



NATIONAL STUDENT MIDWIFE COMPETENCY ASSESSMENT TOOL

Close Supervision Placement Higher Diploma Midwifery



Full Student Name (as per NMBI Register):

Student College ID number:

Date/Year Commenced Programme:

Personal Tutor:

**UCD SCHOOL OF NURSING, MIDWIFERY
& HEALTH SYSTEMS**

Scoil na hAltrachta, an Cnáimhseachais agus
na gCoras Slainte

In partnership with the
National Maternity Hospital



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

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SIGNATURE BANK

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

Print Name	Signature	Designation	NMBI Pin

Print Name	Signature	Designation	NMBI Pin

INSTRUCTIONS FOR USE

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

PLEASE READ AND SIGN

It is my responsibility to ensure that I have the correct documentation prior to going on practice placements i.e. MCAT document and clinical experience record book.

I will carry this document with me at all times while on practice placements.

It is my responsibility to ensure that the preceptor/co-preceptor signs the Signature Bank before signing the document.

It is my responsibility to ensure that I have arranged a date for an initial interview.

It is my responsibility to ensure that I have arranged a date for an intermediate interview 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.

It is my responsibility to seek feedback on my progress throughout the placement.

It is my responsibility to act in accordance with local policies and guidelines (e.g. uniform policy).

It is my responsibility to have all documentation signed off within two weeks of completing clinical time.

I understand that **100% attendance** is required on all practice placements.

I have read and understand the above instructions.

Signature of Student: _____

Date: _____

SUPPORT WHILST ON PRACTICE PLACEMENT

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

Clinical Supports:

Preceptor/Associate preceptor

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

Clinical Co-Ordinator:

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

Name of Clinical Co-Ordinator:	Contact Details:
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Chaplain

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

Employee Assistance Programme (EAP)

This is a free and confidential service available to all staff. As employees of the hospital this includes Higher Diploma Midwifery (HDM) students.

Contact details: Free phone 1800 995 955. Email: eap@vhics.ie

UCD SNMHS Supports:

Personal Tutor

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

Name of Personal Tutor:	Contact Details:
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Clinical Midwifery Tutor

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

Name of Midwifery Tutor:	Contact Details:
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Student Advisor

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

Name of Student Advisor:	Contact Details:
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Introduction to the Competence Assessment Tool and Placement Records

This document contains the Midwifery Competence Assessment Tool (MCAT) for the Higher Diploma in Midwifery 'close supervision' practice placement and guidance for its use. The MCAT and guidance document is adapted from the BSc Midwifery Year 2 MCAT which was developed by the Nursing and Midwifery Board of Ireland (NMBI) in consultation with the relevant Higher Education Institutes (HEIs) and associated Health Service Providers (HSPs).

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

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

- Academic Regulations and Procedures of the relevant HEI

and

- Any specific guidance provided by the midwifery team within the HEI or the Midwifery Practice Development team responsible for the programme. The student and the Preceptor/Co-preceptor must be familiar with her/his individual roles and responsibilities, as outlined below, and with the processes and procedures associated with the assessment of competence and the documenting of these in the MCAT.

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

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

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

Assessment of Competence in the Midwife Registration Programme

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

The five competencies represent a broad enabling framework to facilitate the assessment of students' clinical practice, with the emphasis on a holistic assessment of knowledge, skills and professional behaviours expected of a midwife. Each competence has a series of assessment criteria that are specific to each phase of the Midwife Registration programme, and outline what is expected of the student in core clinical midwifery placements. This facilitates incremental progression of the student under a spectrum of supervision, beginning with **Direct Supervision** and culminating in **Distant Supervision**. The level of supervision expected for each level is stipulated by the NMBI (2016) 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.

Level and Description of Supervision	Scope of Practice
<p>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.</p>	<p>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.</p>

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

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

Guidance on the Assessment of Competence Process

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

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

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

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

Initial interview

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

Intermediate interview *(Please note: Normally, an intermediate interview is not required for a two-week practice placement. See UCD Protocol for unsuccessful practice 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 practice placement to:

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

Final interview

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

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

Assessment of the student includes:

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

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

Where there are concerns in relation to the student's progress, the Preceptor/Co-preceptor, in consultation with the student, should liaise with the Clinical Coordinator in Midwifery, and a learning plan must be put in place to support the student to successfully complete the relevant competence/competencies over the remaining time of the practice placement. 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 practice placement.
- Explicit in detailing what the student must do to successfully complete the assessment of competence.
- Communicated to the Personal Tutor supporting the practice placement area as appropriate.

Procedure when a student is unsuccessful in attaining competence

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

The written final learning plan must:

- Provide specific guidance to both the student and Preceptor/Co-preceptor on what is required to successfully complete the assessment of competence on the second attempt.
- The written 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*) practice placement to repeat the complete assessment. Procedures specific to each HEI in relation to a failed assessment of competence such as informing the relevant personnel in the HEI and arrangement of practice placement to facilitate reassessment will be provided locally by the HEI and must be adhered to (see appendix).

The Role and Responsibilities of the Midwifery Student

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

The Role and Responsibilities of the Preceptor/Co-preceptor

- The Preceptor/Co-preceptor must be a Registered Midwife on the Register of Midwives maintained by the NMBI and have completed a teaching and assessment programme.
- The Preceptor/Co-preceptor acts as a gatekeeper to the profession, ensuring professional standards within midwifery are maintained.
- The Preceptor/Co-preceptor acts as a role model demonstrating evidence-based midwifery care and assists the student to develop the inter-personal, technical, reflective and analytical skills that underpin midwifery care.

