

# STUDENT MIDWIFE COMPETENCY ASSESSMENT TOOL idwifery Board Higher Diploma Midwifery Supported and Specialist Practice Placements

# UCD SCHOOL OF NURSING, MIDWIFERY & HEALTH SYSTEMS

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

In partnership with the National Maternity Hospital



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# **SIGNATURE BANK**

All Preceptors/Co-Preceptors/Registered Midwives signing this document must insert their details below, as indicated.

Print Name	Signature	Designation	NMBI Pin

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#### **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 clinical placements i.e. MCAT document and clinical experience record book.
I will carry this document with me at all times while on clinical 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, where required.
It is my responsibility to ensure that I have arranged a date for an intermediate interview where required, 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, where required.
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 clinical placements.
I have read and understand the above instructions.
Signature of Student: Date:

#### SUPPORT WHILST ON CLINICAL PLACEMENT

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

#### **Clinical Supports:**

#### **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.

#### **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.

#### **Clinical Midwifery Tutor**

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

Name of Clinical 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 Personal Tutor:	Name of Student Advisor: Ms Anna Scully
E-mail address of Personal Tutor:	E-mail address of Student Advisor: anna.scully@ucd.ie
Phone number of Personal Tutor:	Phone number of Student Advisor: 01 7166497

#### INTRODUCTION TO THE COMPETENCE ASSESSMENT TOOL AND PLACEMENT RECORDS

This document contains the Midwifery Competence Assessment Tool (MCAT) for Neonatal Placement and record of short practice placement documentation for Clinical Specialist and Advanced Practice, Gynaecology, Midwifery-Led Care, Theatre and Recovery and High Dependency Care. The Neonatal MCAT and guidance document is adapted from the BSc Neonatal practice placement documentation 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). Documents for the Higher Diploma programme short practice placements in supported and specialist practice were developed for use by Assistant Professor Ciara Kirwan and Assistant Professor Barbara Lloyd in collaboration with academic staff and clinical partners.

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 will be utilised to assess competence for the neonatal practice placement as detailed below. Where the student is on a short practice placement, the 'record of placement experience' document will be utilised. At the onset of each short practice placement the midwifery student must review the professional values in practice and learning outcomes for that placement and review learning opportunities with the registered midwife/nurse. The student is orientated to the practice area on the first day of the placement. The placement is signed as complete when the registered midwife/nurse confirms that the student had exposure to and participated in the provision of care under supervision during the allocated time. Midwifery students are at all times required to demonstrate high standards of professional conduct at all times during their clinical placements and should work withing the Code of Professional Conduct and Ethics for Registered Nurses and Midwives (NMBI, 2021).

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 clinical placements at incremental levels by Preceptors/Co-preceptor and Registered Midwives, who support, supervise and assess the student throughout her/his clinical 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.

# Competencies For Entry To The Midwives Division Of The Nurses & Midwifes Register 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. **Close Supervision** applies to this document and is defined below.

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 clinical placement before the student progresses to the next level of the programme.

Level and Description of Supervision	Scope of Practice
Close Supervision: Defined as the Preceptor/Co-preceptor being present or in close proximity with the student whenever care is being provided to women and babies. The student is expected to safely and effectively perform the task and provide care with an underpinning rationale.	The student has had some exposure to and participation in the provision of care in the practice environment. The student needs both the assistance and close supervision of the midwife while they participate in the provision of individualised care, but the practice of the student is more frequently underpinned by midwifery theory and the student can provide a rationale for care provided. Frequent prompting may be required to support the student in the provision of individualised care. The student begins to identify their learning needs through discussion with their Preceptor/Co-preceptor.

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 clinical 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 For Neonatal Placement**

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

The student is orientated to the placement on **day one** of the clinical 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 clinical placement. The degree of supervision expected, as prescribed by the Midwife Registration Programme Standards and Requirements (NMBI 2016) is discussed, which for this clinical placement, is **Close 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 clinical 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**

(Please note: Normally, an intermediate interview is not required for a two-week clinical placement. See UCD Protocol for unsuccessful clinical placement in the appendices for guidance on situations where an intermediate interview is required.)

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 clinical 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 clinical 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 development plans if used during the placement
- Review of student's attendance during clinical 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 clinical placement. The personal tutor is to 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 clinical placement.
- Explicit in detailing what the student must do to successfully complete the assessment of competence.
- Communicated to the Personal Tutor supporting the clinical 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 final learning 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) clinical 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 clinical 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 clinical 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.

# **NEONATAL UNIT**

Number of weeks in this Practice Placement: TWO
Placement Dates:
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Co-Ordinator:

**Instructions for Students:** In addition to this MCAT, you are also required to record 10 'care of the newborn requiring special care' cases in your clinical experience record book.

CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>1.1</b> Participates with the midwife/nurse in advocating on behalf of parents and their babies to ensure their rights and interests are protected.	Participates with the midwife/nurse in acting as an advocate for parents and babies' rights		
<b>1.2</b> Participates with the midwife/nurse in respecting the diversity of parents and their families including their beliefs, values, choices and priorities and provides a rationale for this.	<ul> <li>Participates with the midwife/nurse in recognising and respecting the beliefs, values, choices and priorities of parents and families.</li> <li>Acts in a manner that supports equality, diversity and rights of all individuals.</li> </ul>		
<b>1.3</b> Participates with the midwife/nurse in providing sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby and provides a rationale for this.	<ul> <li>Participates with the midwife/nurse in providing sufficient evidence-based information to the woman to empower her to make informed decisions about the care of her baby and provides a rationale for this.</li> <li>Adopts a questioning/reflective attitude towards clinical practice and can discuss pertinent research studies that guide evidence-based practice for neonatal care.</li> </ul>		

#### Principle 2: Professional Responsibility and Accountability

Competency 2: The 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 the Nursing and Midwifery Board of Ireland (NMBI)

CLOSE SUPERVISION	OSE SUPERVISION Assessment Criteria		ate & Sign
		Pass	Fail
<b>2.1</b> Participates with the midwife/nurse in acting at all times within the law and follows the rules and regulations of the Nursing and Midwifery Board of Ireland (NMBI) and other applicable bodies, and provides a rationale for this.	Demonstrates knowledge of the rules and regulations of the Nursing and Midwifery Board of Ireland (NMBI) and other applicable bodies and how these may impact on neonatal care		
<b>2.2</b> Works within the scope of practice of a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul> <li>Works within the scope of practice of a midwifery student and recognises their own level of knowledge, skills and professional behaviours</li> <li>Participates in the provision of care in partnership with the Neonatal Unit team</li> <li>Recognises the need to organise and prioritise workload under the supervision of a nurse/midwife and as part of the team, taking note of activities within the neonatal unit</li> <li>Participates in the preparation and maintenance of neonatal equipment</li> </ul>		

