

# NATIONAL STUDENT MIDWIFE COMPETENCY ASSESSMENT TOOL Indirect Supervision Placement Higher Diploma Midwifery



Full Student Name (as per NMBI Register):
Student College ID number:
Date/Year Commenced Programme:
, C

# UCD SCHOOL OF NURSING, MIDWIFERY & HEALTH SYSTEMS

Scoil na hAltrachta, an Cnáimhseachais agus na gCoras Slainte

> In partnership with the National Maternity Hospital



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This document remains the property of the Higher Education Institute (HEI) and its care is the responsibility of the undergraduate midwifery student

# SIGNATURE BANK Each Registered Midwife who acts as a Preceptor for this student must sign this signature bank

<b>Print Name</b>	Signature	Designation	NMBI Pin

Print Name	Signature	Designation	NMBI Pin

#### **INSTRUCTIONS FOR USE**

This is a confidential document. This document remains the property of the Higher Education Institute (HEI) and its care is the responsibility of the undergraduate midwifery student. This document may not be altered. The student is responsible for its security and for maintaining it in good condition. The document should be available to authorised personnel on request.

PLEASE READ AND SIGN
It is my responsibility to ensure that I have the correct documentation prior to going on practice placements i.e. MCAT document and clinical experience record book.
I will carry this document with me at all times while on practice placements.
It is my responsibility to ensure that the preceptor/co-preceptor signs the Signature Bank before signing the document.
It is my responsibility to ensure that I have arranged a date for an initial interview.
It is my responsibility to ensure that I have arranged a date for an intermediate interview, and I know my attendance will also be reviewed at this interview.
It is my responsibility to ensure that I have arranged a date for a final interview.
It is my responsibility to seek feedback on my progress throughout the placement.
It is my responsibility to act in accordance with local policies and guidelines (e.g. uniform policy).
It is my responsibility to have all documentation signed off within two weeks of completing clinical time.
I understand that 100% attendance is required on all practice placements.
I have read and understand the above instructions.
Signature of Student: Date:

#### SUPPORT WHILST ON PRACTICE PLACEMENT

You are never alone when on practice placement and there are clinical, and university supports available to you.

#### **Clinical Supports:**

#### Preceptor/Associate preceptor

Is there to supervise and guide your performance. Your preceptor will liaise with the Clinical Co-Ordinator

#### Clinical Co-Ordinator:

Supports and facilitates your learning. Monitors the quality of the clinical learning environment. Liaises with the University and your Personal Tutor.

Name of Clinical Co-Ordinator: Contact Details:

#### Chaplain

Chaplain services are available to all patients and staff in the National Maternity Hospital. Extension: 3121.

#### **Employee Assistance Programme (EAP)**

This is a free and confidential service available to all staff. As employees of the hospital this includes Higher Diploma Midwifery (HDM) students. Contact details: Free phone 1800 995 955. Email: eap@vhics.ie

#### **UCD SNMHS Supports:**

#### **Personal Tutor**

Offers assistance to you on matters, academic/clinical and personal. Your personal tutor will not routinely visit you when you are on placement, but if you are encountering any difficulties, they are available to support you. Your personal tutor liaises with the clinical site, CPC and preceptor.

Name of Personal Tutor: Contact Details:

#### **Clinical Midwifery Tutor**

Supports the integration of theory and clinical practice. Offers one-on-one learning support whilst on practice placements and also arranges regular group tutorials in the clinical practice area to facilitate learning.

Name of Midwifery Tutor: Contact Details:

#### **Student Advisor**

Independent support who offers guidance on all matters, financial/personal/academic and clinical. Liaises with personal tutor.

Name of Student Advisor: Contact Details:

#### **Introduction to the Competence Assessment Tool and Placement Records**

This document contains the Midwifery Competence Assessment Tool (MCAT) for the Higher Diploma in Midwifery 'indirect supervision' practice placement and guidance for its use. The MCAT and guidance document is adapted from the BSC Midwifery Year 3 MCAT which was developed by the Nursing and Midwifery Board of Ireland (NMBI) in consultation with the relevant Higher Education Institutes (HEIs) and associated Health Service Providers (HSPs).

Clinical practice is an integral part of the Midwife Registration programme, reflecting the practice-based nature of the midwifery profession. The development of skills, knowledge and professional behaviours represent a key component in the students' attainment of competence to practise as a registered midwife. The MCAT serves as a record of ongoing achievements during clinical practice over the 18-month post-registration midwifery programme and completion of the document is required in order to register as a midwife in the Midwives Division of the Register of Nurses and Midwives maintained by the NMBI.

This document provides guidance to assist the student and her/his Preceptor/Co-preceptor to complete the MCAT. The student will be assessed in core midwifery practice placements at incremental levels by Preceptors/Co-preceptor and Registered Midwives, who support, supervise and assess the student throughout her/his practice placement. It is recommended that this document be read in conjunction with the following:

Academic Regulations and Procedures of the relevant HEI

#### and

• Any specific guidance provided by the midwifery team within the HEI or the Midwifery Practice Development team responsible for the programme.

The student and the Preceptor/Co-preceptor must be familiar with her/his individual roles and responsibilities, as outlined below, and with the processes and procedures associated with the assessment of competence and the documenting of these in the MCAT.

### Competence for Entry to the Midwives Division of the Register of Nurses and Midwives Maintained by the NMBI

Competence is defined as 'the ability of the registered midwife to practise safely and to fulfil their professional responsibility effectively' (NMBI 2015). The competencies in this document specify the knowledge, understanding and skills that midwives must demonstrate when caring for women, newborn infants, partners and families across all care settings. They are based on the International Definition of the Midwife (ICM 2017) and reflect what the public can expect midwives to know and be able to do in order to deliver safe, effective, respectful, kind and compassionate midwifery care.

The five competencies for entry to the Midwives Division of the Nurses and Midwives Register maintained by the NMBI are clearly aligned with the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021) and are based on the Practice Standards for Midwives (NMBI 2022).

### **Assessment of Competence in the Midwife Registration Programme**

The aim of the MCAT is to ensure that, on completion of the Midwife Registration programme, students provide safe, effective midwifery care in partnership with women during pregnancy, labour, birth and the postnatal period and provide care for the newborn and the infant.

The five competencies represent a broad enabling framework to facilitate the assessment of students' clinical practice, with the emphasis on a holistic assessment of knowledge, skills and professional behaviours expected of a midwife. Each competence has a series of assessment criteria that are specific to each phase of the Midwife Registration programme, and outline what is expected of the student in core clinical midwifery placements. This facilitates incremental progression of the student under a spectrum of supervision, beginning with **Direct Supervision** and culminating in **Distant Supervision**. The level of supervision expected for each level is stipulated by the NMBI (2022) and is defined in the MCAT specific to the level of the Midwife Registration programme. **Indirect Supervision** applies to this document and is defined below.

Level and Description of Supervision	Scope of Practice
Indirect Supervision: Defined as the preceptor being accessible whenever the student is taking the lead in providing care to women and their babies. The student can safely and effectively perform the skill and provide care and can support care with evidence.	The student can identify the needs of women and their families and begins to adopt a problem-solving approach to the provision of safe midwifery care. The student actively participates in the care of women and their babies and is able to demonstrate the requisite knowledge, skills and professional behaviours under the indirect supervision of the midwife. It may be difficult for the student to prioritise care in particular situations. The student demonstrates awareness of the need for best practice and supports care with evidence and can identify their learning needs from clinical experience.

In each level of the Midwife Registration programme, all competencies and their associated assessment criteria must be assessed and successfully achieved when in a core practice placement before the student progresses to the next level of the programme. On completion of assessment, the student is deemed to have either passed or failed the competence/competencies.

Where competence/competencies have not been achieved, the student will be given an opportunity to repeat the entire practice placement and assessment. Following an opportunity to repeat, if the student fails the assessment, the student may be asked to exit the Midwife Registration programme. Regulations in relation to repeat attempts will be agreed and managed as per the Academic Regulations and Procedures of the relevant HEI.

#### **Guidance on the Assessment of Competence Process**

Successful completion of the MCAT facilitates student's progression from one year to the next, to culminate in competence in midwifery practice on completion of the 18-month Post-Registration Midwifery Programme.

It is the responsibility of the student to ensure that the MCAT document is: (i) available on practice placement, (ii) completed accurately and (iii) submitted as per HEI guidelines on the prescribed submission date. It must be presented on request to the Preceptor/Co-preceptor, members of the Midwifery Practice Development team and to the relevant HEI personnel. While the MCAT was developed and published by the NMBI, in conjunction with relevant stakeholders, the governance of the process involved in assessment of student competence remains with the respective HEI.

Prior to the start of the practice placement the student should review their learning needs, incorporating any earlier experience of the clinical settings and identify specific learning outcomes for the practice placement. In addition, the student should review the learning opportunities specific to the practice placement setting. If it is the student's first practice placement the student is advised to discuss learning outcomes with the Clinical Coordinator in Midwifery, practice placement module leader or link Lecturer.

The student is orientated to the placement on **day one** of the practice placement, ideally by their allocated Preceptor/Co-preceptor. Where this is not possible, a named midwife should be allocated to work with the student and details of Preceptor/Co-preceptor provided to the student and recorded on the duty roster.

#### **Initial interview**

An initial interview takes place, as early as possible, during **week one** and is facilitated by the Preceptor/Co-preceptor. These Preceptors are midwives who have completed a teaching and assessment course that enables them to support, guide and assess midwifery students in the practice placement. The degree of supervision expected, as prescribed by the Midwife Registration Programme Standards and Requirements (NMBI 2016) is discussed, which for this practice placement, is **Indirect Supervision**.

- The student and Preceptor/Co-preceptor discuss the competencies, assessment criteria and associated skills, which the student is expected to achieve on completion of the practice placement.
- The importance of feedback is discussed and encouraged throughout the placement.
- Dates for the intermediate and final interviews are agreed and recorded at the initial interview.