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

ANTENATAL

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

Principle 1: Respect for the Dignity of the Person			
Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
1.1 Participates with the midwife in recognising pregnancy and childbirth as a healthy and normal physiological event and a profound event in a woman's life and provides a rationale for this.	<ul style="list-style-type: none"> Discusses how the physiological changes of pregnancy and childbirth may impact on the woman in her daily life. Discusses possible interventions to address problems linked with these physiological changes, providing rationale for same. 		
1.2 Participates with the midwife in advocating on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth and provides a rationale for this.	<ul style="list-style-type: none"> Explains all procedures to the woman, gains consent before carrying them out and provides an underpinning rationale for same. Demonstrates an awareness of the options and choices of maternity care available to women in Ireland. 		
1.3 Participates with the midwife in respecting the diversity of women and their families including their beliefs, values, choices and priorities and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates care that is sensitive to women and their families' cultural and religious beliefs. 		
1.4 Participates with the midwife in providing sufficient evidence-based information to the women to empower them to make informed decisions about her care and that of their baby and provides a rationale for this.	<ul style="list-style-type: none"> Discusses some of the policies/guidelines relevant to current area of practice. Uses appropriate verbal and non-verbal communication skills when providing evidence-based information to women. Supports and empowers women to make decisions regarding their own or their baby's care. 		

Principle 2: Professional Responsibility and Accountability			
Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)			
CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Participates with the midwife 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.	<ul style="list-style-type: none"> Has knowledge of the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021). Has knowledge of the Practice Standards for Midwives (NMBI 2022). Displays knowledge of local policies, protocols and guidelines that guide midwifery care. 		
2.2 Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> Practises within own scope of midwifery practice. Discusses how to be accountable for own professional practice, as a student midwife. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.1 Participates with the midwife in the provision of safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.	<ul style="list-style-type: none"> • Participates in all aspects of care • Observes complex care. • Seeks and recognises women's preferences and support their choices for care. 		
3.2 Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment. 		
3.3 Participates with the midwife in recognising and responding appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/or other healthcare professional during a woman's pregnancy and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in recognising clinical signs and symptoms that may be associated with complications. • Participates with the midwife in monitoring and recording vital signs including pain assessment and emotional wellbeing. • Provides rationale for the monitoring being carried out and explains findings. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.4 Participates with the midwife in recognising factors during pregnancy that indicates deterioration of the woman and acts appropriately to escalate the level of care and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in assessing and recording clinical findings and can explain when the level of care may need to be escalated. Participates with the midwife in undertaking fetal monitoring techniques and can recognise/explain a normal fetal heart rate. 		
3.5 Participates with the midwife in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and provides a rationale for this.	<ul style="list-style-type: none"> Has knowledge of the emergency clinical procedures appropriate to the area. 		
3.6 Participates with the midwife in supporting and educating women with infant-feeding practices, which include protecting promoting and supporting breastfeeding and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in educating and supporting women in relation to infant feeding practices. 		
3.7 Participates with the midwife in complying with standard universal infection prevention and control measures and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates knowledge and safe practice in regard to standard universal infection prevention and control measures. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.8 Participates with the midwife 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.	<ul style="list-style-type: none"> Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately. Explains the importance of monitoring the actions and side-effects of the medication administered. Has knowledge of medication management legislation and guidance. 		
3.9 Participates with the midwife in reflecting on their own practice, can demonstrate learning from previous experience in midwifery and can identify future learning needs and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in reflecting on their practice and can demonstrate learning from previous experience. Identifies future learning needs, providing a rationale for same. 		
3.10 Participates with the midwife in the appropriate use of national and local guidelines and policies in the provision of evidence-based care and provides a rationale for this.	<ul style="list-style-type: none"> Identifies and discusses with the midwife one national/local key guideline/policy document appropriate to the clinical area and its relevance to care. 		
3.11 Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.12 Participates with the midwife in applying clinical risk-management processes into their own practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying potential clinical risk situations and discusses risk-management processes, providing rationale for same. 		
3.13 Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this. 		
3.14 Demonstrates a willingness to learn from women, preceptors, midwives and colleagues and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates a willingness to learn from women, Preceptors, midwives and colleagues giving examples of learning opportunities in practice. 		

