes are approved.

Announcements

CONGRATS
TRACY PEARCE-KELLY!!



2018-2019 Excellence in Clinical
Teaching

McMaster Midwifery Preceptor Award Winner

The Preceptor Award is an award for an outstanding preceptor. Each year the three sites call for nominations in order to acknowledge and celebrate the work of an inspirational preceptor. The winner of the McMaster University MEP preceptor award is Tracy Pearce Kelly.

Tracy is a graduate of McMaster University and has worked as a midwife in Oakville and Burlington for 20 years. She is passionate about midwifery and has shared that passion with numerous midwifery students over the years. She has also been instrumental as a mentor for new preceptors and problem solving in difficult learning situations.

Students have enjoyed her support and expertise. Tracy teaches evidence-based care while supporting normal birth and the art of midwifery. One student commented, "Tracy is passionate about teaching as well as being a heartfelt advocate for women. From her I learned the art of caring for women". Tutors and midwifery faculty appreciate her quick wit, high clinical standards and ability to teach full scope. Tracy also has been a leader in inter-professional relations and formulating the Surgical Assist Course. She is an AOM ESW instructor and teaches clinical skills at McMaster University.

Dr. Eileen Hutton's Term as McMaster MEP Assistant Dean Ends July 1st

Special thank you to Eileen for her leadership and dedication to the Midwifery Education Program at McMaster and the larger consortium!



MEP Assistant Dean
Dr. Eileen Hutton

Dr Eileen Hutton has been an exemplary leader for the Midwifery program at McMaster and the larger consortium. As a founding faculty member in 1993 she helped formulate many of the course materials still in use today. She left for a few years to assist UBC and to complete her PhD but returned in 2008 as the Assistant Dean. In her tenure she was instrumental in developing a midwifery research agenda and helped to mentor numerous graduate students to develop research capacity. Eileen Hutton is the first midwife to be inducted as a Fellow into the Canadian Academy of Health Sciences – a very high honour. Eileen has been a midwifery pioneer in Canada, advancing the science of obstetrical and midwifery practice including homebirth, mode of delivery, breech presentation, multiple births and impacts of practice on newborns. Prof. Hutton also served as Professor of Midwifery Sciences at Vrije University, Amsterdam from 2010 to 2015. She will be missed at McMaster and is succeeded by Dr Liz Darling as the new Assistant Dean.



Research

Crown Point Project

The Ministry of Health recently announced that it will be funding the Crown Point Expanded Midwifery Care Models proposal. Led by McMaster Midwifery Faculty members, the project will bring existing midwifery services into the East end of Hamilton and develop extended scope midwifery care to meet the population needs. This community is dominated by low-income households and has been identified as having a higher rate of teen pregnancy, low birth weight infants, higher smoking and mental health concerns.

In addition to core midwifery services provided by a local MPG, expanded midwifery scope services will be available to the Crown Point Community. The expanded scope services will include well woman care, cancer screening, access to medical pregnancy termination and gynaecological services. The primary care midwifery services will provide access to the higher needs population in their own community. There is currently no midwifery clinic in this part of the city.

Got any precepting questions or tips? Contact Patty McNiven mcnivenp@mcmaster.ca for content to be added to the fall newsletter!

Upcoming Events:

July 2018 - Learner in Difficulty Workshop (Guelph) Date TBD if interested contact kedge@mcmaster.ca

Sept 25 2018 - Annual Education Coordinator Meeting (Hamilton McMaster Faculty Club)