

APPENDIX 1

FETAL SURVIELLANCE PRACTITIONER LEVELS

Hospitals and health services should ensure that the health professionals providing intrapartum care have access to regular training in intrapartum fetal surveillance. (RANZCOG, 2006)

Fetal Surveillance Education Program

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) Fetal Surveillance Education Program consists of 2 modes of education:

1. The Online Fetal Surveillance Education Program (OFSEP) program is accessed via RANZCOG and forms the prerequisite learning and reading prior to attending the fetal surveillance study day. Staff are urged to complete this prior to attending the study day to increase understanding in preparation for active multi professional discussion and case study review during the study day.

OFSEP also includes assessments which must be completed successfully before progressing through the program. A certificate of completion is available at the end of the program.

2. The FSEP study day is a seven-hour study day, the last hour of which is taken up with a Multiple-Choice Question (MCQ) assessment.

It is a requirement of Ballarat Health Services for all Obstetric Medical and Midwifery Staff providing Maternity Services and who review CTG's, attend the FSEP study day 2nd annually and complete the one-hour assessment. Staff are required to achieve the appropriate practitioner level commensurate with their experience and level of responsibility in the delivery of maternity care.

The Practitioner Levels are outlined below:

LEVEL 1 PRACTITIONER CHARACTERISTICS:

(Expected score 55-65)

The level 1 practitioner is typically a supervised practitioner who would not necessarily be Expected to have comprehensive clinical (birth suite) experience.

The level 1 practitioner should:

- have a basic understanding of the physiology of fetal heart rate control
- have read and understood the RANZCOG Clinical Practice Guidelines
- be able to correctly perform intermittent auscultation (as per RANZCOG Guidelines)
- be aware of the different types of fetal monitoring and their indications
- be expected to be correctly applying Electronic Fetal Monitoring under supervision
- know and be able to define the components of a normal antenatal or intrapartum CTG
- be able to recognize common CTG abnormalities
- understand the principals of conservative management for common CTG abnormalities and be able to apply them under supervision
- be expected to notify a Level 2 or 3 practitioner of an abnormal CTG

LEVEL 2 PRACTITIONER CHARACTERISTICS:

(Expected score 66-75)

The level 2 practitioner is typically an independent practitioner with several years clinical (Birth suite) experience and access to Level 3 staff

In addition to the Level 1 characteristics the Level 2 practitioner should:

- have an in-depth appreciation of the different approaches of intrapartum fetal monitoring including the indications, implications and limitations of each.
- have a sound knowledge of maternal, uteroplacental and fetal physiology underlying the common CTG abnormalities

- understand how antenatal problems may impact on the health of the fetus in labour
- be able to recognize and effectively manage common CTG abnormalities
- be able to recognize trends in fetal heart rate patterns and the implications of these trends for maternal and fetal health
- be able to initiate emergency responses in the case of suspected severe fetal compromise
- be able to provide advice and education for Level 1 practitioners
- be expected to notify a Level 3 practitioner regarding an abnormal CTG where active management is required

LEVEL 3 PRACTITIONER CHARACTERISTICS:

(Expected score >75)

The level 3 practitioner will typically have extensive clinical (birth suite and/or fetal surveillance) experience and may, as part of their regular duties, be involved in the training of less experienced staff In addition to the Level 2 characteristics, the Level 3 Practitioner should:

- have a detailed knowledge of the normal and abnormal CTG including the underpinning maternal, uteroplacental, and fetal physiology
- be able to recognise and manage the less common CTG abnormalities
- know the indications for other investigations as required and appreciate their limitations and implications
- have a detailed understanding and appreciation of the physiology of the high-risk pregnancy
- be able to manage and prioritize multiple patients with an appreciation of the likely implications of their actions
- be able to make advanced management decisions based on accurate synthesis of
- information from a wide range of sources
- be able to recognize errors in information and interpretation

The following is a guide to the minimum Practitioner Levels required by Obstetric staff working in Maternity Services at Ballarat Health Services.

Minimum Required Practitioner Level	Clinician
Level 1 (>55%)	Grade 2 Midwives working SCN and LC
Level 2 (>66%)	Grade 2 Midwives (unless otherwise stated) Residents
Level 3 (>75%)	Midwives - Shift Coordinators (Inpatients and Maternity Outpatients Departments) Midwives - Clinical Nurse Specialists Midwives - who work in Continuity of Care Option (COCO), Patient Assessment Service (PAS), Labour Ward Triage Service (LWTS) and High-Risk Antenatal Clinic (HRC) Obstetric Registrars Senior Obstetric Staff

Staff not reaching an appropriate practitioner level

Where an individual has not achieved a practitioner level which is commensurate with their role and level of responsibility the NUM /Clinical Director of Obstetric should:

- 1. Meet with the individual to discuss the assessment result and graphical item map to ascertain possible causes.
- 2. The individual will be instructed to complete the online Fetal Surveillance Education Program with assessment within 4-week s and provide their certificate of completion.

3. Within 12 weeks of completion of the meeting the individual is to enrol in the next available Fetal Surveillance

Education Program Study Day and complete the education and exam.

- 4. Where an individual is unable to successfully complete the online assessment or still fails to achieve the appropriate practitioner level at the Full Day FSEP, local performance management procedures should be followed including participation in local CTG reviews/audits led by a Level 3 practitioner. Consider attendance at the CTG Fundamental Workshop and exam. This meeting is to be documented in the individuals Human Resources file with transcript of discussion and action plan including targeted reading based on test results and successful completion of assessment with timelines
- 5. When on duty an individual with a practitioner level of Level 1 should have immediate access to an Obstetric or midwifery staff, who has achieved level 2 or 3 practitioner status and have all CTG's reviewed by that staff member.

Refer to Appendix 2 for Practitioner Level Flowchart