Principle 4: Trust and Confidentiality			
Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality			
			Preceptor Date & Sign
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Pass	Fail
4.1 Participates with the midwife in ensuring that the women are the primary focus of practice and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner. • Includes the woman in plan of care and decision making and obtains informed consent when providing midwifery care. 		
4.2 Participates with the midwife in providing care that is safe, evidence-based, supportive, responsive and compassionate, taking into account the needs of the woman and her family and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in providing midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family. 		
4.3 Participates with the midwife in respecting the woman's right to privacy and confidentiality and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates awareness of the importance of confidentiality, privacy and safeguarding of women's medical records in line with legislation and guidelines. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.1 Participates with the midwife in providing information in a format that is understandable and accessible to all women and their families and provides a rationale for this.	<ul style="list-style-type: none"> Participates in sharing information that is clear and accurate, at a level that women and their families can understand. Listens and communicates with women and their families in a manner that is kind, caring and compassionate. 		
5.2 Participates with the midwife in communicating appropriately and effectively with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Communicates effectively with women, their families and members of the multidisciplinary healthcare team, using professional language. Participates with the midwife in clinical handover and is able to give the rationale for the care provided. 		
5.3 Participates with the midwife in recognising and taking appropriate actions to challenge and reduce barriers to effective communication with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Discusses, with the midwife, the various facilitators and barriers to effective communication. 		
5.4 Participates with the midwife in collaborating with women, the women's families and other healthcare professionals using appropriate communication tools as determined by the needs of the woman to ensure timely referral to the appropriate healthcare professional and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife and other healthcare professionals to build professional caring relationships using appropriate communication tools. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.5 Participates with the midwife in recording clinical practice in a manner which is clear, objective, accurate and timely and provides rationale for this.	<ul style="list-style-type: none"> Participates in documenting care in a clear, concise and accurate manner in healthcare records. Can explain the importance of record keeping in midwifery practice. 		
5.6 Participates with the midwife in addressing differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and provides a rationale for this	<ul style="list-style-type: none"> Participates with the midwife in discussions regarding midwifery care with other members of multidisciplinary team. Respects the professional opinions of others and recognises their right to hold and express their views. 		

'CLOSE SUPERVISION' PLACEMENT: ASSESSMENT OF ESSENTIAL ANTENATAL SKILLS & KNOWLEDGE
ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE PRACTICE PLACEMENT

ESSENTIAL SKILLS	Student Self -assessment Date & Sign	Midwife Date & Sign
Performs abdominal palpation and demonstrates the ability to: <ul style="list-style-type: none"> Assess symphysis fundal height measurement and gestational age (using tape measure) Participate in the assessment of lie, presentation, position, degree of engagement of presenting part 		
Demonstrates the ability to assess fetal wellbeing: <ul style="list-style-type: none"> Assess history and pattern of fetal movement Can assess the status of membranes and if membranes have ruptured, make appropriate assessment in terms of time, colour, amount, odour of liquor Auscultate the fetal heart rate using the pinard stethoscope and handheld doppler, and can recognise normal patterns Can identify some indications for cardiotocography (CTG) and apply it appropriately Interprets cardiotographs (CTG) using a systematic approach and can recognise a normal CTG 		
Participates under supervision in the preparation, calculation and safe administration of oral medication		
Participates in the preparation of an intravenous infusion under supervision		

INITIAL INTERVIEW

Orientated to the clinical area			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Review and discussion of Principles, Assessment Criteria and Essential Skills:			Student:	<input type="checkbox"/>	Preceptor:	<input type="checkbox"/>
Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice placement:						
Signature of Preceptor/Co-preceptor:			Signature of Student Midwife:			Date:
Date set for final interview:			Clinical Co-ordinator Present if applicable: Yes <input type="checkbox"/> No <input type="checkbox"/>			
			Signature of Clinical Co-ordinator:			Date:
Comments (where appropriate):						Date:
Signature:						

INTERMEDIATE INTERVIEW

(not normally required for a 2-week placement, see appendices for details of when an intermediate interview 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 <input type="checkbox"/> No <input type="checkbox"/> <i>If No please complete Intermediate Development Plan</i> Date of Final interview:	Clinical Co-ordinator Present if applicable: Yes <input type="checkbox"/> No <input type="checkbox"/> Signature of Clinical Co-ordinator: _____ Date: _____	
Comments (where appropriate): Signature:		Date:

INTERMEDIATE LEARNING PLAN

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

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

INTERMEDIATE LEARNING PLAN-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

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

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

FOLLOW UP/FEEDBACK

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

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

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

RECORD OF ADDITIONAL CLINICAL SKILLS

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

Date	Clinical Skill	Signature of Preceptor/Midwife

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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

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: Pass <input style="width: 30px; height: 20px;" type="checkbox"/> Fail <input style="width: 30px; height: 20px;" type="checkbox"/>	All Essential Skills List completed: Yes <input style="width: 30px; height: 20px;" type="checkbox"/> No <input style="width: 30px; height: 20px;" type="checkbox"/>	Date:
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
If the student has not attained the required Principles, Assessment Criteria and Essential Skills for this placement, the Preceptor/Co-Preceptor will document in detail each Principle, Assessment Criteria and Essential Skills not attained. The Preceptor/Co-Preceptor should enact Step 3 of the protocol "When a HDM student is having significant difficulties in meeting competencies during a practice placement".		

FINAL INTERVIEW CONTINUED

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

LABOUR AND BIRTH

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

Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
1.1 Participates with the midwife in recognising pregnancy and childbirth as a healthy and normal physiological event and a profound event in a woman's life and provides a rationale for this.	<ul style="list-style-type: none"> Discusses how the physiological changes of pregnancy and childbirth may impact on the woman in her daily life. Discusses possible interventions to address problems linked with these physiological changes, providing rationale for same. 		
1.2 Participates with the midwife in advocating on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth and provides a rationale for this.	<ul style="list-style-type: none"> Explains all procedures to the woman, gains consent before carrying them out and provides an underpinning rationale for same. Demonstrates an awareness of the options and choices of maternity care available to women in Ireland. 		
1.3 Participates with the midwife in respecting the diversity of women and their families including their beliefs, values, choices and priorities and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates care that is sensitive to women and their families' cultural and religious beliefs. 		
1.4 Participates with the midwife in providing sufficient evidence-based information to the women to empower them to make informed decisions about her care and that of their baby and provides a rationale for this.	<ul style="list-style-type: none"> Discusses some of the policies/guidelines relevant to current area of practice. Uses appropriate verbal and non-verbal communication skills when providing evidence-based information to women. Supports and empowers women to make decisions regarding their own or their baby's care. 		