#### Intermediate interview

At the intermediate interview, the student's progress to date is reviewed and recorded. Guidance and feedback is provided and documented for future learning and competence attainment. The follow up/feedback page should be used throughout the practice placement to:

- Support the student to achieve the level of competence required for the level of the Midwife Registration programme.
- Facilitate communication between the Preceptor/Co-preceptor and any other supervising midwives where continuity of Preceptor/Co-preceptor is not possible.
- Identify and document renegotiated learning outcomes.

#### **Final interview**

At the final interview, the student and Preceptor/Co-preceptor review the competencies, the assessment criteria and associated skills that the student is expected to achieve on completion of the practice placement.

- The student is deemed to have passed or failed in the assessment of competence.
- Feedback is provided by the Preceptor/Co-preceptor and student, and documentation is completed.
- This should be accompanied by written comments by the student and the Preceptor/Co-preceptor on the overall process and result of the assessment of competence to guide future learning needs.

#### Assessment of the student includes:

- Observation of relevant knowledge, skills and professional behaviours in the provision of care
- Demonstration by the student through participation in the provision of care
- Exploration of rationale for care with the student
- Discussion with other midwives who have supervised and supported the student in practice
- Demonstration by the student in a simulated situation, where demonstration in practice is not possible
- Reference to comments on follow up/feedback sheet and to learning plans if used during the placement
- Review of student's attendance during practice placement

#### **Procedure where there are Concerns in Relation to a Student's Progress**

Where there are concerns in relation to the student's progress, the Preceptor/Co-preceptor, in consultation with the student, should liaise with the Clinical Coordinator in Midwifery, and a learning plan must be put in place to support the student to successfully complete the relevant competence/competencies over the remaining time of the practice placement. Personal Tutor should be informed and may provide advice and support regarding the learning plan.

### The *learning plan* must be:

- Completed in the MCAT and referred to over the course of the remaining practice placement.
- Explicit in detailing what the student must do to successfully complete the assessment of competence.
- Communicated to the Personal Tutor supporting the practice placement area as appropriate.

### Procedure when a student is unsuccessful in attaining competence

The Preceptor/Co-preceptor documents the reason(s) for a failed assessment of competence and completes a **final learning plan** in consultation with the student, the Clinical Co-ordinator and the Personal Tutor.

The written final learning plan must:

- Provide specific guidance to both the student and Preceptor/Co-preceptor on what is required to successfully complete the assessment of competence on the second attempt.
- The written action plan must reinforce the student's understanding of the reason for failing and be explicit in the event of a new Preceptor/Co-preceptor completing the repeat assessment.

If a student is unsuccessful in any element of the assessment of competence, the student will have a **minimum of 4 weeks** (for placements less than 4 weeks duration the repeat attempt will be the same duration as the original placement, see appendices for UCD protocols on this) practice placement to repeat the complete assessment. Procedures specific to each HEI in relation to a failed assessment of competence such as informing the relevant personnel in the HEI and arrangement of practice placement to facilitate reassessment will be provided locally by the HEI and must be adhered to (see appendix).

### The Role and Responsibilities of the Midwifery Student

- The student is responsible for completion and submission of the completed MCAT to the HEI on the pre-arranged submission dates and at the end of the Midwife Registration programme.
- The student must be familiar with their individual role and responsibilities and with the processes and procedures associated with the assessment of competence and the documenting of these in the MCAT.
- If there are any operational difficulties in arranging working with a named Preceptor/Co-preceptor or organising practice placement assessment, the student must consult with the Clinical Midwifery Manager (CMM2) or deputy. If the difficulty cannot be resolved, the student should then contact the Clinical Co-ordinator in Midwifery.

## The Role and Responsibilities of the Preceptor/Co-preceptor

- The Preceptor/Co-preceptor must be a Registered Midwife on the Register of Midwives maintained by the NMBI and have completed a teaching and assessment programme.
- The Preceptor/Co-preceptor acts as a gatekeeper to the profession, ensuring professional standards within midwifery are maintained.
- The Preceptor/Co-preceptor acts as a role model demonstrating evidence-based midwifery care and assists the student to develop the inter-personal, technical, reflective and analytical skills that underpin midwifery care.
- The Preceptor/Co-preceptor actively involves and supervises the student in the assessment, planning, implementation and evaluation of midwifery care.
- The Preceptor/Co-preceptor must be familiar with their individual role and responsibilities, and with the processes and procedures associated with the assessment of student competence and the completion of competence assessment documentation in the MCAT.

- The Preceptor/Co-preceptor will facilitate the student in arranging the initial, intermediate and final interviews and use these interviews to:
  - Review and discuss learning outcomes specific to the clinical area.
  - Identify and mutually agree the learning opportunities and learning resources that will facilitate the achievements of learning outcomes.
  - Assess learning needs in consultation with the student.
  - Identify competencies to be achieved, including assessment criteria and associated skills.
  - Provide ongoing constructive feedback identifying student strengths and weaknesses.
  - Complete the competence assessment documentation.
- If a student is unsuccessful in achieving competence the Preceptor/Co-preceptor and the student will complete an action plan.
- If a student has been absent in a placement where he/she is being assessed, the Preceptor/Co-preceptor may decide not to allow the assessment to proceed. Consultation in relation to this decision will take place with the Clinical Co-ordinator and the Personal Tutor.
- If at any stage, the Preceptor/Co-preceptor, in consultation with the Clinical Co-ordinator, has concerns about a student achieving their learning outcomes and competencies, the Preceptor/Co-preceptor may contact the Personal Tutor to discuss the issues. The student must be informed that this communication is being arranged. The Personal Tutor will provide guidance and support as appropriate.

# **ANTENATAL**

Name of Practice Placement - Unit/Ward:
Number of weeks in this Practice Placement:
Placement Dates:
Name of Brosonton
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Co-ordinator:

In each practice placement all competencies and their associated assessment criteria must be assessed and passed successfully before the student can progress. On completion of the practice placement, the student is deemed to have either passed or failed the competence/competencies.

## **Principle 1: Respect for the Dignity of the Person**

Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor D	Date & Sign
		Pass	Fail
1.1 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event and a profound event in a woman's life.	<ul> <li>Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event.</li> <li>Demonstrates ability to provide the necessary support, care and advice to women in the promotion of normal birth.</li> <li>Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same.</li> </ul>		
<b>1.2</b> Demonstrates the ability to advocate on behalf of women and their babies to ensure their rights and interests are protected including the woman's right to choose how and where to give birth.	Advocates on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth.		
<b>1.3</b> Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the woman and her family.	Provides care for women consistent with their cultural and religious beliefs and preferences where appropriate.		
<b>1.4</b> Demonstrates the ability to provide sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.	Provides evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.		

## **Principle 1: Respect for the Dignity of the Person**

Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>1.5</b> Demonstrates the ability to support women to engage with maternity care.	Educates women on the importance of being actively engaged in their own maternity care.		
<b>1.6</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	<ul> <li>Respects the role of women as partners in their care and contributions they can make to it.</li> <li>Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>		

#### **Principle 2: Professional Responsibility and Accountability**

Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>2.1</b> Demonstrates the ability to act at all times within the law and follows the rules and regulations of the NMBI and other applicable bodies.	<ul> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021) and the Practice Standards for Midwives (NMBI 2022).</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	Demonstrates acceptance of accountability for own professional practice.		
<b>2.3</b> Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	Evaluates own abilities and level of professional competence and acts accordingly.		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk.		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	Identifies an emergency and is capable of alerting the appropriate healthcare professionals – may be simulated practice.		

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.1</b> Demonstrates the ability to provide safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman.	<ul> <li>Provides safe, competent, kind, compassionate and respectful professional care.</li> <li>Supports women to make informed choices with the multidisciplinary team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess, plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or the postnatal period.	Participates with the midwife in assessing, planning, implementing and evaluating care using clinical observation, history taking and assessment in a timely manner.		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/ or other healthcare professional during a woman's pregnancy, labour and birth or the postnatal period	<ul> <li>Participates in caring for women with complex care needs.</li> <li>Recognises deviations from normal, the significance of the findings, and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates ability to recognise factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the woman and/or baby and acts appropriately to escalate the level of care.	<ul> <li>Recognises factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.</li> </ul>		

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.5</b> Demonstrates ability to recognise and respond in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and/or her baby.	<ul> <li>Recognises and responds in a timely and appropriate manner to emergencies affecting the health and/or safety of a woman and her baby.</li> </ul>		
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multi-disciplinary team in an emergency situation (real or simulated).	Acts effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).		
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting, promoting and supporting breastfeeding.	<ul> <li>Supports and educates women in infant feeding practices include protecting, promoting and supporting breastfeeding.</li> <li>Recognises challenges and complications that may be associated with infant feeding and can develop an individualised care plan in partnership with the woman.</li> </ul>		

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sigr	
		Pass	Fail
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul> <li>Uses standard universal infection prevention and control measures.</li> <li>Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with NMBI medication management guidance.	<ul> <li>Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately.</li> <li>Explains the importance of monitoring the actions and side-effects of the medication administrated.</li> <li>Has knowledge of medication legislation and NMBI guidance on medication management.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul> <li>Critically reflects on own practice and demonstrates learning from previous experience.</li> <li>Can identify future learning needs.</li> </ul>		
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul> <li>Identifies and discusses with the midwife how clinical guidelines/policies influence and guide midwifery practice.</li> </ul>		

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul> <li>Prioritises, plans and provides care to a caseload of women and their babies in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes into their own practice.	<ul> <li>Participates in clinical risk assessment and reporting of adverse clinical incidents.</li> <li>Can discuss the importance of clinical risk management in the safe care of women and their babies.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	Demonstrates the ability to participate in audits of clinical care in practice.		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	Supports and teaches other student midwife colleagues appropriately.		