CLOSE SUPERVISION	Assessment Criteria	Preceptor Date	e & Sign
		Pass	Fail
<b>3.1</b> Participates with the midwife/nurse in the provision of safe, competent, kind, compassionate and respectful professional care to the neonate, which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.	Participates with the midwife/nurse in the provision of safe, competent, kind, compassionate and respectful professional care to the neonate care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.		
<b>3.2</b> Participates with the midwife/nurse in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for babies and provides a rationale for this.	<ul> <li>Participates with the midwife/nurse in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for babies</li> <li>Discusses the normal physiology of adaptation of the baby to extra uterine life</li> <li>Discusses the admission criteria for babies admitted to the Neonatal Unit</li> <li>Participates in the admission of a baby to the Neonatal Unit</li> <li>Accurately undertakes and records neonatal vital signs</li> <li>Participates with the midwife/nurse in advising women on the follow-up care of their baby following discharge from NNU.</li> </ul>		
<b>3.3</b> Participates with the midwife/nurse in recognising and responding appropriately in a timely manner to any deterioration in a baby's condition and provides a rationale for this.	Participates with the midwife/nurse in identifying emergency situations, summoning help acting within own level of expertise		

CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
	Participates with the midwife/nurse in maintaining accurate and up to date clinical records		
<b>3.4</b> Participates with the midwife/nurse in recognising risk factors during pregnancy, labour and birth or in the postnatal period that indicates deterioration of the baby and acts appropriately to escalate the level of care, and provides a rationale for this	<ul> <li>Recognises the importance of the woman's antenatal and intranatal history which may contribute to the baby's poor condition at or shortly after birth requiring admission to NNU</li> <li>Recognises the importance of the baby's postnatal history which may contribute to the baby's deterioration whilst being cared for in the NNU</li> </ul>		
<b>3.5</b> Participates with the midwife/nurse in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the baby and provides a rationale for this.	<ul> <li>Participates with the midwife/nurse in recording the baby's vital signs, recognising deviations from the normal range, and escalates care accordingly</li> <li>Can participate with the midwife/nurse in providing the initial steps of neonatal resuscitation</li> </ul>		
<b>3.6</b> Participates with the midwife/nurse in supporting and educating women with infant feeding practices which include protecting promoting and supporting breastfeeding and provided a rationale for this.	<ul> <li>Can participate with the midwife/nurse in discussions with the woman regarding the chosen method of infant feeding for her baby, with particular reference to the advantages of breastfeeding and nutritional requirements of the baby</li> </ul>		

undertaking relevant continuing professional	1		
CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.7</b> Participates with the midwife/nurse complying with standard universal infection prevention and control measures and provided rationale for this.	Is aware of, and complies with infection prevention and control measures as per local PPPs		
<b>3.8</b> Participates with the midwife/nurse in the safe management of drug administration, monitoring the effects and documenting appropriately in accordance with Nursing and Midwifery Board of Ireland (NMBI) medication management guidance, and provides a rationale for this.	Discusses the principles involved in safe administration of medications within hospital policy and NMBI guidelines		
<b>3.9</b> Participates with the midwife/nurse in reflection on their own practice and can demonstrate learning from previous experience in midwifery and can identify future learning needs and provides a rationale for this.	Participates with the midwife/nurse in reflection on their practice in the neonatal unit and can demonstrate learning from previous experience		
<b>3.10</b> Participates with the midwife/nurse in the appropriate use of national and local guidelines and policies in the provision of evidence-based care and provides a rationale for this.	Can locate the relevant local PPPGs in the neonatal unit and understands the importance of incorporating evidence-based guidelines into practice		
<b>3.12</b> Participates with the midwife/nurse in applying clinical risk management processes into their own practice and provides a rationale for this.	<ul> <li>Is aware of and complies with national health and safety legislation and risk management policies</li> <li>Can identify and discuss potential clinical risks and take appropriate action to minimise risk</li> </ul>		

CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>3.13</b> Participates with the midwife/nurse in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this.	<ul> <li>Participates with the midwife/nurse in identifying the importance of clinical audits in the Neonatal Unit and identifies examples of same.</li> </ul>		
<b>3.14</b> Demonstrates a willingness to learn from the multidisciplinary team within the neonatal unit.	<ul> <li>Demonstrates an interest in neonatal care by accessing learning opportunities, appropriate questioning and seeking feedback on care given.</li> </ul>		

#### **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 **CLOSE SUPERVISION Assessment Criteria** Preceptor Date & Sign Fail **Pass 4.1** Participates with the midwife/nurse in ensuring Participates with the midwife/nurse in that the baby is the primary focus of practice and ensuring that the baby is the primary focus of provides a rationale for this. practice and promotes family-centred care. Participates with the midwife/nurse in **4.2** Participates with the midwife/nurse in providing care that is safe, evidence-based, supportive, providing care that is safe, evidence-based, responsive and compassionate taking into account supportive, responsive and compassionate the needs of the baby and the parents and provides taking into account the needs of the baby and a rationale for this. the parents. Participates with the midwife/nurse in provision of family-centered care practices **4.3** Participates with the midwife/nurse in • Ensures confidentiality with regards to delivery respecting the baby's and family's right to privacy of care and documentation in the Neonatal and confidentiality and provides a rationale for this. Unit. • Communicates tactfully with the parents, developing and maintaining trust, integrity and

confidence.

Principle 5: Collaboration with others  Competency 5: The midwife communicates and	collaborates effectively with women, women's	families and	l with the
multidisciplinary healthcare team CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
<b>5.1</b> Participates with the midwife/nurse in providing information in a format that is understandable and accessible to the baby's parents/ family and provides a rationale for this.	<ul> <li>Understands the importance of effective communication in the neonatal unit</li> <li>Participates in sharing information that is clear and accurate, at a level that the baby's parents/family can understand</li> </ul>		
<b>5.2</b> Participates with the midwife/nurse in communicating appropriately and effectively with parents/families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul> <li>Participates in communicating clearly and consistently with parents/families and members of the multidisciplinary healthcare team using professional language</li> </ul>		
<b>5.3</b> Participates with the midwife/nurse in recognising and taking appropriate actions to challenge and reduce barriers to effective communication with parents/families and with the multidisciplinary healthcare team and provide a rationale for this.	<ul> <li>Can identify and discuss with the midwife/nurse, factors that facilitate effective communication in the neonatal unit</li> <li>Discusses with the midwife/nurse, the barriers to effective communication in the neonatal unit</li> </ul>		
<b>5.4</b> Participates with the midwife/nurse in collaborating with parents/families and other healthcare professionals using appropriate communication tools.	Participates with the midwife/nurse and other healthcare professionals in using effective communication skills to provide parents/families with all relevant information to make informed choices regarding the care of their baby		

#### **Principle 5: Collaboration with others** Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team **CLOSE SUPERVISION Assessment Criteria** Preceptor Date & Sign **Pass** Fail **5.5** Participates with the midwife/nurse in recording • Understands the importance of recording clinical practice in a manner which is clear, clinical practice and maintaining accurate objective, accurate, and timely and and up to date records. provides rationale for this. • Participates in documenting care in a clear, concise and contemporaneous manner in the healthcare records. **5.6** Participates with the midwife/nurse in Respects the views of others and their right addressing differences of professional opinion with to hold and express their views through colleagues by discussion and informed debate in a informed discussion. professional and timely manner, and provides a rationale for this