Principle 2: Professional Responsibility and Accountability			
Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)			
CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Participates with the midwife 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.	<ul style="list-style-type: none"> Has knowledge of the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021). Has knowledge of the Practice Standards for Midwives (NMBI 2022). Displays knowledge of local policies, protocols and guidelines that guide midwifery care. 		
2.2 Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> Practises within own scope of midwifery practice. Discusses how to be accountable for own professional practice, as a student midwife. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.1 Participates with the midwife in the provision of safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.	<ul style="list-style-type: none"> • Participates in all aspects of care • Observes complex care. • Seeks and recognises women's preferences and support their choices for care. 		
3.2 Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment. 		
3.3 Participates with the midwife in recognising and responding appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/or other healthcare professional during a woman's pregnancy, labour and birth and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in recognising clinical signs and symptoms that may be associated with complications. • Participates with the midwife in monitoring and recording vital signs including pain assessment and emotional wellbeing. • Provides rationale for the monitoring being carried out and explains findings. 		
3.4 Participates with the midwife in recognising factors during pregnancy, labour and birth that indicates deterioration of the woman and/or baby and acts appropriately to escalate the level of care and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in assessing and recording clinical findings and can explain when the level of care may need to be escalated. • Participates with the midwife in undertaking fetal monitoring techniques and can recognise/explain a normal fetal heart rate. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.5 Participates with the midwife in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and/or her baby and provides a rationale for this.	<ul style="list-style-type: none"> Has knowledge of the emergency clinical procedures appropriate to the area. 		
3.6 Participates with the midwife in supporting and educating women with infant-feeding practices, which include protecting promoting and supporting breastfeeding and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in educating and supporting women in relation to infant feeding practices. Recognises and explains signs of normal infant feeding patterns. 		
3.7 Participates with the midwife in complying with standard universal infection prevention and control measures and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates knowledge and safe practice in regard to standard universal infection prevention and control measures. 		
3.8 Participates with the midwife 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.	<ul style="list-style-type: none"> Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately. Explains the importance of monitoring the actions and side-effects of the medication administered. Has knowledge of medication management legislation and guidance. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.9 Participates with the midwife in reflecting on their own practice, can demonstrate learning from previous experience in midwifery and can identify future learning needs and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in reflecting on their practice and can demonstrate learning from previous experience. Identifies future learning needs, providing a rationale for same. 		
3.10 Participates with the midwife in the appropriate use of national and local guidelines and policies in the provision of evidence-based care and provides a rationale for this.	<ul style="list-style-type: none"> Identifies and discusses with the midwife one national/local key guideline/policy document appropriate to the clinical area and its relevance to care. 		
3.11 Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this. 		
3.12 Participates with the midwife in applying clinical risk-management processes into their own practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying potential clinical risk situations and discusses risk-management processes, providing rationale for same. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.13 Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this. 		
3.14 Demonstrates a willingness to learn from women, preceptors, midwives and colleagues and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates a willingness to learn from women, Preceptors, midwives and colleagues giving examples of learning opportunities in practice. 		

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			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
4.1 Participates with the midwife in ensuring that the woman and her baby are the primary focus of practice and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner. • Includes the woman in plan of care and decision making and obtains informed consent when providing midwifery care. 		
4.2 Participates with the midwife in providing care that is safe, evidence-based, supportive, responsive and compassionate, taking into account the needs of the woman, her baby and her family and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in providing midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family. 		
4.3 Participates with the midwife in respecting the woman's right to privacy and confidentiality and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates awareness of the importance of confidentiality, privacy and safeguarding of women's medical records in line with legislation and guidelines. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.1 Participates with the midwife in providing information in a format that is understandable and accessible to all women and their families and provides a rationale for this.	<ul style="list-style-type: none"> Participates in sharing information that is clear and accurate, at a level that women and their families can understand. Listens and communicates with women and their families in a manner that is kind, caring and compassionate. 		
5.2 Participates with the midwife in communicating appropriately and effectively with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Communicates effectively with women, their families and members of the multidisciplinary healthcare team, using professional language. Participates with the midwife in clinical handover and is able to give the rationale for the care provided. 		
5.3 Participates with the midwife in recognising and taking appropriate actions to challenge and reduce barriers to effective communication with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Discusses, with the midwife, the various facilitators and barriers to effective communication. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.4 Participates with the midwife in collaborating with women, the women's families and other healthcare professionals using appropriate communication tools as determined by the needs of the woman and/or her baby to ensure timely referral to the appropriate healthcare professional and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife and other healthcare professionals to build professional caring relationships using appropriate communication tools. 		
5.5 Participates with the midwife in recording clinical practice in a manner which is clear, objective, accurate and timely and provides rationale for this.	<ul style="list-style-type: none"> Participates in documenting care in a clear, concise and accurate manner in healthcare records. Can explain the importance of record keeping in midwifery practice. 		
5.6 Participates with the midwife in addressing differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and provides a rationale for this	<ul style="list-style-type: none"> Participates with the midwife in discussions regarding midwifery care with other members of multidisciplinary team. Respects the professional opinions of others and recognises their right to hold and express their views. 		