## **Principle 4: Trust and Confidentiality**

Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality

•		Preceptor	Date & Sign
LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Pass	Fail
<b>4.1</b> Demonstrates ability to ensure that the woman and baby are the primary focus of practice.	<ul> <li>Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner.</li> <li>Includes the woman in plan of care and decision making by using appropriate language.</li> <li>Obtains informed consent when providing midwifery care.</li> </ul>		
<b>4.2</b> Demonstrates the ability to provide care that is safe, evidence based, supportive, responsive and compassionate taking into account the needs of the woman, her baby and her family.	Provides midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family.		
<b>4.3</b> Demonstrates the ability to respect the woman's right to privacy and confidentiality.	Maintains women's privacy and confidentiality in accordance with legislation and professional guidance.		
<b>4.4</b> Demonstrates ability to recognise and articulate the exceptional circumstances where it may be legally and ethically acceptable to share confidential information gained from a woman.	Demonstrates professional judgement and responsibility when sharing the woman's information and only discloses the minimal amount necessary to the appropriate person(s).		

# Principle 5: Collaboration with Others

Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team

		Preceptor Date & Sign	
LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Pass	Fail
<b>5.1</b> Demonstrates the ability to provide information in a format that is understandable and accessible to all women and their families.	<ul> <li>Provides information that is clear and accurate, at a level which women and their families can understand.</li> </ul>		
<b>5.2</b> Demonstrates the ability to communicate appropriately and effectively with women, their families and with the multidisciplinary healthcare team.	<ul> <li>Communicates clearly and consistently with women, their families and members of the multidisciplinary healthcare team using professional language.</li> <li>Actively participates in clinical handover and is able to explain the rationale for the care provided.</li> </ul>		
<b>5.3</b> Demonstrates the ability to recognise and take appropriate actions to challenge and reduce barriers to effective communication with women, their families and with the multidisciplinary healthcare team.	<ul> <li>Recognises facilitators and barriers to effective communication.</li> <li>Recognises the need for the assistance of a professional interpreter where appropriate.</li> </ul>		
<b>5.4</b> Demonstrates the ability to collaborate with women, the women's families and multidisciplinary healthcare team using appropriate communication tools as determined by the needs of the woman and/or her baby to ensure timely referral to the appropriate healthcare professional.	<ul> <li>Works effectively with midwives and other healthcare professionals to build professional caring relationships.</li> <li>Uses appropriate communication tools.</li> <li>Recognises deviations from the normal and reports promptly to the appropriate healthcare professional.</li> </ul>		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor	Date & Sign
		Pass	Fail
<b>5.5</b> Demonstrates the ability to record clinical practice in a manner which is clear, objective, accurate, and timely.	<ul> <li>Documents care in a clear, concise and accurate manner in healthcare records in line with best practice.</li> <li>Can discuss the importance of timely record keeping.</li> </ul>		
<b>5.6</b> Demonstrates the ability to address differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and prevents conflict through effective collaboration and teamwork.	<ul> <li>Participates in discussions with other members of multidisciplinary healthcare team.</li> <li>Acts in a way that demonstrates respect for the professional opinions of others.</li> </ul>		

# 'INDIRECT SUPERVISION' PLACEMENT: ASSESSMENT OF ESSENTIAL <u>ANTENATAL</u> SKILLS & KNOWLEDGE ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student Self -assessment	Midwife
Check all emergency equipment within the clinical area and demonstrate how to activate the emergency response system and where to locate emergency equipment	Date & Sign	Date & Sign
Assess women's history on admission to the antenatal ward, identifying, reporting and documenting important elements that may impact on their plan of care		
Assess women on admission to the antenatal ward, attending to their comfort, wellbeing and information needs:  • Conduct full physical examinations of pregnant women  • Assess, document and report baseline vital signs (iMEWS) on admission and during each subsequent care episode, when necessary and if appropriate, including intake and output  • Review and interpret laboratory reports  • Discreetly screen for domestic abuse as part of social history assessment		
Assess fetal well-being on admission and throughout subsequent care:  • Performs abdominal palpation, monitoring for fetal growth and wellbeing  • Auscultate the fetal heartbeat using a pinard stethoscope and doptone, recognising reassuring and abnormal fetal heart rate patterns  • If the membranes have ruptured, make appropriate assessment of the liquor  • Assess fetal movement pattern appropriately  • Identify indications for antenatal cardiotocography (CTG)		
Correctly applies the CTG machine and interprets the CTG with the midwife using a systematic approach:  • Can recognise and report suspicious or pathological fetal heart rate patterns, and initiate appropriate action with the midwife		

# 'INDIRECT SUPERVISION' PLACEMENT: ASSESSMENT OF ESSENTIAL <u>ANTENATAL</u> SKILLS & KNOWLEDGE ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student	Midwife
	Self -assessment Date & Sign	Date & Sign
Actively participates in the interpretation of obstetric ultrasounds and can discuss the impact of findings on the plan of care		•
Actively participates in the care of women with complex pregnancies, including timely reporting of any significant changes in maternal and/or fetal condition		
Actively participates in the care and management of a women having induction of labour		
Identifies the onset of labour of women in the antenatal ward:  • Can assess uterine contractions in terms of frequency, strength and duration		
Actively participates in the care and management of women who require an elective/emergency caesarean section and actively participates in providing a comprehensive handover to theatre staff		
Actively participates in the provision of care to women and their families who are experiencing bereavement		
Under supervision, prepare, calculate and safely administer oral medication		
Under supervision, prepare, calculate and safely administer subcutaneous injection medication		
Under supervision, prepare, calculate and safely administer intramuscular injection medication		
Actively participates under supervision in the preparation of an intravenous fluid infusions		

# 'INDIRECT SUPERVISION' PLACEMENT: ASSESSMENT OF ESSENTIAL <u>ANTENATAL</u> SKILLS & KNOWLEDGE ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student Self -assessment	Midwife
	Date & Sign	Date & Sign
Actively participates under supervision in the preparation and calculation of additives for an intravenous infusion		
Perform venepuncture safely and effectively		
Actively participates in performing adult peripheral intravenous cannulation (after completion of cannulation education programme in UCD)		
Identify indication for Anti-D administration and actively participates in the checking, monitoring and recording of Anti-D (and other blood products) safely and effectively, with strict adherence and attention to local and national guidelines		

## **INITIAL INTERVIEW**

Orientated to the clinical area Yes No		
Review and discussion of Principles, Assessment Criteria and	Essential Skills: Student:	Preceptor:
Learning needs identified by the midwifery student (refer to	practice placement learning outcomes):	
Specific opportunities identified by the Preceptor/Co-precept	or that are available during this practice placement:	
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Data ant fau interna dieta interniano		<u> </u>
Date set for intermediate interview:	Clinical Co-ordinator Present if applicable: Yes	No 🗀
	Signature of Clinical Co-ordinator:	Date:
Comments (where appropriate):		Date:
Signature:		

# **INTERMEDIATE INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:		
Preceptor/Co-preceptor review of students' progress to date:		
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Student progressing satisfactorily: Yes No	Clinical Co-ordinator Present if applicable: Yes	No 🗆
If <b>No</b> please complete Intermediate Learning plan	Signature of Clinical Co-ordinator:	Date:
Date of Final interview:		
Comments (where appropriate):		Date:
Signature:		

#### INTERMEDIATE LEARNING PLAN

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the first interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When a HDM student is having significant difficulties in meeting competencies during a practice placement

Date:	Placement Area:	Unit:
Please document the individual Principles,	associated Assessment Criteria and any Essential Skills tha	I It the student is having difficulty achieving
Principles	Associated Assessment Criteria	Essential Skills
Action/Supports Needed		
Action/Supports Needed		
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	Date/Time:
		Buce, Time.
Signature of Clinical Co-ordinator (where	Signature of Personal Tutor (where applicable):	
applicable):		

# **INTERMEDIATE LEARNING PLAN - continued**

The student must document below which learning need(s) are outstanding and with the Preceptor/ Co-Preceptor specify new learning need(s) and the supports and actions required to address these.
need(s) and the supports and actions required to address these.

## FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry

Signature:	Print Name:	Date:	
Signature:	Print Name:	Date:	
Signature:	Print Name:	Date:	

# FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry.

nature:	Print Name:	Date:	

Signature: Print Name: Date:

# RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

### **RECORD OF ADDITIONAL CLINICAL SKILLS**

This is an opportunity for the student midwife to record additional clinical skills that they have practised under the supervision of their Preceptor/Co-Preceptor/Registered Midwife

Date	Clinical Skill	Signature of Preceptor/Midwife

### RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

Please give details of any teaching or discussion sessions attended whilst on practice placement.

Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	

### RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

Please give details of any teaching or discussion sessions attended whilst on practice placement.

Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	

### **FINAL INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:		
Preceptor/Co-preceptor review:		
All Principles and Assessment Criteria achieved:	All Ecceptial Ckills List completed.	Date:
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
Pass Fail	Yes No	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
	Assessment Criteria and Essential Skills for this placemen	
Preceptor/Co-Preceptor will document in detail each Pr	inciple, Assessment Criteria and Essential Skills <b>not</b> attain	ned. The
competencies during a practice placement".	tocol "When a HDM student is having significant difficultie	s in meeting
temperature daring a practice practical t		

### **FINAL INTERVIEW CONTINUED**

The Preceptor/Co-Preceptor must document in detail each Principle, Assessment Criteria and Essential Skills that were <b>not</b> attained.

### **LABOUR AND BIRTH**

#### **Principle 1: Respect for the Dignity of the Person** Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values LEVEL: INDIRECT SUPERVISION **Assessment Criteria** Preceptor Date & Sign Fail **Pass 1.1** Demonstrates ability to promote and protect Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal pregnancy and childbirth as a healthy and physiological event and a profound event in a normal physiological event. woman's life. • Demonstrates ability to provide the necessary support, care and advice to women in the promotion of normal birth. • Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same. 1.2 Demonstrates the ability to advocate on Advocates on behalf of women and their babies behalf of women and their babies to ensure their to ensure their rights and interests are rights and interests are protected including the protected, including the women's right to woman's right to choose how and where to give choose how and where to give birth. birth. **1.3** Demonstrates the ability to respect the Provides care for women consistent with their diversity of beliefs, values, choices and priorities cultural and religious beliefs and preferences of the woman and her family. where appropriate. Provides evidence-based information to the **1.4** Demonstrates the ability to provide sufficient evidence-based information to the woman to woman to empower her to make informed empower her to make informed decisions about decisions about her care and that of her baby. her care and that of her baby.