## ASSESSMENT OF ESSENTIAL NEONATAL SKILLS & KNOWLEDGE

ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT

ESSENTIAL SKILLS	Student Self- Assess Signature	Midwife/Nurse Signature	Date
Participates with the midwife/nurse in an admission to the Neonatal Unit:			
Assist in setting up for an admission			
Review antenatal/labour/post-birth history and Apgar scores			
<ul> <li>Perform admission observations: BP (upper and lower limbs), check for</li> </ul>			
patent nares, swabs			
Check ID bands and security tag			
Orientate parents to the Neonatal Unit			
Participate with the midwife/nurse in ensuring the comfort needs of the			
newborn are met:			
<ul> <li>Assessment of nutritional intake; calculation of daily fluid requirements</li> </ul>			
Assessment of pain			
<ul> <li>Provision of developmental care strategies e.g. quiet time, nesting, skin to</li> </ul>			
skin			
Participates with the midwife/nurse in the initial steps of neonatal			
resuscitation:			
Daily check of resuscitation equipment			
Call for help*			
Assess Respirations *			
Initiate PPV *			
Assess Heart Rate *			
<ul> <li>Take appropriate corrective steps (MR SOPA) *</li> </ul>			
*Discuss with midwife/nurse if not witnessed on practice placement			
Participates in newborn care skills:			
Eye care			
Umbilical cord care			
Newborn skin care			
Nappy changing			
Baby bathing			

## **ASSESSMENT OF ESSENTIAL NEONATAL SKILLS & KNOWLEDGE**

ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT

ESSENTIAL SKILLS	Student Self- Assess Signature	Midwife/Nurse Signature	Date
Participate with the midwife/nurse in the daily examination and ongoing			
assessment of the newborn:			
Physical examination:			
<ul> <li>Temperature (axilla +/-rectal as required)</li> </ul>			
<ul> <li>Heart rate, Respirations, Colour</li> </ul>			
<ul> <li>Blood pressure</li> </ul>			
<ul> <li>Oxygen Saturations (pre and post ductal)</li> </ul>			
Neurological examination:			
<ul> <li>Reflexes present (palmar grasp, sucking, swallowing, rooting, startle- if observed)</li> </ul>			
o Tone			
<ul> <li>Gestation-appropriate feeding pattern</li> </ul>			
<ul> <li>Sleep and behaviour pattern</li> </ul>			
Elimination:			
<ul> <li>Verify if anus is patent and infant is passing meconium/stool and urine</li> </ul>			
Weight assessment			
Participates with the midwife/nurse to assist newborn feeding strategies:  • Breastfeeding/expressing			
<ul> <li>Adheres to local hospital policy re: feeding schedules</li> </ul>			
<ul> <li>Knowledge of milk options: Donor milk, preterm, term formula.</li> </ul>			
Nasogastric/Orogastric bolus feeding			
Site an NG feeding tube and check correct position with PH before each feed			

## **ASSESSMENT OF ESSENTIAL NEONATAL SKILLS & KNOWLEDGE**

ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT

ESSENTIAL SKILLS	Student Self-Assess Signature	Midwife/Nurse Signature	Date
Observes the consultant-led multidisciplinary rounds in the ICU, HDU, SCBU			
Observes and participates with the midwife/nurse in the care of infants requiring:  • Ventilatory support therapies • Incubator support +/- Humidity or Phototherapy • Intravenous fluids/Dextrose gel • Finnegan scoring • Palliative care/Comfort care/Bereavement support for families* • Investigations for suspected chromosomal/congenital/metabolic condition • Septic work-up, intravenous antibiotics +/- lumbar puncture • Therapeutic Hypothermia *  *Discuss with midwife/nurse if not witnessed on placement			
<ul> <li>Participate with the midwife/nurse in discharge of infant to home, including:</li> <li>Removal security tags</li> <li>Providing all referrals/appointments (e.g. GP, PHN, Baby Clinic)</li> <li>Basic Life Support training for parents (where appropriate)</li> <li>Advice re: follow-up screening (NBSS Card, 6-week check), Immunisation, Emergency contact info</li> </ul>			

# **INITIAL INTERVIEW**

Orientated to the clinical area Yes	No	
Review and discussion of Principles, Assessment Crite Preceptor:	eria and Essential Skills: Student:	
Learning needs identified by the midwifery student (r	refer to practice placement learning outcomes):	
Specific opportunities identified by the Preceptor/Co-		
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Date set for intermediate interview:	Clinical Co-ordinator Present if applicable: Yes	es No Date:
Comments (where appropriate):	1 - g. a.a. c or omination	Date:
Signature:		
Signature.		

#### **INTERMEDIATE INTERVIEW**

(an intermediate interview is not normally required for this 2-week placement, see appendices for details of when it is required)

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		
Date of Final interview:	Signature of Clinical Co-ordinator:	Date:
Comments (where appropriate):		Date:
Designation	Cianaturo	
Designation:	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 2 of the protocol 'When a HDM student is having significant difficulties in meeting competencies during a clinical placement'

Date:	Placeme	nt Area:	Unit:	
Please document the individual Princip	oles, associated Assessment (	Criteria and any Essential S	kills that the student is	having difficulty achieving
Principles	Associated Assessment		Essential Sk	
Action/Supports Needed				
Signature of Preceptor/Co- Preceptor:	Signature of Student Mid	lwife:		Date/Time:
Signature of Clinical Co-Ordinator (where appropriate):	Signature of Personal Tu	tor (where appropriate):		

# **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			

# **FOLLOW UP/FEEDBACK PAGE**

Feedback from Preceptor/Co-Preceptor and other *midwives/nurses*, 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 PAGE**

Ongoing feedback from Preceptor/Co-Preceptor and other *midwives/nurses*, 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 **Print Name:** Signature: Date: Signature: **Print Name:** Date: **Print Name:** Signature: Date:

## **RECORDS OF MEETINGS/ADDITIONAL FEEDBACK**This page may be completed by any Midwife/Nurse/CPC or Academic Representative

Date/Time	Signature/Designation	Comments
1		

## **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/Nurse

Date	Clinical Skill	Signature of Preceptor/Midwife/Nurse

## **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 appropriate):	Signature of Personal Tutor (where appropriate):	
Preceptor/Co-Preceptor will document in detail each P	r,Assessment Criteria and Essential Skills for this placeme rinciple, Assessment Criteria and Essential Skills <b>not</b> atta ptocol 'When a HDM student is having significant difficultion	ined. The

## **FINAL INTERVIEW CONTINUED**

The Preceptor/Co-Preceptor must document in detail each Principle, Assessment Criteria and Essential Skills that were <b>not</b> 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						
Action/ Supports Needed						
Signature of Preceptor/Co- Preceptor:	Signature of Student Midwife:		Date/Time:			
Signature of Clinical Co-ordinator:	Signature of Personal Tutor:					

## FINAL LEARNING PLAN – CONTINUED

Please document the individual principles, associated assessment criteria and any essential skills that were not attained					

## RECORD OF SHORT PLACEMENT EXPERIENCE

## CLINICAL MIDWIFERY SPECIALIST & ADVANCED MIDWIFE PRACTITIONER

Number of weeks in this Practice Placement: One	
Bereavement Placement date:	Diabetic Services Placement date:
Emergency Room Placement date:	Lactation Support Services Placement date:
Diabetes Antenatal Education Placement date:	Fetal Assessment Unit Placement date:
High Risk Clinic Placement date:	
Name of Clinical Co-Ordinator:	

**Instructions for Students:** You are required to complete one 'record of placement experience' page for each allocation during your Clinical Midwifery Specialist and Advanced Midwife Practitioner short placement. You are then required to undertake a reflection of your experiences during these allocations and document this in the box provided. If you are scheduled to attend a clinical conference during this allocation, please document this in the 'record of teaching/discussion sessions attended' section on page 54.