'CLOSE SUPERVISION PLACEMENT: ASSESSMENT of ESSENTIAL LABOUR and BIRTH SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self - assessment Date & Sign	Midwife Date & Sign
Demonstrates the ability to assess fetal wellbeing: <ul style="list-style-type: none"> Assess history and pattern of fetal movement Can assess the status of membranes and if membranes have ruptured, make appropriate assessment in terms of time, colour, amount, odour of liquor Auscultate the fetal heart rate using the pinard stethoscope and handheld doppler, and can recognise normal patterns Can identify some indications for cardiotocography (CTG) and apply it appropriately Interprets cardiographs (CTG) using a systematic approach (RCPI 2014) and can recognise a normal CTG 		
Demonstrates the ability to apply and perform the principles of aseptic technique <ul style="list-style-type: none"> Can safely and effectively perform urinary catheterisation using aseptic technique 		
Participates in the provision of care and support to women who choose non- pharmacological methods of pain relief and participates in the provision of care to women who choose to labour and birth in different positions. Identify some maternal positions used: 1) 2) 3)		
Participates in the assessment of progress of labour using observations such as: <ul style="list-style-type: none"> Changes in behaviour Abdominal palpation to assess lie, presentation, position, degree of engagement Assessment of uterine contractions for frequency, strength and duration Vaginal examination, where appropriate, with the woman's consent 		
Can prepare an appropriate environment ready for birth: <ul style="list-style-type: none"> Birthing room Birthing Trolley Emergency equipment (including Neonatal Resuscitaire) 		

'CLOSE SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL LABOUR AND BIRTH SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self - assessment Date & Sign	Midwife Date & Sign
Assists the woman in birthing her baby by providing emotional and physical support as appropriate and participates in the use of appropriate techniques to minimise perineal trauma		
Participates in the assessment and care of the woman during the third stage of labour using: <ul style="list-style-type: none"> • Physiological management (if not demonstrated, can discuss) • Active Management <ul style="list-style-type: none"> ○ Participates under supervision in the preparation, calculation and safe administration of intramuscular injections 		
Demonstrates the ability to examine the placenta and membranes and demonstrates how to dispose of the placenta appropriately		
Participates with the midwife in the inspection of the genital tract after birth		
Participates in the provision of care to the newborn following birth: <ul style="list-style-type: none"> • Assesses transition to extrauterine life by assessing respiratory effort, colour, tone and response to stimuli • Participates under supervision in the initial steps of neonatal resuscitation as indicated (or can discuss the initial steps of NRP) • Dries the infant quickly to prevent heat loss and assists with the promotion and initiation of early skin to skin contact • Assesses and records APGAR score with the preceptor • Employs the correct procedures for application of identification bands and the electronic security tag • Participates in the initial head to toe examination of the newborn • Participates under supervision in the preparation and administration of vitamin K to the newborn via oral or intramuscular injection following the woman's informed consent 		

INITIAL INTERVIEW

Orientated to the clinical area Yes <input type="checkbox"/> No <input type="checkbox"/>		
Review and discussion of Principles, Assessment Criteria and Essential Skills: Student: <input type="checkbox"/> Preceptor: <input type="checkbox"/>		
Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice placement:		
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Date set for final interview:	Clinical Co-ordinator Present if applicable: Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Signature of Clinical Co-ordinator:	Date:
Comments (where appropriate): Signature:		Date:

INTERMEDIATE INTERVIEW

(not normally required for a 2-week placement, see appendices for details of when an intermediate interview 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 <input type="checkbox"/> <i>If No please complete Intermediate Development Plan</i> Date of Final interview:	Clinical Co-ordinator Present if applicable: Yes <input type="checkbox"/> No <input type="checkbox"/> Signature of Clinical Co-ordinator: _____ Date: _____	
Comments (where appropriate): Signature:		Date:

INTERMEDIATE LEARNING PLAN

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

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

INTERMEDIATE LEARNING PLAN

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

FOLLOW UP/FEEDBACK

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

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

FOLLOW UP/FEEDBACK

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

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

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

RECORD OF ADDITIONAL CLINICAL SKILLS

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

Date	Clinical Skill	Signature of Preceptor/Midwife

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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: Pass <input style="width: 30px; height: 20px;" type="checkbox"/> Fail <input style="width: 30px; height: 20px;" type="checkbox"/>	All Essential Skills List completed: Yes <input style="width: 30px; height: 20px;" type="checkbox"/> No <input style="width: 30px; height: 20px;" type="checkbox"/>	Date:
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
<ul style="list-style-type: none"> If the student has not attained the required Principles, Assessment Criteria and Essential Skills for this placement, the Preceptor/Co-Preceptor will document in detail each Principle, Assessment Criteria and Essential Skills not attained. The Preceptor/Co-Preceptor should enact Step 3 of the protocol "When a HDM student is having significant difficulties in meeting competencies during a practice placement". 		