LEVEL: INDIRECT SUPERVISION	eriences, choices, priorities, beliefs and values Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>1.5</b> Demonstrates the ability to support women to engage with maternity care.	Educates women on the importance of being actively engaged in their own maternity care.		
<b>1.6</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all natters regarding her own healthcare and that of her baby.	<ul> <li>Respects the role of women as partners in their care and contributions they can make to it.</li> <li>Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>		

#### **Principle 2: Professional Responsibility and Accountability**

Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>2.1</b> Demonstrates the ability to act at all times within the law and follows the rules and regulations of the NMBI and other applicable bodies.	<ul> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021) and the Practice Standards for Midwives (NMBI 2022).</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	Demonstrates acceptance of accountability for own professional practice.		
<b>2.3</b> Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	Evaluates own abilities and level of professional competence and acts accordingly.		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk.		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	Identifies an emergency and is capable of alerting the appropriate healthcare professionals – may be simulated practice.		

### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

LEVEL: INDIRECT SUPERVISION	<b>Assessment Criteria</b>	Preceptor Date & Sign	
		Pass	Fail
<b>3.1</b> Demonstrates the ability to provide safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman.	<ul> <li>Provides safe, competent, kind, compassionate and respectful professional care.</li> <li>Supports women to make informed choices with the multidisciplinary team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess, plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or the postnatal period.	Participates with the midwife in assessing, planning, implementing and evaluating care using clinical observation, history taking and assessment.		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/ or other healthcare professional during a woman's pregnancy, labour and birth or the postnatal period	<ul> <li>Participates in caring for women with complex care needs.</li> <li>Recognises deviations from normal, the significance of the findings, and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates ability to recognise factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the woman and/or baby and acts appropriately to escalate the level of care.	<ul> <li>Recognises factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.</li> </ul>		
<b>3.5</b> Demonstrates ability to recognise and respond in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and/ or her baby.	Recognises and responds in a timely and appropriate manner to emergencies affecting the health and/or safety of a woman and her baby.		

### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multi-disciplinary team in an emergency situation (real or simulated).	<ul> <li>Acts effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).</li> </ul>		
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting, promoting and supporting breastfeeding.	<ul> <li>Supports and educates women in infant feeding practices include protecting, promoting and supporting breastfeeding.</li> <li>Recognises challenges and complications that may be associated with infant feeding and can develop an individualised care plan in partnership with the woman.</li> </ul>		
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul> <li>Uses standard universal infection prevention and control measures.</li> <li>Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with NMBI medication management guidance.	<ul> <li>Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately.</li> <li>Explains the importance of monitoring the actions and side-effects of the medication administrated.</li> <li>Has knowledge of medication legislation and NMBI guidance on medication management.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul> <li>Critically reflects on own practice and demonstrates learning from previous experience.</li> <li>Can identify future learning needs.</li> </ul>		

#### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

under taking relevant continuing professional development			
LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul> <li>Identifies and discusses with the midwife how clinical guidelines/policies influence and guide midwifery practice.</li> </ul>		
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul> <li>Prioritises, plans and provides care to a caseload of women and their babies in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes into their own practice.	<ul> <li>Participates in clinical risk assessment and reporting of adverse clinical incidents.</li> <li>Can discuss the importance of clinical risk management in the safe care of women and their babies.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	<ul> <li>Demonstrates the ability to participate in audits of clinical care in practice.</li> </ul>		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	Supports and teaches other student midwife colleagues appropriately.		

### **Principle 4: Trust and Confidentiality**

Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality

		Preceptor Date & Sign	
LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Pass	Fail
<b>4.1</b> Demonstrates ability to ensure that the woman and baby are the primary focus of practice.	<ul> <li>Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner.</li> <li>Includes the woman in plan of care and decision making by using appropriate language.</li> <li>Obtains informed consent when providing midwifery care.</li> </ul>		
<b>4.2</b> Demonstrates the ability to provide care that is safe, evidence based, supportive, responsive and compassionate taking into account the needs of the woman, her baby and her family.	Provides midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family.		
<b>4.3</b> Demonstrates the ability to respect the woman's right to privacy and confidentiality.	Maintains women's privacy and confidentiality in accordance with legislation and professional guidance.		
<b>4.4</b> Demonstrates ability to recognise and articulate the exceptional circumstances where it may be legally and ethically acceptable to share confidential information gained from a woman.	Demonstrates professional judgement and responsibility when sharing the woman's information and only discloses the minimal amount necessary to the appropriate person(s).		

#### **Principle 5: Collaboration with Others** Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team LEVEL: INDIRECT SUPERVISION **Assessment Criteria** Preceptor Date & Sign Fail Pass **5.1** Demonstrates the ability to provide information Provides information that is clear and in a format that is understandable and accessible to accurate, at a level which women and their all women and their families. families can understand. **5.2** Demonstrates the ability to communicate Communicates clearly and consistently with women, their families and members of the appropriately and effectively with women, their families and with the multidisciplinary healthcare multidisciplinary healthcare team using professional language. team. Actively participates in clinical handover and is able to explain the rationale for the care provided. **5.3** Demonstrates the ability to recognise and take Recognises facilitators and barriers to effective appropriate actions to challenge and reduce barriers communication. to effective communication with women, their Recognises the need for the assistance of a families and with the multidisciplinary healthcare professional interpreter where appropriate. team. **5.4** Demonstrates the ability to collaborate with Works effectively with midwives and other women, the women's families and multidisciplinary healthcare professionals to build professional healthcare team using appropriate communication caring relationships. tools as determined by the needs of the woman • Uses appropriate communication tools. Recognises deviations from the normal and and/or her baby to ensure timely referral to the appropriate healthcare professional. reports promptly to the appropriate healthcare professional.

### **Principle 5: Collaboration with Others**

Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>5.5</b> Demonstrates the ability to record clinical practice in a manner which is clear, objective, accurate, and timely.	<ul> <li>Documents care in a clear, concise and accurate manner in healthcare records in line with best practice.</li> <li>Can discuss the importance of timely record keeping.</li> </ul>		
<b>5.6</b> Demonstrates the ability to address differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and prevents conflict through effective collaboration and teamwork.	<ul> <li>Participates in discussions with other members of multidisciplinary healthcare team.</li> <li>Acts in a way that demonstrates respect for the professional opinions of others.</li> </ul>		

ESSENTIAL SKILLS	Student Self - assessment	Midwife  Date & Sign
Check all emergency equipment within the clinical area and demonstrate how to activate the emergency response system and where to locate emergency equipment	Date & Sign	
Assess women on admission to the labour ward, identifying, reporting and documenting important elements that may impact on the plan of care:  • Takes an accurate history on admission  • Review and interpret laboratory reports  • Actively participates in the interpretation of obstetric ultrasounds and can discuss the impact of findings on the plan of care with the midwife  • Performs physical examinations, including vital signs and urinalysis, on admission and throughout labour and can interpret, identify deviations from normal and escalate care as appropriate		
Identify the onset of labour and signs and symptoms associated with labour		
<ul> <li>Assess fetal well-being on admission:         <ul> <li>Performs abdominal palpation to determine symphysis-fundal height measurement, fetal lie, attitude, presentation, degree of engagement and position</li> <li>Assess uterine contractions in terms of frequency, strength and duration</li> <li>Auscultate the fetal heartbeat using a pinard stethoscope and doptone immediately after a contraction, recognising reassuring and abnormal heart rate patterns</li> <li>If the membranes have ruptured, make appropriate assessment of the liquor</li> <li>Assess fetal movement pattern appropriately</li> <li>Identify indications for intrapartum cardiotocography (CTG)</li> </ul> </li> </ul>		
Correctly applies CTG machine and interprets CTG with the midwife using a systematic approach:  • Can recognise and report suspicious or pathological fetal heart rate patterns, and can initiate appropriate action with the midwife		

ESSENTIAL SKILLS	Student	Midwife
	Self - assessment Date & Sign	Date & Sign
Identify indications and contraindications for use of fetal scalp electrode (FSE) and actively participates in applying an FSE where indicated		
Identify indications and rationale for fetal blood sampling in labour:  • Actively participates in preparing for and assisting with fetal blood sampling  • Actively participates in interpreting the results and planning subsequent management		
Identify indications and contraindications for vaginal examination:  • Performs vaginal examinations with informed consent and actively participates in interpreting, reporting and documenting the findings		
Identify indications and contraindications for artificial rupture of membranes:  • Actively participates in performing amniotomy		
Assess liquor volume, colour and odour throughout labour, reporting any deviations from the norm and initiates appropriate referral and management plan with the midwife		
Performs urinary catheterisation where appropriate		
Identify the indications and contraindications for the administration of intravenous oxytocin to induce or augment labour:  • Actively participates in the care of women requiring an oxytocin infusion, adhering to protocols regarding the dose and titration, assessing uterine contractions, resting tone and assessment of fetal well-being		
Provide care and advice for women who choose non-pharmacological comfort measures in labour:  • Supports women who choose hydrotherapy, hypnobirthing, labour hopscotch, use of mobility aids such as birthing balls, stools and mats etc.		

ESSENTIAL SKILLS	Student Self -	Midwife
	assessment Date & Sign	Date & Sign
Provide care for women who choose inhalation, intramuscular and/or epidural analgesia pain relief in labour adhering to:  • NMBI and HIQA Guidance on Medication Management and Administration • Student midwives' Scope of Practice • Local policies and guidelines		
Assess progress during the first and second stage of labour using:  Observation, such as maternal behaviour, expulsive uterine contractions Abdominal examination to assess descent of the presenting part Vaginal examination as appropriate, determining station and position		
Prepares the appropriate environment for birth:  • Birthing room  • Birthing Trolley  • Emergency equipment (including Neonatal Resuscitaire)		
Assist women in birthing their baby by providing emotional and physical support as appropriate and uses appropriate techniques to minimise perineal trauma		
Identify the indications and contraindications for selective use of episiotomy:  • Actively participates in infiltrating the perineum with local anaesthetic  • Actively participates in performing episiotomy where indicated		
Identify indications/contraindications for instrumental birth (ventouse/forceps):  • Actively participates in preparing for instrumental birth  • Actively participates in providing midwifery care for women requiring instrumental birth		
Actively participates in the preparation of women for transfer to theatre for emergency caesarean section and actively participates in comprehensive handover to theatre staff.		