### **Clinical Learning Outcomes**

The Nursing and Midwifery Board of Ireland (NMBI) Midwife Registration Programme Standards and Requirements (2022) states that: appropriate support and supervision and clearly defined learning outcomes should be provided for the student in specialist placements.

#### **Aim of clinical placement:**

The aim of the Clinical Midwifery Specialist and Advanced Midwife Practitioner placement is for the student midwife to experience and reflect on the role of the Clinical Midwife Specialist and Advanced Midwife Practitioner.

#### During and by the end of this placement the student midwife should:

#### **Lactation Support Services**

- Participate with the midwife in care and management of women experiencing difficulties with breastfeeding
- Participate with the midwife in assessing breastfeeding progress up until the newborn is 6 weeks of age
- Participating with the midwife in identifying where intervention or referral is required (e.g. jaundice, weight loss)

#### Fetal Assessment Unit

- Identify the recommended schedule of antenatal ultrasound for normal risk pregnancies
- Understand the purpose and limitations of the anomaly scan
- Identify the role of ultrasound in the identification, monitoring and management of complex pregnancies

#### **Diabetic Services**

- Identify the role of the Clinical Midwife Specialist and Advanced Midwife Practitioner in diabetes
- Observe and participate in care and management of women with diabetes and gestational diabetes
- Participate in the midwifery care provided in the diabetes outpatients clinic
- Participate in the specialised antenatal education provided by the diabetes services midwives

#### Bereavement

- Observe the role of the Clinical Midwife Specialist in bereavement
- Become familiar with memory making options available for bereaved families
- Become familiar with investigations and follow-up for bereaved parents
- Become aware of the support services in the hospital and in the community
- Understand the importance of individualised care that supports the family as a whole

• Understand normal grief and participate with the midwife in identifying where further support is needed

#### **Emergency Room**

- Observe and participate with the midwife in the assessment, care and management of a woman experiencing an obstetric emergency
- Observe and participate with the midwife in the assessment, care and management of a woman experiencing a gynaecology emergency
- Identify the triage system in use and participate with the midwife in determining severity and complexity of the presenting complaint
- Participate with the midwife in determining the degree of urgency, and participate in referral and escalation of care as appropriate

#### High-Risk Clinic

- Identify the role of the midwife specialist as a key member of the multi-disciplinary team in the care and management of women experiencing a complex pregnancy
- Observe and participate with the midwife in the assessment, care and management of women experiencing a complex pregnancy, e.g. epilepsy, cardiac disease, history or premature birth, multiple pregnancy.

#### **Professional Values In Practice**

Students are required to demonstrate high standards of professional conduct at all times during their clinical placements. Students should work within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014)

#### Principle 1: Respect for the dignity of the person. The student is able to:

- Respect all people service users equally without discriminating on the grounds of age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental or intellectual) or membership of the Traveller community
- Respect for the service users' rights and choices
- Shows respect, kindness, compassion towards the service user and their families

#### Principle 2: Professional responsibility and accountability. The student is able to:

- Promote the level of professionalism expected of a student midwife in relation to punctuality, personal presentation and attitude, in accordance with clinical practice placements and university policies
- Work within the scope of practice for a student midwife and recognises their own level of knowledge, skills and professional behaviours

#### **Principle 3: Quality of practice. The student is able to:**

- Consistently make efforts to engage in their learning in order to enhance safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence
- Demonstrate the ability to listen, seek clarification and carry out instructions safely

#### Principle 4: Trust and confidentiality. The student is able to:

- Demonstrate honesty and trustworthiness
- Respect the service users right to privacy and confidentiality

#### Principle 5: Collaboration with others. The student is able to:

- Demonstrate that they can communicate clearly and consistently with colleagues, service users and their families.
- Communicate appropriately and effectively with the multidisciplinary team

Placement Area					
Name and role of	f Clinical Midwife Specia				
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and pa	articipated in the pro	vision of care under	Yes 📙	No 🗌
according to the Professional Cond Midwives at all till If the registered make a comment engagement and	midwife wishes to				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midwi	fe Sign and Print Name				
Midwifery Student Sign and Print Name:					

Placement Area					
Name and role of	Clinical Midwife Specia				
Orientated to the	clinical area			Yes	No 🗌
The student has supervision	had exposure to, and pa	rticipated in the prov	vision of care under	Yes	No 🗌
Midwifery studen	ts are expected to act			•	
according to the	NMBI (2021) Code of				
Professional Cond	duct and Ethics for				
Midwives at all ti	mes.				
If the registered	midwife wishes to				
make a comment	on the students				
engagement and	performance on this				
short placement,	please do so in this				
box					
			<del>_</del>		
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midwife Sign and Print Name:					
Midwifery Student Sign and Print Name:					

Placement Area						
Name and role of	Clinical Midwife Specia					
Orientated to the clinical area				Yes	No 🗌	
The student has had exposure to, and participated in the provision of care under supervision				Yes	No 🗌	
Midwifery studen	ts are expected to act					
according to the	NMBI (2021) Code of					
Professional Cond	duct and Ethics for					
Midwives at all ti	mes.					
If the registered	midwife wishes to					
make a comment	t on the students					
engagement and	performance on this					
short placement,	please do so in this					
box						
Date:	Hours of allocation	From:	To:	Total hours:		
Registered Midwi	Registered Midwife Sign and Print Name:					
Midwifery Student Sign and Print Name:						

Placement Area					
Name and role o	f Clinical Midwife Specia				
Orientated to the clinical area				Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the	nts are expected to act NMBI (2021) Code of duct and Ethics for mes.				
make a commen	midwife wishes to t on the students performance on this please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	:			
Midwifery Student Sign and Print Name:					

Placement Area			•		
Name and role o	f Clinical Midwife Specia	alist or Advanced Mic	dwife Practitioner:		
Orientated to the	e clinical area	Yes	No 🗌		
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes	No 🗌
Midwifery students are expected to act according to the NMBI (2021) Code of Professional Conduct and Ethics for Midwives at all times.  If the registered midwife wishes to make a comment on the students engagement and performance on this short placement, please do so in this					
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midwife Sign and Print Name:					
Midwifery Student Sign and Print Name:					

Placement Area					
Name and role o	f Clinical Midwife Specia	llist or Advanced Mi	dwife Practitioner:		
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the	nts are expected to act NMBI (2021) Code of duct and Ethics for mes.				
make a commen	midwife wishes to t on the students performance on this please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	:			
Midwifery Studer	nt Sign and Print Name:				