FINAL INTERVIEW CONTINUED

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

POSTNATAL

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

Principle 1: Respect for the Dignity of the Person			
Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
1.1 Participates with the midwife in recognising pregnancy and childbirth as a healthy and normal physiological event and a profound event in a woman's life and provides a rationale for this.	<ul style="list-style-type: none"> Discusses how the physiological changes of pregnancy and childbirth may impact on the woman in her daily life. Discusses possible interventions to address problems linked with these physiological changes, providing rationale for same. 		
1.2 Participates with the midwife in advocating on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth and provides a rationale for this.	<ul style="list-style-type: none"> Explains all procedures to the woman, gains consent before carrying them out and provides an underpinning rationale for same. Demonstrates an awareness of the options and choices of maternity care available to women in Ireland. 		
1.3 Participates with the midwife in respecting the diversity of women and their families including their beliefs, values, choices and priorities and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates care that is sensitive to women and their families' cultural and religious beliefs. 		
1.4 Participates with the midwife in providing sufficient evidence-based information to the women to empower them to make informed decisions about her care and that of their baby and provides a rationale for this.	<ul style="list-style-type: none"> Discusses some of the policies/guidelines relevant to current area of practice. Uses appropriate verbal and non-verbal communication skills when providing evidence-based information to women. Supports and empowers women to make decisions regarding their own or their baby's care. 		

Principle 2: Professional Responsibility and Accountability			
Competency 2: The midwife practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by Midwifery Board of Ireland (NMBI)			
CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Participates with the midwife 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.	<ul style="list-style-type: none"> Has knowledge of the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2021). Has knowledge of the Practice Standards for Midwives (NMBI 2022). Displays knowledge of local policies, protocols and guidelines that guide midwifery care. 		
2.2 Works within the scope of practice for a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> Practises within own scope of midwifery practice. Discusses how to be accountable for own professional practice, as a student midwife. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.1 Participates with the midwife in the provision of safe, competent, kind, compassionate and respectful professional care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.	<ul style="list-style-type: none"> Participates in all aspects of care Observes complex care. Seeks and recognises women's preferences and support their choices for care. 		
3.2 Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for women during the postnatal period, and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment. 		
3.3 Participates with the midwife in recognising and responding appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and/or other healthcare professional during the postnatal period, and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in recognising clinical signs and symptoms that may be associated with complications. Participates with the midwife in monitoring and recording vital signs including pain assessment and emotional wellbeing. Provides rationale for the monitoring being carried out and explains findings. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.4 Participates with the midwife in recognising factors during the postnatal period that indicates deterioration of the woman and/or baby and acts appropriately to escalate the level of care and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in assessing and recording clinical findings and can explain when the level of care may need to be escalated. 		
3.5 Participates with the midwife in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the woman and/or her baby and provides a rationale for this.	<ul style="list-style-type: none"> Has knowledge of the emergency clinical procedures appropriate to the area. 		
3.6 Participates with the midwife in supporting and educating women with infant-feeding practices, which include protecting promoting and supporting breastfeeding and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in educating and supporting women in relation to infant feeding practices. Recognises and explains signs of normal infant feeding patterns. 		
3.7 Participates with the midwife in complying with standard universal infection prevention and control measures and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates knowledge and safe practice in regard to standard universal infection prevention and control measures. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.8 Participates with the midwife 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.	<ul style="list-style-type: none"> Participates with the midwife in the safe management of drug administration, monitoring the effects and documenting appropriately. Explains the importance of monitoring the actions and side-effects of the medication administered. Has knowledge of medication management legislation and guidance. 		
3.9 Participates with the midwife in reflecting on their own practice, can demonstrate learning from previous experience in midwifery and can identify future learning needs and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in reflecting on their practice and can demonstrate learning from previous experience. Identifies future learning needs, providing a rationale for same. 		

Principle 3: Quality of Practice			
Competency 3: The midwife uses comprehensive knowledge skills and professional behaviours to provide safe, competent, kind, compassionate and respectful care. The midwife keeps up to date with current midwifery practice by undertaking relevant continuing professional development			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.10 Participates with the midwife in the appropriate use of national and local guidelines and policies in the provision of evidence-based care and provides a rationale for this.	<ul style="list-style-type: none"> Identifies and discusses with the midwife one national/local key guideline/policy document appropriate to the clinical area and its relevance to care. 		
3.11 Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in managing and organising effectively the provision of safe and evidence-based care for a caseload of women and provides a rationale for this. 		
3.12 Participates with the midwife in applying clinical risk-management processes into their own practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying potential clinical risk situations and discusses risk-management processes, providing rationale for same. 		
3.13 Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this. 		
3.14 Demonstrates a willingness to learn from women, preceptors, midwives and colleagues and provides a rationale for this.	<ul style="list-style-type: none"> Demonstrates a willingness to learn from women, Preceptors, midwives and colleagues giving examples of learning opportunities in practice. 		

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			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
4.1 Participates with the midwife in ensuring that the woman and her baby are the primary focus of practice and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner. • Includes the woman in plan of care and decision making and obtains informed consent when providing midwifery care. 		
4.2 Participates with the midwife in providing care that is safe, evidence-based, supportive, responsive and compassionate, taking into account the needs of the woman, her baby and her family and provides a rationale for this.	<ul style="list-style-type: none"> • Participates with the midwife in providing midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family. 		
4.3 Participates with the midwife in respecting the woman's right to privacy and confidentiality and provides a rationale for this.	<ul style="list-style-type: none"> • Demonstrates awareness of the importance of confidentiality, privacy and safeguarding of women's medical records in line with legislation and guidelines. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.1 Participates with the midwife in providing information in a format that is understandable and accessible to all women and their families and provides a rationale for this.	<ul style="list-style-type: none"> Participates in sharing information that is clear and accurate, at a level that women and their families can understand. Listens and communicates with women and their families in a manner that is kind, caring and compassionate. 		
5.2 Participates with the midwife in communicating appropriately and effectively with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Communicates effectively with women, their families and members of the multidisciplinary healthcare team, using professional language. Participates with the midwife in clinical handover and is able to give the rationale for the care provided. 		
5.3 Participates with the midwife in recognising and taking appropriate actions to challenge and reduce barriers to effective communication with women, their families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> Discusses, with the midwife, the various facilitators and barriers to effective communication. 		