ESSENTIAL SKILLS	Student Self - assessment Date & Sign	Midwife  Date & Sign
Actively participates in the care of women with complex pregnancies, including timely reporting of any significant changes in maternal and/or fetal condition		
<ul> <li>Facilitate safe expulsion of the placenta and membranes in the third stage of labour:</li> <li>Physiological management of the third stage (if not seen can discuss)</li> <li>Active Management of the third stage</li> <li>Examines the placenta and membranes and dispose of the placenta appropriately</li> <li>Reserves umbilical cord blood to assess blood group and rhesus status where indicated</li> <li>Reserves paired cord pH samples where indicated</li> </ul>		
<ul> <li>Perineal Trauma:         <ul> <li>Actively participates in classifying the degree of perineal trauma and identifying the structures affected</li> <li>Identify indications for repair of perineal trauma and appropriate technique that should be used</li> <li>Actively participates in perineal repair</li> </ul> </li> </ul>		
Actively participates in the provision of sensitive and compassionate physical and emotional care of women and her family who are experiencing pregnancy loss		
<ul> <li>Provide immediate care to the newborn following birth:</li> <li>Assesses transition to extrauterine life by assessing respiratory effort, colour, tone, response to stimuli and can auscultation the neonatal heart rate using stethoscope</li> <li>Assesses and records APGAR score</li> <li>Initiate initial steps of neonatal resuscitation if indicated (or can discuss)</li> <li>Promotes thermoregulation of the infant</li> <li>Supports women/partners to have skin to skin contact with their baby in a safe and unhurried environment</li> <li>Promotes breastfeeding and assists the mother to breastfeed her newborn as soon as possible following birth</li> <li>Applies infant identification bands and electronic security tag</li> </ul>		

ESSENTIAL SKILLS	Student Self - assessment	Midwife  Date & Sign
	Date & Sign	
Correctly performs the initial midwife examination of the newborn		
Under supervision, prepare and administer vitamin K to the newborn following the woman's informed consent		
Assess maternal and newborn well-being prior to transfer to the postnatal ward/or home		
Under supervision, prepare, and safely administer inhalation analgesia		
Under supervision, prepare, calculate and safely administer oral medications		
Under supervision, prepare, calculate and safely administer PR medications		
Under supervision, prepare, calculate and safely administer intramuscular medications		
Actively participates in the preparation of intravenous fluid infusions		
Actively participates under supervision in the preparation and calculation of additives for intravenous infusions		
Perform venepuncture safely and effectively		
Actively participates in performing adult peripheral intravenous cannulation (after completion of cannulation education programme in UCD)		

### **INITIAL INTERVIEW**

Orientated to the clinical area Yes	No		
Review and discussion of Principles, Assessment Crite	ria and Essential Skills:	Student:	Preceptor:
Learning needs identified by the midwifery student (re	fer to practice placemer	t learning outcomes):	
Specific opportunities identified by the Preceptor/Co-p	receptor that are availab	le during this practice pla	cement:
Signature of Preceptor/Co-preceptor:	Signature of Student	Midwifor	Date:
Signature of Preceptor/Co-preceptor.	Signature of Student	Midwile.	Date.
Date set for intermediate interview:	Clinian Committee to a	D	
Bute Set for intermediate interview.	Clinical Co-ordinator	Present if applicable: Ye	s Ll No Ll
	Signature of Clinical (	Co-ordinator:	Date:
Comments (where appropriate):			Date:
Signature:			

### **INTERMEDIATE INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:		
Preceptor/Co-preceptor review of students' progress to date:		
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Signature of Fredeptor/Co-predeptor.	Signature of Student Midwire.	Date.
Ctudent progressing entires sterily Ves	Clinical Co. ordinator Procent if applicables Voc	No
Student progressing satisfactorily: Yes L No L	Clinical Co-ordinator Present if applicable: Yes	∐ No ∐
If <b>No</b> please complete Intermediate Learning plan	Signature of Clinical Co-ordinator:	Date:
Date of Final interview:		
Comments (where appropriate):		Date:
Signature:		

#### **INTERMEDIATE LEARNING PLAN**

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the first interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When a HDM student is having significant difficulties in meeting competencies during a practice placement

Date:	Placement Area:	Unit:
Please document the individual Principles,	associated Assessment Criteria and any Essential Skills tha	t the student is having difficulty achieving
Principles	Associated Assessment Criteria	Essential Skills
Action/Supports Needed		
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	Date/Time:
Signature of Freeeptor/eo Freeeptor.	Signature of Student Findwire.	Date, fille.
Signature of Clinical Co-ordinator (where	Signature of Personal Tutor (where applicable):	
applicable):		

### **INTERMEDIATE LEARNING PLAN**

The student must document below which learning need(s) are outstanding and with the Preceptor/ Co-Preceptor specify new learning need(s) and the supports and actions required to address these

### FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry

Signature:	Print Name:	Date:
Signature:	Print Name:	Date:
Signature:	Print Name:	Date:

### FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry

Signature:	Print Name:	Date:
Signature:	Print Name:	Date:
Signature:	Print Name:	Date:

# **RECORDS OF MEETINGS/ADDITIONAL FEEDBACK**This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

### **RECORD OF ADDITIONAL CLINICAL SKILLS**

This is an opportunity for the student midwife to record additional clinical skills that they have practised under the supervision of their Preceptor/Co-Preceptor/Registered Midwife

Date	Clinical Skill	Signature of Preceptor/Midwife

# **RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED**Please give details of any teaching, reflection or discussion sessions attended whilst on practice placement

Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	

### RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
	1
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Deflection/Discussion engine	Data
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	

### **FINAL INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:	•	
Preceptor/Co-preceptor review:		
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
Pass Fail	Yes No	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
Signature of Chilical Co-ordinator (where applicable).	Signature of Personal Putor (where applicable).	
	Assessment Criteria and Essential Skills for this placemen	
	inciple, Assessment Criteria and Essential Skills <b>not</b> attair tocol "When a HDM student is having significant difficultie	
competencies during a practice placement".		

### **FINAL INTERVIEW CONTINUED**

The Preceptor/Co-Preceptor must document in detail each Principle, Assessment Criteria and Essential Skills that were <b>not</b> attained.	

### **POSTNATAL**

Name of Practice Placement - Unit/Ward:
Number of weeks in this Practice Placement:
Placement Dates:
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Co-ordinator:

#### **Principle 1: Respect for the Dignity of the Person** Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values LEVEL: INDIRECT SUPERVISION Preceptor Date & Sign **Assessment Criteria** Fail **Pass 1.1** Demonstrates ability to promote and protect Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal pregnancy and childbirth as a healthy and physiological event and a profound event in a normal physiological event. Demonstrates ability to provide the necessary woman's life. support, care and advice to women in the promotion of normal birth. • Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same. **1.2** Demonstrates the ability to advocate on Advocates on behalf of women and their babies behalf of women and their babies to ensure their to ensure their rights and interests are rights and interests are protected including the protected, including the women's right to woman's right to choose how and where to give choose how and where to give birth. birth. **1.3** Demonstrates the ability to respect the Provides care for women consistent with their diversity of beliefs, values, choices and priorities cultural and religious beliefs and preferences of the woman and her family. where appropriate. Provides evidence-based information to the **1.4** Demonstrates the ability to provide sufficient evidence-based information to the woman to woman to empower her to make informed empower her to make informed decisions about decisions about her care and that of her baby. her care and that of her baby.

Principle 1: Respect for the Dignity of the Person  Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values				
LEVEL: INDIRECT SUPERVISION	Assessment Criteria		Preceptor Date & Sign	
		Pass	Fail	
<b>1.5</b> Demonstrates the ability to support women to engage with maternity care.	Educates women on the importance of being actively engaged in their own maternity care.			
<b>1.6</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	<ul> <li>Respects the role of women as partners in their care and contributions they can make to it.</li> <li>Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>			

#### **Principle 2: Professional Responsibility and Accountability**

Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>2.1</b> Demonstrates the ability to act at all times within the law and follows the rules and regulations of the NMBI and other applicable bodies.	<ul> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021) and the Practice Standards for Midwives (NMBI 2022).</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	Demonstrates acceptance of accountability for own professional practice.		
<b>2.3</b> Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	Evaluates own abilities and level of professional competence and acts accordingly.		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk.		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	Identifies an emergency and is capable of alerting the appropriate healthcare professionals – may be simulated practice.		

#### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.1</b> Demonstrates the ability to provide safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman.	<ul> <li>Provides safe, competent, kind, compassionate and respectful professional care.</li> <li>Supports women to make informed choices with the multidisciplinary team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess, plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or the postnatal period.	<ul> <li>Participates with the midwife in assessing, planning, implementing and evaluating care using clinical observation, history taking and assessment.</li> </ul>		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/ or other healthcare professional during a woman's pregnancy, labour and birth or the postnatal period.	<ul> <li>Participates in caring for women with complex care needs.</li> <li>Recognises deviations from normal, the significance of the findings, and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates ability to recognise factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the woman and/or baby and acts appropriately to escalate the level of care.	<ul> <li>Recognises factors during pregnancy, labour and birth or in the postnatal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.</li> </ul>		
<b>3.5</b> Demonstrates ability to recognise and respond in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and/or her baby.	<ul> <li>Recognises and responds in a timely and appropriate manner to emergencies affecting the health and/or safety of a woman and her baby.</li> </ul>		

#### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor	Date & Sign
		Pass	Fail
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multi-disciplinary team in an emergency situation (real or simulated).	<ul> <li>Acts effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).</li> </ul>		
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting, promoting and supporting breastfeeding.	<ul> <li>Supports and educates women in infant feeding practices include protecting, promoting and supporting breastfeeding.</li> <li>Recognises challenges and complications that may be associated with infant feeding and can develop an individualised care plan in partnership with the woman.</li> </ul>		
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul> <li>Uses standard universal infection prevention and control measures.</li> <li>Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with NMBI medication management guidance.	<ul> <li>Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately.</li> <li>Explains the importance of monitoring the actions and side-effects of the medication administrated.</li> <li>Has knowledge of medication legislation and NMBI guidance on medication management.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul> <li>Critically reflects on own practice and demonstrates learning from previous experience.</li> <li>Can identify future learning needs.</li> </ul>		

#### **Principle 3: Quality of Practice**

Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul> <li>Identifies and discusses with the midwife how clinical guidelines/policies influence and guide midwifery practice.</li> </ul>		
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul> <li>Prioritises, plans and provides care to a caseload of women and their babies in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes into their own practice.	<ul> <li>Participates in clinical risk assessment and reporting of adverse clinical incidents.</li> <li>Can discuss the importance of clinical risk management in the safe care of women and their babies.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	Demonstrates the ability to participate in audits of clinical care in practice.		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	Supports and teaches other student midwife colleagues appropriately.		