Placement Area					
Name and role o	f Clinical Midwife Specia	llist or Advanced Mi	dwife Practitioner:		
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the	nts are expected to act NMBI (2021) Code of duct and Ethics for mes.				
make a commen	midwife wishes to t on the students performance on this please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	:			
Midwifery Studer	nt Sign and Print Name:				

Placement Area					
Name and role o	f Clinical Midwife Specia	llist or Advanced Mi	dwife Practitioner:		
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the	nts are expected to act NMBI (2021) Code of duct and Ethics for mes.				
make a commen	midwife wishes to t on the students performance on this please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	:			
Midwifery Studer	nt Sign and Print Name:				

Placement Area			•		
Name and role o	f Clinical Midwife Specia	alist or Advanced Mi	dwife Practitioner:		
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the Professional Con Midwives at all ti					
make a comment engagement and short placement box	midwife wishes to t on the students performance on this please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	:			
Midwifery Stude	nt Sign and Print Name:				

## RECORD OF TEACHING/DISCUSSION SESSIONS ATTENDED

Please give details of any additional teaching or discussion sessions attended whilst on this clinical placement

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

## **Student's Reflection on Practice Placement**

Midwifery Student Signature: Date:		

# RECORD OF SHORT PLACEMENT EXPERIENCE THEATRE AND RECOVERY

Number of weeks in this practice placement: One
Placement Dates:
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Co-Ordinator:

## **Clinical Learning Outcomes for Theatre**

The Nursing and Midwifery Board of Ireland (NMBI) Midwife Registration Programme Standards and Requirements (2016) states that: appropriate support and supervision and clearly defined learning outcomes should be provided for the student in specialist placements.

#### **Aim of clinical placement:**

The aim of the Theatre and Recovery practice placement is for the student midwife to learn about the care of women and their babies in the general theatre and recovery setting, under the supervision of a registered midwife or nurse

#### During and by the end of this placement the student midwife should:

- Be familiar with the layout of the department, including the emergency exits
- Know how to activate the emergency response system
- Demonstrate familiarity with the location and content of resuscitation equipment, including adult and neonatal resuscitation equipment
- · Know where emergency blood is stored
- Observes and participates in the admission of a woman and her birth partner to the Operating Theatre
- Observes the preparation for surgical procedures
- Observes in the preparation and administration of general and regional anaesthesia
- Demonstrate knowledge of indications, benefits, risks and contra-indications of regional and general anaesthesia, with particular reference to pregnant women
- Demonstrate knowledge of the midwifery care and management of women having regional and general anaesthesia
- Observe an intubation
- Observe in the application of rapid sequence induction/cricoid pressure in an emergency situation
- Observes Obstetric and Gynaecological surgical procedures e.g.: (list is not exhaustive)
  - o Elective and Emergency Caesarean Section
  - Manual removal of placenta
  - Uterine Prolapse Repair
  - Hysterectomy(vaginal and abdominal)
  - Evacuation of Retained Products of Conception (ERPC)
- Observes and participates with the scrub nurse/midwife when scrubbed for a Caesarean Section and surgical procedures
- Observes and participates in the safe transfer of woman and her infant to the recovery room

## **Clinical Learning Outcomes for Recovery**

The Nursing and Midwifery Board of Ireland (NMBI) Midwife Registration Programme Standards and Requirements (2016) states that: Appropriate support and supervision and clearly defined learning outcomes should be provided for the student in specialist placements.

#### Aim of clinical placement:

The aim of the Theatre and Recovery practice placement is for the student midwife to learn about the care of women and their babies in the general theatre and recovery setting, under the supervision of a registered midwife or nurse

#### During and by the end of this placement the student midwife should:

- Observes and participates in postoperative care within the recovery room
- Be aware of handling equipment, e.g. Hoover mattress/sliding sheet
- Demonstrates knowledge of the handover and discharge criteria that need to be met prior to transfer to the ward
- Observes and participate in the care of the newborn following birth by caesarean section or instrumental birth:
  - Check that the resuscitaire is turned on for the reception of the newborn, and that all necessary drugs and equipment are available and in working order
  - Obtain and record the time of birth and sex of infant(s)
  - o Participate in identification and security tagging of the newborn infant
  - o Observe the midwife and paediatrician in resuscitation procedures
  - o Support women/partners to have skin to skin contact with their baby in a safe and unhurried environment
- Observes and participates in the clinical handover of a woman from the operating theatre/recovery room to the ward staff prior to transfer the woman to the clinical ward area
- Adheres to the principles of infection control
- Knows how to maintain a sterile field

#### **Professional Values In Practice**

Students are required to demonstrate high standards of professional conduct at all times during their clinical placements. Students should work within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014)

#### Principle 1: Respect for the dignity of the person. The student is able to:

- Respect all people service users equally without discriminating on the grounds of age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental or intellectual) or membership of the Traveller community
- Respect for the service users rights and choices
- Shows respect, kindness, compassion towards the service user and their families

#### **Principle 2: Professional responsibility and accountability. The student is able to:**

- Promote the level of professionalism expected of a student midwife in relation to punctuality, personal presentation and attitude, in accordance with clinical practice placements and university policies
- Work within the scope of practice for a student midwife and recognises their own level of knowledge, skills and professional behaviours

#### Principle 3: Quality of practice. The student is able to:

- Consistently make efforts to engage in their learning in order to enhance safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence
- Demonstrate the ability to listen, seek clarification and carry out instructions safely

#### Principle 4: Trust and confidentiality. The student is able to:

- Demonstrate honesty and trustworthiness
- Respect the service users right to privacy and confidentiality

#### **Principle 5: Collaboration with others. The student is able to:**

- Demonstrate that they can communicate clearly and consistently with colleagues, service users and their families.
- Communicate appropriately and effectively with the multidisciplinary team

Placement Area					
Name and role o	f Clinical Midwife Specia	alist or Advanced Mi	dwife Practitioner:		
Orientated to the	e clinical area			Yes	No 🗌
The student has supervision	had exposure to, and p	articipated in the pr	ovision of care under	Yes 🗆	No 🗌
according to the	nts are expected to act NMBI (2021) Code of duct and Ethics for imes.				
make a commen	midwife wishes to t on the students I performance on this , please do so in this				
Date:	Hours of allocation	From:	To:	Total hours:	
Registered Midw	ife Sign and Print Name	::			
Midwifery Studer	nt Sign and Print Name:				

# RECORD OF SHORT PLACEMENT EXPERIENCE MIDWIFERY-LED CARE PLACEMENT

Number of weeks in this Practice Placement: Two						
Community Midwives Placement dates:	Early Transfer Home Placement dates:					
Antenatal Education Placement date:	Midwives Clinic Placement date:					
Name of Clinical Co-ordinator:						

**Instructions for Students:** You are required to complete one 'record of placement experience' page for each allocation during your Midwifery-Led Care placement. You are then required to undertake a reflection of your experiences during these allocations and document this in the box provided. You should also record your experience in the appropriate sections of your clinical experience record book.