Principle 5: Collaboration with Others			
Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team			
LEVEL: CLOSE SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
5.4 Participates with the midwife in collaborating with women, the women's families and other healthcare professionals using appropriate communication tools as determined by the needs of the woman and/or her baby to ensure timely referral to the appropriate healthcare professional and provides a rationale for this.	<ul style="list-style-type: none"> Participates with the midwife and other healthcare professionals to build professional caring relationships using appropriate communication tools. 		
5.5 Participates with the midwife in recording clinical practice in a manner which is clear, objective, accurate and timely and provides rationale for this.	<ul style="list-style-type: none"> Participates in documenting care in a clear, concise and accurate manner in healthcare records. Can explain the importance of record keeping in midwifery practice. 		
5.6 Participates with the midwife in addressing differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and provides a rationale for this	<ul style="list-style-type: none"> Participates with the midwife in discussions regarding midwifery care with other members of multidisciplinary team. Respects the professional opinions of others and recognises their right to hold and express their views. 		

CLOSE SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL POSTNATAL SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self -assessment Date & Sign	Midwife Date & Sign
Participates in the assessment of maternal well-being by conducting a systematic physical examination including: <ul style="list-style-type: none"> • Vital signs • Breasts • Uterus - Fundal height, tone and position • Vaginal loss - blood loss/ colour/amount/odour • Bladder function- frequency, volume, control etc • Bowel – Ask questions regarding bowel habits • Legs – Observe for any oedema/ varicose veins • Wound – Caesarean section • Perineum – Intact/type of trauma/Episiotomy • Mobility 		
Participates in the examination of the newborn on admission to the postnatal ward including: <ul style="list-style-type: none"> • Review of antenatal/labour history and APGAR scores • Confirmation of identify bands and security tag • Confirmation that the cord clamp is secure • Assesses passing of meconium and urine 		
Performs newborn care needs and educates the parents as appropriate: <ul style="list-style-type: none"> • Eye care • Umbilical cord care • Nappy changing • Baby bathing • Skin care 		

CLOSE SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL POSTNATAL SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self -assessment Date & Sign	Midwife Date & Sign
Participates in the daily examination and ongoing assessment of the newborn: <ul style="list-style-type: none"> • Physical examination: <ul style="list-style-type: none"> ○ Temperature ○ Heart rate (with stethoscope) ○ Respirations ○ Colour and skin integrity e.g. jaundice • Neurological examination: <ul style="list-style-type: none"> ○ Reflexes present, tone, response to stimuli ○ Appropriate feeding pattern ○ Sleep pattern • Elimination: <ul style="list-style-type: none"> ○ Passed meconium/urine 		
Promotes and supports breastfeeding by: <ul style="list-style-type: none"> • Facilitating skin-to-skin contact in an unhurried environment • Participating in the provision of advice on correct positioning and attachment • Participating in the education of women on how to express breastmilk using hand expression and a pump where appropriate 		
<ul style="list-style-type: none"> • Participates in explaining and discussing with women how to sterilise equipment and make up a formula feed safely 		
Participates in newborn screening and testing where indicated <ul style="list-style-type: none"> • Post-ductal oxygen saturations • Newborn bloodspot screening • Transcutaneous bilirubinometer • Haemocue for blood glucose assessment 		

CLOSE SUPERVISION PLACEMENT: ASSESSMENT OF ESSENTIAL POSTNATAL SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self -assessment Date & Sign	Midwife Date & Sign
Participates in the provision of accurate discharge advice and education to women who have had an uncomplicated pregnancy, labour and birth		
Participates under supervision in the preparation, calculation and safe administration of oral medication		
Participates under supervision in the preparation, calculation and safe administration of subcutaneous injection		
Participates under supervision in the preparation, calculation and safe administration of per rectum (PR) medication		

INITIAL INTERVIEW

Orientated to the clinical area		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Review and discussion of Principles, Assessment Criteria and Essential Skills:		Student:	<input type="checkbox"/>	Preceptor:	<input type="checkbox"/>
Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice placement:					
Signature of Preceptor/Co-preceptor:		Signature of Student Midwife:		Date:	
Date set for final interview:		Clinical Co-ordinator Present if applicable:		Yes	<input type="checkbox"/>
				No	<input type="checkbox"/>
		Signature of Clinical Co-ordinator:		Date:	
Comments (where appropriate):				Date:	
Signature:					

INTERMEDIATE INTERVIEW

(not normally required for a 2-week placement, see appendices for details of when an intermediate interview 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 <input type="checkbox"/> No <input type="checkbox"/> <i>If No please complete Intermediate Learning Plan</i> Date of Final interview:	Clinical Co-ordinator Present if applicable: Yes <input type="checkbox"/> No <input type="checkbox"/> Signature of Clinical Co-ordinator: _____ Date: _____	
Comments (where appropriate): Signature:		Date:

INTERMEDIATE LEARNING PLAN

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

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

INTERMEDIATE LEARNING PLAN

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

FOLLOW UP/FEEDBACK

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

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

FOLLOW UP/FEEDBACK

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

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

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any midwife or academic representative

Date/Time	Signature/Designation	Comments

RECORD OF ADDITIONAL CLINICAL SKILLS

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

Date	Clinical Skill	Signature of Preceptor/Midwife

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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

RECORD OF TEACHING/REFLECTION/DISCUSSION SESSIONS ATTENDED

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

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

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

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

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: Pass <input style="width: 30px; height: 20px;" type="checkbox"/> Fail <input style="width: 30px; height: 20px;" type="checkbox"/>	All Essential Skills List completed: Yes <input style="width: 30px; height: 20px;" type="checkbox"/> No <input style="width: 30px; height: 20px;" type="checkbox"/>	Date:
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of Clinical Co-ordinator (where applicable):	Signature of Personal Tutor (where applicable):	
If the student has not attained the required Principles, Assessment Criteria and Essential Skills for this placement, the Preceptor/Co-Preceptor will document in detail each Principle, Assessment Criteria and Essential Skills not attained. The Preceptor/Co-Preceptor should enact Step 3 of the protocol "When a HDM student is having significant difficulties in meeting competencies during a practice placement".		

FINAL INTERVIEW CONTINUED

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

MCAT SUMMARY SHEET – PROGRESS REVIEW

To be completed by the Personal Tutor in the University

Full Student Name:		
Student College ID Number:		
Antenatal Module Code: _____ Pass <input type="checkbox"/> Fail <input type="checkbox"/> Clinical Time complete: Yes: <input type="checkbox"/> No: <input type="checkbox"/> If ' No ' hours outstanding:	Labour and Birth Module Code: _____ Pass <input type="checkbox"/> Fail <input type="checkbox"/> Clinical Time complete: Yes: <input type="checkbox"/> No: <input type="checkbox"/> If ' No ' hours outstanding:	Postnatal Module Code: _____ Pass <input type="checkbox"/> Fail <input type="checkbox"/> Clinical Time complete: Yes: <input type="checkbox"/> No: <input type="checkbox"/> If ' No ' hours outstanding:
Clinical Record Book Reviewed: Yes <input type="checkbox"/> No <input type="checkbox"/>	Overall Clinical Time Complete: Yes: <input type="checkbox"/> No: <input type="checkbox"/> If ' No ' hours outstanding:	Personal Tutor Print Name: Personal Tutor Signature: Date:

References

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

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

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

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

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

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

APPENDICES



This protocol pertains to the following events:

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

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

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

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

Description of Clinical Modules, Progression and Derogations.

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

Each of the core clinical practice modules (Clinical Practice A, B, C D) are composed of placements in each of the core maternity care areas. Students must successfully complete each placement in Antenatal, Labour and Birth, and Postnatal care in order to successfully complete each module. A MCAT document is used for each placement, and the student must submit the three successfully completed MCAT documents to pass the module and to progress on the programme.

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

Enactment of protocol

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

Step 1

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

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

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

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

Step 2

Intermediate Meeting and 'Intermediate Learning Plan'

If significant difficulties in meeting standards are identified, they should be formally addressed in the intermediate interview. The preceptor/co-preceptor will also contact and inform the clinical co-ordinator of the specific issues identified. The clinical co-ordinator will contact the student's personal tutor by telephone and/or email.

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

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

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

Step 3

Final Meeting.

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

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

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

Step 4

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

The student, preceptor/co-preceptor, clinical Coordinator, personal tutor (or UCD nominee) will arrange to meet (if possible, by the end of the placement but normally within one week of the end of the placement¹). The purpose of this meeting is to discuss with the student their learning needs and draw up a 'final learning plan' that will guide and support them in their subsequent clinical learning.

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

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

¹ There may be exceptions to one week in cases where a student is off duty/annual leave

Step 5

MCAT Presentation to Personal Tutor.

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

Step 6

Repeat (and final) Practice Placement.

The student is offered a second and final opportunity to repeat the practice placement/module. A new MCAT is provided². This practice placement will be of the same duration as the original practice placement, or a 4-week placement may be agreed at the discretion of the preceptor, clinical 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 competency level as the original MCAT.

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

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

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

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

² Students can contact the UCD SNMHS school office to organise the collection of a new MCAT document

General note:

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



PROTOCOL ON THE PRESENTATION OF UNDERGRADUATE CLINICAL MODULES

Higher Diploma in Midwifery

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

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

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

Programme Requirements for Progression

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

Approved Director Undergraduate Clinical Studies 19th June 2019

Approved Programme Board (Chair) 19th June 2019



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

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

Principles of Communication

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

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

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

by telephone at the earliest opportunity with details of the nature and full extent of the issues or concerns raised by the student(s).

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

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

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

FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

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

The Personal Tutor is responsible to bring the 'Final Learning Plan' document to the meeting and ensure all parts are completed

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

FINAL LEARNING PLAN – CONTINUED

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

FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

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

FINAL LEARNING PLAN - FOLLOWING AN UNSUCCESSFUL CLINICAL ASSESSMENT

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

NOTES