#### **Principle 4: Trust and Confidentiality** Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality Preceptor Date & Sign LEVEL: INDIRECT SUPERVISION **Assessment Criteria** Pass Fail **4.1** Demonstrates ability to ensure that the woman Demonstrates dignity, respect, compassion and baby are the primary focus of practice. and empathy for the woman and her family in a professional manner. • Includes the woman in plan of care and decision making by using appropriate language. • Obtains informed consent when providing midwifery care. **4.2** Demonstrates the ability to provide care that is Provides midwifery care that is sensitive, kind, compassionate, supportive and recognises the safe, evidence based, supportive, responsive and compassionate taking into account the needs of the diverse needs of the woman and her family. woman, her baby and her family. **4.3** Demonstrates the ability to respect the woman's Maintains women's privacy and confidentiality right to privacy and confidentiality. in accordance with legislation and professional quidance. **4.4** Demonstrates ability to recognise and articulate Demonstrates professional judgement and the exceptional circumstances where it may be responsibility when sharing the woman's legally and ethically acceptable to share confidential information and only discloses the minimal information gained from a woman. amount necessary to the appropriate person(s).

#### **Principle 5: Collaboration with Others** Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team LEVEL: INDIRECT SUPERVISION **Assessment Criteria** Preceptor Date & Sign Fail Pass **5.1** Demonstrates the ability to provide information Provides information that is clear and in a format that is understandable and accessible to accurate, at a level which women and their all women and their families. families can understand. **5.2** Demonstrates the ability to communicate Communicates clearly and consistently with women, their families and members of the appropriately and effectively with women, their families and with the multidisciplinary healthcare multidisciplinary healthcare team using professional language. team. · Actively participates in clinical handover and is able to explain the rationale for the care provided. **5.3** Demonstrates the ability to recognise and take Recognises facilitators and barriers to effective appropriate actions to challenge and reduce barriers communication. to effective communication with women, their • Recognises the need for the assistance of a families and with the multidisciplinary healthcare professional interpreter where appropriate. team. **5.4** Demonstrates the ability to collaborate with Works effectively with midwives and other women, the women's families and multidisciplinary healthcare professionals to build professional caring relationships. healthcare team using appropriate communication • Uses appropriate communication tools. tools as determined by the needs of the woman and/or her baby to ensure timely referral to the Recognises deviations from the normal and appropriate healthcare professional. reports promptly to the appropriate healthcare professional.

#### **Principle 5: Collaboration with Others** Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team **LEVEL: INDIRECT SUPERVISION Assessment Criteria** Preceptor Date & Sign Fail Pass **5.5** Demonstrates the ability to record clinical Documents care in a clear, concise and practice in a manner which is clear, objective, accurate manner in healthcare records in line accurate, and timely. with best practice. Can discuss the importance of timely record keeping. **5.6** Demonstrates the ability to address differences • Participates in discussions with other members of professional opinion with colleagues by discussion of multidisciplinary healthcare team. and informed debate in a professional and timely Acts in a way that demonstrates respect for manner and prevents conflict through effective the professional opinions of others. collaboration and teamwork.

# INDIRECT SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL <u>POSTNATAL</u> SKILLS & KNOWLEDGE ALL CLINICAL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student Self -assessment Date & Sign	Midwife  Date & Sign
Check all emergency equipment within the clinical area and can demonstrate how to activate the emergency response system and where to locate emergency equipment		-
Assess women's history on admission to the postnatal ward, identifying, reporting and documenting important elements that may impact on her plan of care		
Review laboratory reports with the midwife and plans appropriate care and management e.g. anaemia, rhesus negative, group B streptococcus		
<ul> <li>Performs the following when admitting women and their babies to the postnatal ward:</li> <li>Systematic physical examination and assessment of women, including IMEWS and pain assessment</li> <li>Systematic physical examination and assessment of the neonate</li> <li>Orientates women to the postnatal ward</li> </ul>		
Undertakes the daily physical postnatal examination and assessment of women and can recognise signs and symptoms that may require discussion, intervention or referral and acts accordingly		
<ul> <li>Undertake the assessment of maternal mental well-being, identifying normal patterns of emotional changes in the postnatal period:</li> <li>Provide women with the opportunity to talk about their birth experiences and to ask questions about the care they received during pregnancy and labour</li> </ul>		
Identify the indications for Anti-D administration and participate in the collection, checking, monitoring and recording of Anti-D safely and effectively (note that midwifery students are not permitted to administer Anti-D or any other blood products)		

# INDIRECT SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL <u>POSTNATAL</u> SKILLS & KNOWLEDGE ALL CLINICAL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ALL CLINICAL SKILLS MUST BE COMPLETED/SIGNED BY END OF TH		
ESSENTIAL SKILLS	Student	Midwife
	Self -assessment	
	Date & Sign	Date & Sign
Provide evidence-based information to women and their partners on:		-
Transition to parenthood and parenting skills		
The National Healthy Childhood Programme		
Maternal physical and emotional wellbeing		
Sexual health		
Family planning and contraception		
Breastfeeding supports in the community		
Community supports		
Actively participates in providing midwifery care to women who have had a complex		
pregnancy, labour and birth		
pregnancy, labour and birth		
Actively participates in providing care to women who develop postnatal complications		
e.g. postpartum haemorrhage, venous thromboembolism, sepsis etc.		
Identify the indications for blood transfusion and actively participates in the collection,		
checking, monitoring and recording of blood products (note that midwifery students		
are not permitted to administer blood products)		
Performs the daily examination of the newborn and evaluates the baby's adaptation to		
extrauterine life, health and wellbeing:		
Recognises symptoms that may require discussion, intervention or referral and acts		
appropriately		
appropriatery		
Advise parents on thermoregulation, bathing, clothing, sleeping positions, skin care,		
immunisations, normal infant development and social needs		
minimum sacions, normal infant acveropment and social needs		
Supports women to express breastmilk, identifying when hand expression and pump		
expression may be appropriate		
expression may be appropriate		

# INDIRECT SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL <u>POSTNATAL</u> SKILLS & KNOWLEDGE ALL CLINICAL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student Self -assessment	Midwife
Explain and discuss with women how to sterilise feeding equipment and make up a formula feed safely	Date & Sign	Date & Sign
Identifies indications for newborn screening and actively participates in:  • Post-ductal oxygen saturations  • Newborn bloodspot screening		
Identifies indications for newborn testing and actively participates in:  • Transcutaneous bilirubinometer  • Haemocue for blood glucose assessment		
Actively participates in advising parents on recognition of signs of newborn ill health requiring the immediate attention of a medical professional		
Identifies risk factors for neonatal complications, and monitors appropriately and can identify sign and symptoms of illness that may require discussion, intervention or referral and acts accordingly		
Provide compassionate and sensitive care to parents when newborn requires transfer to NICU/SCBU		
Under supervision, prepare, calculate and safely administer oral medication		
Under supervision, prepare, calculate and safely administer PR medication		
Under supervision, prepare, calculate and safely administer subcutaneous medication		
Actively participates in the preparation of an intravenous fluid infusion		
Actively participates under supervision in the preparation and calculation of additives for an intravenous infusion		

# **INITIAL INTERVIEW**

Orientated to the clinical area Yes	No	
Review and discussion of Principles, Assessment ( Preceptor:	Criteria and Essential Skills: Student:	
Learning needs identified by the midwifery studer	t (refer to practice placement learning outcomes	5):
Specific opportunities identified by the Preceptor/	Co-preceptor that are available during this pract	ice placement:
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Date set for intermediate interview:	Clinical Co-ordinator Present if applicable:	Yes  No
	Signature of Clinical Co-ordinator:	Date:
Comments (where appropriate):	1 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	Date:
Signature:		

## **INTERMEDIATE INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:		
Preceptor/Co-preceptor review of students' progress to date:		
Treceptor, co preceptor review or students progress to dute.		
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Student progressing satisfactorily: Yes No	Clinical Co-ordinator Present if applicable: Yes	No 🗆
If <b>No</b> please complete Intermediate Learning plan	Signature of Clinical Co-ordinator:	Date:
Date of Final interview:		
Comments (where appropriate):		Date:
Signature:		

#### **INTERMEDIATE LEARNING PLAN**

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the first interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When a HDM student is having significant difficulties in meeting competencies during a practice placement

Date:	Placement Area:	Unit:
Please document the individual Principles,	associated Assessment Criteria and any Essential Skills the	at the student is having difficulty achieving
Principles	Associated Assessment Criteria	Essential Skills
Action/Supports Needed		
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	Date/Time:
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	

# **INTERMEDIATE LEARNING PLAN**

The student must document below which learning need(s) are outstanding and with the Preceptor/ Co-Preceptor specify new learning need(s) and the supports and actions required to address these

# FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry

	- · · · ·	
Signature:	Print Name:	Date:
Signature:	Print Name:	Date:
Cianatura	Drint Name:	Date
Signature:	Print Name:	Date:

# FOLLOW UP/FEEDBACK

Feedback from other midwives, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry

Signature:	Print Name:	Date:
Signature:	Print Name:	Date:
Signature:	Print Name:	Date:

# **RECORDS OF MEETINGS/ADDITIONAL FEEDBACK**This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

## **RECORD OF ADDITIONAL CLINICAL SKILLS**

This is an opportunity for the student midwife to record additional clinical skills that they have practised under the supervision of their Preceptor/Co-Preceptor/Registered Midwife

Date	Clinical Skill	Signature of Preceptor/Midwife

# RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

Please give details of any teaching, reflection or discussion sessions attended whilst on practice placement

Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
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I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	

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Please give details of any teaching or discussion sessions attended whilst on practice placement

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I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
Signature of Student Midwife:	
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Signature of Student Midwife:	
Teaching/Reflection/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above Teaching/Reflection/Discussion session:	Date:
T committed that I have attended the above reaching/Reflection/Discussion session.	Date.
Signature of Student Midwife:	
	1

## **FINAL INTERVIEW**

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills

Student self-assessment of progress to date:		
Preceptor/Co-preceptor review:		
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
Pass Fail	Yes No	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
	Assessment Criteria and Essential Skills for this placemen	
	inciple, Assessment Criteria and Essential Skills <b>not</b> attain	
competencies during a practice placement".	tocol "When a HDM student is having significant difficulties	s in meeting
competences daring a practice placement i		

# **FINAL INTERVIEW CONTINUED**

The Preceptor/Co-Preceptor must document in detail each Principle, Assessment Criteria and Essential Skills that were <i>not</i> attained.

## MCAT SUMMARY SHEET - PROGRESS REVIEW

# To be completed by the Personal Tutor in the University

Full Student Name:		
Student College ID Number:		
Antenatal Module Code:	Intranatal Module Code:	Postnatal Module Code:
Pass Fail	Pass Fail	Pass Fail
Clinical Time complete:	Clinical Time complete:	Clinical Time complete:
Yes: No:	Yes: No:	Yes: No:
If <b>'No'</b> hours outstanding:	If <b>`No'</b> hours outstanding:	If <b>`No'</b> hours outstanding:
Clinical Record Book Reviewed:	Overall Clinical Time Complete:	Personal Tutor Print Name:
Yes No	Yes: No:	Personal Tutor Signature:
	If <b>'No'</b> hours outstanding:	Date:

## References

Nursing and Midwifery Board of Ireland (2015) *Scope of Nursing and Midwifery Practice Framework.* Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2020) *Guidance for Registered Nurses and Midwives on Medication Administration*, Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2021) *The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives.* Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2022) *Midwife Registration Programme Standards and Requirements* (5th ed.), Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2022) *Midwife Registration Education Post-RGN Programme Standards and Requirements*, Fifth Edition, Nursing and Midwifery Board of Ireland, Dublin.

Nursing and Midwifery Board of Ireland (2022) Practice Standards for Midwives. Nursing and Midwifery Board of Ireland, Dublin.

# **APPENDICES**



#### This protocol pertains to the following events:

- (a) When a HDM student is having significant difficulties in meeting standards during a practice placement;
- (b) When a HDM student is unsuccessful in her/his clinical assessment.

The School of Nursing, Midwifery and Health Systems along with our clinical partner, the National Maternity Hospital, is committed to supporting students as they prepare to become registered midwives. The background to the following protocol is the need to guide students who are requiring further support in meeting their MCAT requirements during practice placements. The specific needs of each student will be considered on an individual basis.

This protocol will be enacted when a student has significant difficulties in meeting standards during a practice placement and outlines the events that should follow when a student fails to meet the required standards and competencies in the final MCAT assessment. This protocol is implemented in the context of the programme derogation on progression which all students, preceptors, Clinical coordinator and personal tutors should be familiar with.

If a student finalises the completion of the MCAT document before the practice placement period is completed and if subsequently, a serious performance issue is identified during the remainder of the placement period, then the original successful MCAT outcome will be rescinded i.e., the pass grade will become a fail grade, and a repeat placement with a new MCAT will be required.

#### Description of Clinical Modules, Progression and Derogations.

There are five clinical practice placement modules integral to this programme-Clinical Practice A Direct Supervision (5 credits), Clinical Practice B Close Supervision (10 credits), Clinical Practice C Indirect Supervision (15 credits), Clinical Practice D Distant Supervision (15 credits) and Supportive and Specialist Clinical Practice (5 credits). Students must successfully complete Clinical Practice A, in order to progress to Clinical Practice B. Clinical Practice B must be successfully completed in order to progress to Clinical Practice C. Clinical Practice C must be successfully completed in order to progress to Clinical Practice D.

Each of the core clinical practice modules (Clinical Practice A, B, C D) are composed of placements in each of the core maternity care areas. Students must successfully complete each placement in

Antenatal, Labour and Birth, and Postnatal care in order to successfully complete each module. A MCAT document is used for each placement, and the student must submit the three successfully completed MCAT documents to pass the module and to progress on the programme.

If the student fails to successfully complete the practice placement in one or more of the maternity care areas, they will be required to repeat the practice placement(s), in which they were unsuccessful, as detailed below. The student will not be required to repeat the placement in the maternity care area which has been successfully completed.

#### **Enactment of protocol**

The following actions should occur to assist the student in meeting the required standards in any MCAT assessment while on any individual practice placement. The steps identified reflect the series of events commencing at the commencement of the placement and follows a series up until the repeat and final opportunity for the student.

#### Step 1

Identification of progress/difficulties in meeting standards from commencement of placement up to the Intermediate interview

If the student is having significant difficulties in achieving the MCAT standards it is vital that these difficulties are identified as early as is possible to allow time for improvement within that practice placement period, and preferably before the Intermediate Interview occurs.

Concerns should be documented by the preceptor/co-preceptor, and the clinical co-ordinator should be informed of the specific issues raised. The clinical midwifery tutor and the preceptor/co-preceptor will support the student in addressing the competencies that need improvement in the period up to the Intermediate Interview.

The standards with which the student requires focused and additional support in order to successfully progress on the placement must be specifically identified and documented in the MCAT.

#### Step 2

#### Intermediate Meeting and 'Intermediate Learning Plan'

If significant difficulties in meeting standards are identified, they should be formally addressed in the intermediate interview. The preceptor/co-preceptor will also contact and inform the clinical co-ordinator

of the specific issues identified. The clinical co-ordinator will contact the student's personal tutor by telephone and/or email.

An 'intermediate learning plan' is developed with the student. In this plan, detailed notes of the student's learning needs and the proposed actions to address these needs are made. This learning plan should be fully documented in the MCAT document. The preceptor/co-preceptor may request the presence at the intermediate interview of the clinical co-ordinator or personal tutor. The midwifery student may request the presence of the clinical co-ordinator and/or personal tutor at the intermediate meeting. The clinical co-ordinator and/or personal tutor may decide to attend this meeting at their own discretion.

The preceptor/co-preceptor/clinical midwifery tutor/clinical co-ordinator will support the student throughout the remaining weeks of the placement, focusing on the student's learning needs. The personal tutor/UCD nominee may meet with the student at this or at any time. The student is also advised to personally contact their personal tutor for additional support during the remaining weeks of the placement.

The preceptor should document any further meetings/observations with the student in the period between the intermediate and final interview, briefly giving dates and a description of the support offered.

#### Step 3

#### Final Meeting.

Prior to the final interview, if the student has not met the required standards in the MCAT for that placement, the preceptor/co-preceptor will inform the clinical co-ordinator who will in turn inform the personal tutor by telephone and/or by e-mail.

The clinical co-ordinator and/or the personal tutor can be present for the final meeting. The student and/or preceptor/co-preceptor may request the presence of the clinical co-ordinator and/or personal tutor at the final meeting.

A record of the how the student has not met the standards will be documented in detail by the preceptor/co-preceptor in the final meeting outcome sheet in the MCAT. This record must clearly identify each Principle, Assessment Criteria and/or Essential Skills that the student has not successfully achieved and the rationale or evidence to support the unsuccessful award.

#### Step 4

#### Implementing a 'final learning plan' after an 'unsuccessful' Practice placement

The student, preceptor/co-preceptor, clinical Coordinator, personal tutor (or UCD nominee) will arrange to meet (if possible, by the end of the placement but normally within one week of the end of the

placement<sup>1</sup>). The purpose of this meeting is to discuss with the student their learning needs and draw up a 'final learning plan' that will guide and support them in their subsequent clinical learning.

This 'final learning plan' will identify the student's learning needs and guide them in areas that require further development during both their subsequent and repeat practice placements. Copies of the learning plan will be retained by the student, the clinical co-ordinator and the personal tutor.

The duration of the repeat practice placement will be of the same duration as the original practice placement, or a four-week placement may be agreed at the discretion of the preceptor, clinical coordinator and personal tutor. Where the original placement was less than four weeks, the duration of the second attempt will be the same duration as the original placement. A new MCAT document will be supplied for the repeat placement and the assessment will be the same level as the original MCAT.

During the final learning plan meeting the personal tutor should advise the student of the following important considerations which should be documented as actions in the final learning plan:

- In the case of the 'repeat' practice placement, it is mandatory that the student presents her 'final learning plan' to her new preceptor so that she can avail of the required support.
- If the subsequent practice placement is not the 'repeat practice placement' the student
  must discuss their learning needs as outlined in the learning plan with their preceptor in
  their subsequent, and next midwifery placement. This will help maximise the benefits of
  their learning plan and improve their clinical learning outcomes in both the medium and
  long term.
- The personal tutor should emphasise that the domains of competence are pertinent
  across all practice placements/assessments. It should also be emphasised that the
  opportunity to receive early support from a preceptor is in the best interest of the
  student.
- However, in exceptional circumstances, including safety issues, an individualised plan for progression and learning will be agreed.

#### Step 5

#### **MCAT Presentation to Personal Tutor.**

The student presents the MCAT to her personal tutor at the designated date. The student contacts the clinical co-ordinator to arrange a date for a repeat practice placement, which will be the second and final opportunity to repeat the clinical module. Normally students are offered a repeat practice placement after the next available Programme Exam Board, although the timing of the repeat placement may vary. The repeat clinical module will incur a repeat fee.