## **Clinical Learning Outcomes for Midwifery Led-Care Placements**

The Nursing and Midwifery Board of Ireland (NMBI) Midwife Registration Programme Standards and Requirements (2016) states that: appropriate support and supervision and clearly defined learning outcomes should be provided for the student in specialist placements.

#### Aim of clinical placement:

The aim of the Midwifery-Led Care practice placement is for the student midwife to gain experience of woman centred care and management, where the midwife is the learunder the supervision of a registered midwife

#### During and by the end of this placement the student midwife should:

- Recognise the midwife's role as a lead professional in the care of women with healthy uncomplicated pregnancy, labour and birth
- Participate in giving advice and support to women to promote health and well-being, including advising about the minor disorders
  of pregnancy
- Participates with the midwife in the provision of antenatal education, utilising a philosophy of care that promotes pregnancy, labour and birth as a healthy physiological event.
- Participates with the midwife in the provision of parent education, utilising a facilitative and participative approach
- Participates with the midwife in providing evidence-based information about pathways of care and place of birth
- Participates with the midwife in assessing women's suitability for midwifery-led care
- · Participates in all aspects of midwifery-led care
- Participates in antenatal visits in the woman's home, community midwifery clinics and midwives clinics
- Participates in discussing DOMINO/Home Birth
- Participates with the midwife in the checking of emergency equipment required for Home and Hospital Births
- Participates in postnatal visits in the woman's home
- Participates in the promotion of national newborn screening and immunisation programmes
- Participates in the provision of advice and support to the woman and her partner to aid adaptation to parenthood
- Participates with the midwife in decision-making skills in relation to initial assessment, ongoing assessment and decisions to recommend transfer to the obstetric care
- Participates in the discharge of woman and baby from midwifery-led care team to primary care services

#### **Professional Values In Practice**

Students are required to demonstrate high standards of professional conduct at all times during their clinical placements. Students should work within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014)

#### Principle 1: Respect for the dignity of the person. The student is able to:

- Respect all people service users equally without discriminating on the grounds of age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental or intellectual) or membership of the Traveller community
- Respect for the service users' rights and choices
- Shows respect, kindness, compassion towards the service user and their families

#### Principle 2: Professional responsibility and accountability. The student is able to:

- Promote the level of professionalism expected of a student midwife in relation to punctuality, personal presentation and attitude, in accordance with clinical practice placements and university policies
- Work within the scope of practice for a student midwife and recognises their own level of knowledge, skills and professional behaviours

#### Principle 3: Quality of practice. The student is able to:

- Consistently make efforts to engage in their learning in order to enhance safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence
- Demonstrate the ability to listen, seek clarification and carry out instructions safely

#### Principle 4: Trust and confidentiality. The student is able to:

- Demonstrate honesty and trustworthiness
- Respect the service users right to privacy and confidentiality

#### Principle 5: Collaboration with others. The student is able to:

- Demonstrate that they can communicate clearly and consistently with colleagues, service users and their families.
- Communicate appropriately and effectively with the multidisciplinary team

Placement Area				Communi	ty Midwives
Orientation provided				Yes No	
The student has had exposure supervision	e to, and partic	ipated in the provision	of care under	Yes No	
Midwifery students are expect according to the NMBI(2014) Professional Conduct and Ethi Midwives at all times.	Code of				
If the registered midwife wish comment on the students eng performance on this short pla please do so in this box	gagement and				
Record of Placement hours			Date:	From:	To:
Date:	From:	To:	Data	<b>5</b>	<b>T</b>
Date:	From:	To:	Date: Total Placement Hours	From:	То:
Date:	From:	To:	Total Flacement Hours	o	
Registered Midwife Sign and F	Print Name:	-	•		
Midwifery Student Sign and P	rint Name:				

Placement Area			Early	Transfer Home
Orientation provided			Yes	No
The student has had exposure to, and supervision	participated in the provision	of care under	Yes	No
Midwifery students are expected to ac according to the NMBI(2014) Code of Professional Conduct and Ethics for Midwives at all times.	t			
If the registered midwife wishes to maccomment on the students engagement performance on this short placement, please do so in this box				
Record of Placement hours Date: From:		Total Placement Hours	5:	
Registered Midwife Sign and Print Nar	ne:			
Midwifery Student Sign and Print Nam	e:			

Placement Area			Midwives Clinic				
Orientation provided			Yes No				
The student has had exposure to, and participated in the provision of care under supervision			Yes No				
Midwifery students are expected to act according to the NMBI(2014) Code of Professional Conduct and Ethics for Midwives at all times.  If the registered midwife wishes to make comment on the students engagement an performance on this short placement, please do so in this box							
Record of Placement hours Date: From:	To:	Total Placement Hours	S:				
Registered Midwife Sign and Print Name:							
Midwifery Student Sign and Print Name:							

Placement Area			Antenatal Education			
Orientation provided			Yes		No	
The student has had exposure to, and participated in the provision of care under supervision			Yes		No	
Midwifery students are expected to act						
according to the NMBI(2014) Code of						
Professional Conduct and Ethics for						
Midwives at all times.						
If the reciptored reidurife wishes to realize						
If the registered midwife wishes to make a						
comment on the students engagement and						
performance on this short placement,						
please do so in this box						
Record of Placement hours	<b>-</b>	T				
Date: From: From:	To: To:	Total Placement Hours	S:			
Registered Midwife Sign and Print Name:	10.					
Registered Flidwire Sign and Frint Name.						
Midwifery Student Sign and Print Name:						

## **Student's Reflection on Practice Placement**

At the end of your Midwifery-Led placement please use this box to document your reflection on the contribution that midwives make to maternity services in Ireland. If you prefer, you may type it up and attach it to this page. (250-500 words)							

Midwitery Student Signature:	
Midwifery Student Signature: Date:	
Date.	

# RECORD OF SHORT PLACEMENT EXPERIENCE

# **GYNAECOLOGY**

Number of weeks in this Practice Placement: One	
Gynaecology Ward dates:	Gynaecology Day Ward date:
Gynaecology Outpatients Dept. date:	
Name of Clinical Co-ordinator:	

#### **Clinical Learning Outcomes for Gynaecology**

The Nursing and Midwifery Board of Ireland (NMBI) Midwife Registration Programme Standards and Requirements (2016) states that: Appropriate support and supervision and clearly defined learning outcomes should be provided for the student in specialist placements.

#### Aim of clinical practice placement:

The aim of the Gynaecology Practice placement is for the student midwife to learn about the care of women with gynaecological conditions under the supervision of a registered midwife or nurse

#### During and by the end of this placement the student midwife should:

- Be familiar with the layout of the department, including the emergency exits
- Know how to activate the emergency response system
- Demonstrate familiarity with the location and content of resuscitation equipment, including adult resuscitation equipment
- Know where emergency blood is stored
- Observe and participate in the care of women attending Outpatients Gynaecology Clinics
- Observe and participate in the admission of a woman to the Gynaecology Ward (name band +/- allergy band if required)
- Observe and participate in the initial assessment and care of women with gynaecological conditions
- Observe and participate in preparing a woman for an operative procedure under general/regional anaesthesia, and completion of the pre-operative checklist
- Become familiar with the commonly used drugs for gynaecology, including drug dosage, route of administration and side effects
- Observe and participate in both pre and post-operative care following gynaecologic procedures e.g.: (list is not exhaustive)
  - Uterine/Bladder/Rectal Prolapse Repair
  - Hysterectomy(vaginal/abdominal/laparoscopic)
  - o EUA/D&C/Laser Eblation/Laparotomy/Laparoscopy to investigate +/- treat e.g. adnexal masses, menorrhagia, infertility
- Observe and participate in the holistic care of a person with early pregnancy loss:
  - o Evacuation of Retained Products of Conception (ERPC)
  - Medical/Surgical treatment for Miscarriage
  - Medical/Surgical treatment for an ectopic pregnancy
  - Medical and Surgical Termination of Pregnancy
- Provides support with the nurse to women and their families who have experienced bereavement
- Observes and participates in the care of a woman pre and post-surgical procedure, including:
  - o Correct use of handling equipment, e.g. Hoover mattress/sliding sheet
  - o Correct handover of woman's care to/from Theatre staff using the Theatre Checklist and ISBAR tool
- Observe and participate in nursing care priorities for a woman admitted with a gynaecological issue, which may include:

- o Recording vital signs and recognising when care must be escalated if any deviations from the norm
- o Assisting woman with personal hygiene needs
- o Pressure area assessment; VTE risk assessment
- Wound care: hygiene & observation, replacing/removing surgical wound dressings; Infection prevention and control considerations
- o Pain Assessment; Pharmacological and non-pharmacological methods of pain relief
- o Intake and Output monitoring; Calculating a 24hour fluid balance
- Observe and participate in discharging a woman following a gynaecology procedure

#### **Professional Values In Practice**

Students are required to demonstrate high standards of professional conduct at all times during their clinical placements. Students should work within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014)

#### Principle 1: Respect for the dignity of the person. The student is able to:

- Respect all people service users equally without discriminating on the grounds of age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental or intellectual) or membership of the Traveller community
- Respect for the service users rights and choices
- Shows respect, kindness, compassion towards the service user and their families

#### Principle 2: Professional responsibility and accountability. The student is able to:

- Promote the level of professionalism expected of a student midwife in relation to punctuality, personal presentation and attitude, in accordance with clinical practice placements and university policies
- Work within the scope of practice for a student midwife and recognises their own level of knowledge, skills and professional behaviours

#### Principle 3: Quality of practice. The student is able to:

- Consistently make efforts to engage in their learning in order to enhance safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence
- Demonstrate the ability to listen, seek clarification and carry out instructions safely

#### Principle 4: Trust and confidentiality. The student is able to:

- Demonstrate honesty and trustworthiness
- Respect the service users right to privacy and confidentiality

#### Principle 5: Collaboration with others. The student is able to:

- Demonstrate that they can communicate clearly and consistently with colleagues, service users and their families.
- Communicate appropriately and effectively with the multidisciplinary team

**Record Of Placement Experience** 

Placement Area			_	Gynaed	cology
Orientated to the clin					
The student and RM/	RN have read and discu	ussed the Clinical Le	arning Outcomes	and Professional Values in	Practice
Date:	Signature o	of RN/RM:	Print n	ame	
The student has had supervision	exposure to, and partic	cipated in the provis	ion of care under	Yes No	
Midwifery students as according to the NME Professional Conduct Midwives at all times If the registered midwa comment on the stand performance on please do so in this be	BI(2014) Code of and Ethics for wife wishes to make udents engagement this short placement,				
Record of Placement	hours		Date:	From:	To:
Date:	From:	To:	Date:	From:	To:
Date:	From:	To:	Date:	From:	То:
Registered Midwife S	ign and Print Name:		1		
Midwifery Student Signature	gn and Print Name:				

# RECORD OF SHORT PLACEMENT EXPERIENCE HIGH DEPENDANCY CARE & CARE OF THE CRITICALLY ILL WOMAN

Practice Placement dates:	
Name of clinical co-ordinator:	

To meet the requirements for this placement you will need to provide evidence that you have achieved the equivalent of two weeks' experience in the provision of care to women in pregnancy, labour, birth or in the postnatal period who have high dependency needs and/or require monitoring or intervention that may include support for a single failing organ (NMBI, 2016).

**Instructions for Students:** You are required to log 60 hours of HDU/critical care cases in your clinical record book as evidence of meeting NMBI requirements as outlined above. You will be scheduled for one week of practice placement in the National Maternity Hospital where you need to complete one 'record of placement experience' page and log cases in your clinical record experience book. You will also log HDU/critical care cases during your core antenatal, intrapartum and postnatal midwifery placements until you reach 60 HDU/critical care episode hours.

To be completed by the midwifery student once requirements have been met:		
Number of Case Log forms completed:	_Total number of HDU/critical care episode hours:	

#### **Learning Outcomes**

- Develop an understanding of the midwives' role in the high dependency / critical care environment
- Recognise indications for transfer to a higher level of care
- Observe and participate in the ongoing assessment and monitoring of a woman requiring high dependency/critical care including
  - assessment of vital signs
  - o assessment of fluid balance including blood loss and drain output
  - wound care
  - bladder care
- Care of central venous pressure (CVP) lines and arterial lines
- Care of a woman undergoing a blood transfusion
- Identify the additional monitoring that may be prescribed for a woman requiring level one, two and three care e.g. central venous pressure (CVP) line, arterial line, telemetry
- Observes the handling of blood specimens ordered including taking the samples, completing blood forms, dispatch of samples and timely following up of the results e.g. haematology, biochemistry, arterial blood gas
- · Observes and participates in the assessment and management of pain and observes the administration of analgesia
- Develop an understanding of the psychological and emotional care that midwives provide to women and their families who
  require high dependency/critical care
- Participate in the assessment of fetal wellbeing where appropriate including assessment of: fetal heart rate, CTG interpretation and fetal movement pattern
- Observes and participates in the promotion of maternal infant attachment in a critical care setting
- Observe and participate with the midwife/nurse in recognising changes in the woman's condition or that of the fetus that require referral and further assessment/management
- Adheres to infection prevention and control procedures in HDU
- Participate in the transfer of a woman and baby to/from HDU and participate in clinical handover of care
- Participate with other members of the multidisciplinary team in caring for the woman with high-dependency/critical care needs

#### **Professional Values In Practice**

Students are required to demonstrate high standards of professional conduct at all times during their clinical placements. Students should work within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014)

#### Principle 1: Respect for the dignity of the person. The student is able to:

- Respect all people service users equally without discriminating on the grounds of age, gender, race, religion, civil status, family status, sexual orientation, disability (physical, mental or intellectual) or membership of the Traveller community
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- Work within the scope of practice for a student midwife and recognises their own level of knowledge, skills and professional behaviours

#### **Principle 3: Quality of practice. The student is able to:**

- Consistently make efforts to engage in their learning in order to enhance safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence
- Demonstrate the ability to listen, seek clarification and carry out instructions safely

#### Principle 4: Trust and confidentiality. The student is able to:

- Demonstrate honesty and trustworthiness
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#### **Principle 5: Collaboration with others. The student is able to:**