<sup>&</sup>lt;sup>1</sup> There may be exceptions to one week in cases where a student is off duty/annual leave ©UCD HDip MCAT March 2023-September 2025 (Indirect Supervision)

#### Step 6

#### Repeat (and final) Practice Placement.

The student is offered a second and final opportunity to repeat the practice placement/module. A new MCAT is provided<sup>2</sup>. This practice placement will be of the same duration as the original practice placement, or a 4-week placement may be agreed at the discretion of the preceptor, clinical coordinator and personal tutor. Where the original placement was less than four weeks, the duration of the second attempt will be of the same duration as the original placement. The assessment will be the same competency level as the original MCAT.

As early as is convenient on the repeat practice placement, the student, the clinical co-Ordinator and new preceptor will hold a preliminary initial meeting with the student. During this meeting the student must present the 'final learning plan' to her new preceptor, outlining their documented learning needs and the areas in which the student requires additional support.

The intermediate meeting initiates the same protocol as step 2 if the student is having significant difficulties. Given that this is the final opportunity for the student in this practice placement/module, the personal tutor/UCD nominee in their supportive role shall meet the student at a convenient time soon after the intermediate meeting.

The final interview follows the same protocol as outlined in step 3 if the student fails to attain the required standards. Presentation of this MCAT to the personal tutor is mandatory.

In the event of the student being unsuccessful in this repeat attempt the student will be considered ineligible to continue on the Higher Diploma in Midwifery programme. No subsequent attempt can be considered except with written agreement of the Director of Midwifery and Nursing of the clinical partner site and through application to the School of Nursing, Midwifery and Health Systems Governing Board.

#### **General note:**

As students on the Higher Diploma in Midwifery programme are 'employees'; the student should also refer to the HSE/HR policies.

<sup>&</sup>lt;sup>2</sup> Students can contact the UCD SNMHS school office to organise the collection of a new MCAT document ©UCD HDip MCAT March 2023-September 2025 (Indirect Supervision)



# PROTOCOL ON THE PRESENTATION OF UNDERGRADUATE CLINICAL MODULES

## Higher Diploma in Midwifery

All students undertaking undergraduate midwifery programmes are required to present their clinical assessment documentation to personal tutors in UCD School of Nursing, Midwifery & Health Systems following completion of practice placements. It is the student's responsibility to ensure that they have their standards signed after completion of their practice placement. In each trimester, students will be advised of the dates for presentation of their clinical assessment documentation. The results of clinical modules will then be entered at the programme examination boards in UCD, with one of the following outcomes:

Outcome	Description
PASS (P)	MCAT standards have been achieved. The student is required to complete outstanding clinical time before completing the programme.
FAIL (F)	Standards have not been achieved during practice placement.
INCOMPLETE (IM)	Incomplete Must Pass (temporary) MCAT standards have not been achieved, due to insufficient time and the student has no extenuating circumstances. The Incomplete (IM) will only become a Pass (P) once the overall standards have been achieved. The student is required to complete outstanding clinical time before completing the programme.
EXTENUATING CIRCUMSTANCE S (IX)	MCAT standards have not been achieved and time is outstanding due to extenuating circumstances.  The student is required to undertake a supplemental placement, and this is considered a first attempt and will not incur a repeat fee. The MCAT standards required for supplemental placements will focus on the unsuccessful competencies. The duration of the supplemental placement may vary to meet the needs of individual students.
ABS	Failure to attend and/or present a completed MCAT to the personal tutor, with no evidence of extenuating circumstances, will result in an ABS outcome which is treated the same as a fail grade and a failed practice placement attempt.  The student will need to undertake a repeat placement which is a second and final attempt and will incur a repeat fee
NM	No Grade The MCAT submitted did not merit a grade (e.g. standards not signed appropriately or missing signatures in signature bank)

Presentation of the MCAT to the personal tutor is **compulsory** and failure to attend during the designated timeframe will normally result in an ABS outcome. It is worth noting that this will have implications for student progression and may incur a repeat fee. If the student is unable to attend due to extenuating circumstances, they should adhere to the current extenuating circumstances policy. Completed forms should be submitted to the programme office, with evidence of these extenuating circumstances, either before, or normally no later than 3 days after the designated day.

#### **Programme Requirements for Progression**

All students must complete their outstanding clinical time before being considered to have completed the programme. Failure to do so will result in a delay in having the NMBI registration form completed by the programme director.

Approved Director Undergraduate Clinical Studies 19th June 2019

Approved Programme Board (Chair) 19th June 2019



# Staff Guidelines for Responding to Clinical or Academic Issues Raised by UCD BSc or Higher Diploma Nursing and Midwifery Student(s)

This guideline outlines the principles and procedures agreed by UCD School of Nursing, Midwifery and Health Systems (UCD SNMHS) and associated healthcare providers to direct how issues raised in a service or institution and which pertain more properly to the other, should be addressed. Students may raise concerns, or make allegations, the nature of which dictates that the primary responsibility for addressing the issues raised, more properly resides with either the academic institution or the clinical service. These may be students' concerns and issues related but not limited to healthcare recipient safety, allegations against clinical or UCD school staff, allegations of poor clinical practice or general allegations against the partner hospital or UCD SNMHS.

#### **Principles of Communication**

- Safety of the healthcare recipient and student welfare are always the primary considerations.
- Upon notification of a concern, it is the responsibility of either the UCD SNMHS or the clinical service to ensure that the concern is communicated in a timely manner to the appropriate personnel at the appropriate managerial level.
- Formal complaints against another person will require adherence to the relevant university or hospital protocol.
- A feedback loop will ensure that the person who raises a concern or issue is informed as appropriate of the outcome in relation to the raised issues.

# Issues Raised with UCD SNMHS Personnel but Primarily Residing with Clinical Service

- When a member of UCD school staff receives information from a student or group of students who raise concerns, they will:
  - o Draw the student(s) attention to these guidelines and
  - o Follow appropriate communication lines within UCD SNMHS
- The Practice placement Coordinator (CPC), Clinical Nurse or Midwife Manager (CNM), Practice Development Coordinator, CNM 3 or the Director of the Centre for Nurse Education (CNE)/Centre of Midwifery Education (CMC), Director of Nursing DON/Acting Director of Nursing (ADON) or Midwifery or Director of Midwifery or Acting Director of Midwifery (ADOM), as appropriate, will be notified by telephone at the earliest opportunity with details of the nature and full extent of the issues or concerns raised by the student(s).

- The Director of Nursing or Director of Midwifery and the Practice Development Coordinator/CNM 3 or the Director of the CNE will agree procedures as to how major concerns will be investigated and addressed.
- The Practice Development Coordinator/CNM 3 or the Director of CNE will dialogue and agree a course of action with the Associate Dean for Undergraduate Programmes, Undergraduate Director of Clinical Studies and Programme Director of the UCD SNMHS with information about the steps being taken, including the policies, guidelines or protocols governing the response.
- The relevant policy, guideline or protocol will inform next steps.
- At intervals, and at the conclusion of all processes, the Director of Nursing or Midwifery and Head of the UCD SNMHS will be kept informed of progress and outcomes by their own staff involved in the process.

# Issues Raised with Clinical Service Personnel but Primarily Residing With UCD SNMHS

- When a member of Clinical Service staff receives information from a student or group of students that raises concerns, they will:
  - o Draw the student(s) attention to these guidelines and
  - o Follow appropriate communication lines within the Clinical Service
- The UCD Programme Director, UCD Personal Tutor, Undergraduate Director of Clinical studies Associate Dean of undergraduate studies, will be notified by telephone at the earliest opportunity with details of the nature and full extent of the issues or concerns raised by the student(s).
- The Head of the UCD SNMHS and Associate Dean for Undergraduate Programmes will agree procedures as to how concerns will be investigated and addressed.
- The appropriate in-service policies and procedures for addressing the issue or concern will then be initiated. The relevant policy will inform next steps.
- At intervals, and at the conclusion of all processes, the Head of the UCD School of Nursing,
   Midwifery and Health Systems and the Director of Nursing or Director of Midwifery will be kept informed of progress and outcomes.

## FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

**Purpose:** To discuss with the student their learning needs and draw up a *Final Learning Plan* that will guide and support them in their subsequent clinical learning.

Date:	Placement Area:	Unit:	<u> </u>
Please document the individual principles, asso	ciated assessment criteria and any essential skills	that were not attained	
Principles	Associated Assessment Criteria	Essential Skills	
Action/Supports Needed			
Signature of Preceptor/Co- Preceptor:	Signature of Student Midwife:		Date/Time:
Signature of CPC:	Signature of Personal Tutor:		

FINAL LEARNING PLAN – CONTINUED Please document the individual principles, associated assessment criteria and any essential skills that were <i>not</i> attained				

## FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

**Purpose:** To discuss with the student their learning needs and draw up a *Final Learning Plan* that will guide and support them in their subsequent clinical learning.

Date:	Placement Area:	Unit:				
Please document the individual principles, associated assessment criteria and any essential skills that were not attained						
Principles	Associated Assessment Criteria	Essential Skills				
Action/Supports Needed						
Signature of Preceptor/Co- Preceptor:	Signature of Student Midwife:	Date/Time:				
Signature of Freceptor, co Treceptor.	Signature of Student Huwile.	Date, fille.				
Signature of CPC:	Signature of Personal Tutor:					

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FINAL LEARNING PLAN – CONTINUED Please document the individual principles, associated assessment criteria and any essential skills that were <i>not</i> attained					

#### FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

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Principles	Associated Assessment Criteria	Essential Skills	
Action/Supports Needed			
Signature of Preceptor/Co- Preceptor:	Signature of Student Midwife:		Date/Time:
Signature of CPC:	Signature of Personal Tutor:		

FINAL LEARNING PLAN – CONTINUED Please document the individual principles, associated assessment criteria and any essential skills that were not attained				

# **NOTES**