- Demonstrate that they can communicate clearly and consistently with colleagues, service users and their families.
- Communicate appropriately and effectively with the multidisciplinary team

**Record of Placement Experience** 

Placement Area			•		
Orientated to the clinical area? Yes No	?				
The student and RM/RN have	read and disc	ussed the Clinical Learn	ing Outcomes 🔲 an	d Professional Values i	n Practice 🗌
Date:	Signature o	of RN/RM:	Print nam	ne	
The student has had exposure supervision	to, and partic	cipated in the provision	of care under	Yes No	
Midwifery students are expected according to the NMBI (2021) Professional Conduct and Ethic Midwives at all times.  If the registered midwife wished a comment on the students error and performance on this short please do so in this box	Code of cs for es to make ngagement				
Record of Placement hours			Date:	From:	То:
Date:	From:	To:	Date:	From:	To:
Date:	From:	To:	Date:	From:	To:
Registered Midwife/Nurse Sign	and Print Na	me:	1		
Midwifery Student Sign and Pr	int Name:				

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

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

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

#### RECORD OF TEACHING/DISCUSSION SESSIONS ATTENDED

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

	T
Teaching/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above teaching/discussion session:	Date:
C'anathana a Chadan Midai Ca	
Signature of Student Midwife:	
Teaching/Discussion Session Title/Topic:	Given By:
	,
I confirm that I have attended the above teaching/discussion session:	Date:
Signature of Student Midwife:	
Teaching/Discussion Session Title/Topic:	Given By:
reaching/biscussion Session Title/Topic.	Given by:
I confirm that I have attended the above teaching/discussion session:	Date:
Signature of Student Midwife:	

#### MCAT SUMMARY SHEET - PERSONAL TUTOR PROGRESS REVIEW

Full Student Name:	Student Collec	ge ID Number:
Neonatal Unit	Clinical Midwifery Specialist &	Theatre and Recovery
Module Code:	Advanced Midwife Practitioner  Module Code:	Module Code:
Pass Fail	Complete Incomplete Clinical Time complete:	Complete Incomplete
Clinical Time complete:		Clinical Time complete:
Yes: No:	Yes: No: L	Yes: No:
If <b>`No'</b> hours outstanding:	If <b>'No'</b> hours outstanding:	If <b>'No'</b> hours outstanding:
Midwifery-Led Care	Gynaecology	High Dependency Care & Care of the Critically Ill
Module Code:	Module Code:	Woman Module Code:
Complete Incomplete	Complete Incomplete	Complete Incomplete
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 'No' 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**



#### **HIGHER DIPLOMA IN MIDWIFERY PROGRAMME**

This protocol pertains to the following events:

- (a) When a HDM student is having significant difficulties in meeting standards during a clinical 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 midwifery clinical assessment tool (MCAT) requirements during clinical placements. The specific needs of each student will be considered on an individual basis. This protocol will be enacted when a student fails to meet the required standards in an assessment (MCAT) on an individual placement.

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

There are 5 clinical placement modules integral to this programme- Clinical Practice A (5 credits), Clinical Practice B (10 credits), Clinical Practice C (15 credits), Clinical Practice D (15 credits) and Supportive & 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 and 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 Delivery and Postnatal care in order to successfully complete each module. A MCAT document is utilised for each placement, and the student must submit the 3 successfully completed MCAT documents to pass the module and to progress on the programme.

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

#### **Enactment of Protocol**

This protocol will be enacted when a student has significant difficulties in meeting standards during a clinical placement and outlines the events that should follow when a student fails to meet the required standards and competencies in the final assessment (MCAT).

The following actions should occur to assist the student in meeting the required standards in any MCAT assessment while on any individual clinical 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 clinical 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 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

#### Step 2

#### **Intermediate Interview 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 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 student midwife may request the presence of the clinical co-ordinator and/or personal tutor at the intermediate interview. The clinical co-ordinator and/or personal tutor may decide to attend this meeting at their own discretion.

Students experiencing significant difficulties on clinical placements where an intermediate interview is not scheduled (clinical placements of three weeks or less) must have a formal intermediate interview organised. The steps pertaining to a formal intermediate interview and intermediate learning plan will apply.

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. This can be documented briefly giving dates and a description of the support offered.

# Step 3 Final Interview.

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 e-mail.

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

A record of the how the student has not met the standards will be documented in detail by the preceptor/co-preceptor in the MCAT. This record must clearly identify the competencies which 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' Clinical 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 two weeks of the end of the placement).

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 clinical 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 clinical placement will be of the same duration as the original clinical placement or a four-week placement may be agreed at the discretion of the preceptor, clinical co-ordinator 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' clinical placement, it is mandatory that the student presents their 'final learning plan' to their new preceptor so that they can avail of the required support.
- If the subsequent clinical placement is not the 'repeat clinical 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 competencies are pertinent across all clinical 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 their personal tutor on the designated date.

The student contacts the clinical co-ordinator to arrange a date for a repeat clinical placement, which will be the second and final opportunity to repeat the clinical module.

Normally students are offered a repeat clinical 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.

#### Step 6

#### Repeat (and final) Clinical Placement

The student is offered a second and final opportunity to repeat the clinical placement/module. A new MCAT is provided. This clinical placement will be of the same duration as the original clinical placement or a 4-week placement may be agreed at the discretion of the preceptor, clinical co-ordinator 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 level as the original MCAT.

As early as is convenient on the repeat clinical placement, the student and new preceptor will hold a preliminary meeting with the student. The clinical co-ordinator will attend this meeting if requested by the preceptor or student or at their own discretion. During this meeting the student must present the 'final learning plan' to their 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 clinical 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 meeting 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 of the clinical site and through application to the Programme Board.

	Description of Outcomes		
Outcome	Description		
PASS (P)	MCAT standards have been achieved. The student is required to complete outstanding clinical time before completing the programme.		
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 CIRCUMSTANCES (IX)	MCAT standards have not been achieved and time is outstanding due to extenuating circumstances (See current policy document on extenuating circumstances: <a href="https://www.ucd.ie/ahss/formsandpolicies/extenuatingcircumstances/">https://www.ucd.ie/ahss/formsandpolicies/extenuatingcircumstances/</a> 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 clinical 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).		

#### **General note**

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

Approved	Date
Director of Undergraduate Clinical Studies	19 <sup>th</sup> June 2019
Associate Dean for Undergraduate Programmes	19 <sup>th</sup> June 2019
Approved Programme Board (Chair)	19 <sup>th</sup> June 2019



# 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 clinical placements. It is the student's responsibility to ensure that they have their standards signed after completion of their clinical 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 clinical 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 CIRCUMSTANCES (IX)	MCAT standards have not been achieved and time is outstanding due to extenuating circumstances (See current policy document on extenuating circumstances: <a href="https://www.ucd.ie/ahss/formsandpolicies/extenuatingcircumstances/">https://www.ucd.ie/ahss/formsandpolicies/extenuatingcircumstances/</a> 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 clinical 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).



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

These guidelines outline the principles and procedures agreed by UCD School of Nursing, Midwifery and Health Systems (UCD SNMHS) and partner hospitals 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 Clinical 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.

Stage = Year CASC OCT 2019