

NATIONAL STUDENT MIDWIFE COMPETENCY ASSESSMENT TOOL YEAR 4 (INDIRECT SUPERVISION)



UCD SCHOOL OF NURSING, MIDWIFERY & HEALTH SYSTEMS

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

In partnership with the

National Maternity Hospital and the Maternity Services within the Ireland East Hospital Group (IEHG) At Midland Regional Hospital Mullingar St Luke's General Hospital Carlow/Kilkenny Wexford General Hospital





SIGNATURE BANK

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

Print Name	Signature	Designation	NMBI Pin

SIGNATURE BANK

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Protocols:

- When an internship student is having significant difficulties in meeting Performance Indicators in NCAD or Principles/Assessment Criteria in MCAT during a practice placement.
- When an internship student is unsuccessful in their clinical assessment.

Final Learning Plan

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.

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

YOUR CLINICAL PLACEMENT

WHAT TO EXPECT:

As you approach your clinical placement you will have mixed feelings. Before you begin your placement have a think about whom and what you are likely to encounter.

- How will you get there on time?
 - Check out the bus times, are they reliable, where can you park your car and what are the daily charges etc. Refer to ARC for additional details.
- What first impression do you want to give?
 - o Introduce yourself to the Clinical Midwife Manager for that clinical area when you arrive on your first day of clinical placement.
 - Uniforms neat and clean. Hair up with understated makeup, nails short, clean and no nail polish. No jewellery, fob watch.
 Wear your student identification badge at all times.
- What first impressions will you get?
 - Wards are busy places, and you may feel in the way. Remember you are a student and are there to learn. Be open to asking questions and demonstrate enthusiasm.
- Who will you meet?
 - Other students, Registered Nurses/Midwives, Clinical Placement Coordinators, Clinical Nurse/Midwife Specialists, Health Care Assistants, Porters, Physiotherapists, medical personal to name but a few, but most importantly you will meet women and their families.
- What will be expected of you?
 - Your preceptor will have specific expectations of you make sure you know what they are. If you are in any doubt seek clarification.
 - o You will be given individual clinical learning outcomes for each placement to use as a guide for your learning.
 - o Try not to take things personally and accept constructive feedback.
 - Women/clients/families will look to you for support/information. Ensure that all information is given within your scope of practice and demonstrate a caring, listening and empathetic attitude.

SUPPORT WHILST ON CLINICAL PLACEMENT

You are never alone when on clinical placement and there are clinical, and university supports available to you. These supports are ineffective unless you fully engage with your learning outcomes. What are you there to learn, you must be able to explain you're learning outcomes to your designated preceptor who will then guide and support you in achieving these outcomes.

Clinical Supports:

• Preceptor – Support, supervise and guide your performance. Your preceptor will liaise with the CPC.

Clinical Placement Co-Ordinator (CPC):

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

UCD SNMHS Supports:

Personal Tutor

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

Clinical Midwifery Tutor

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

Student Advisor

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

Please insert the following details:

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

Introduction

This document contains the Midwifery Competence Assessment Tool (MCAT) for Year 4 of the BSc (Hons) Midwife Registration programme and guidance for its use. The MCAT and guidance document has been 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. In keeping with the Midwife Registration Programme Standards and Requirements (NMBI 2016), the MCAT acts as a record of ongoing achievements in clinical practice over the four-year Midwifery Registration programme, which is a requirement of the NMBI to register as a midwife in the Midwives Division of the Register of Nurses and Midwives Register.

This guide has been developed to help the student and their Preceptor/Co-preceptor to complete the MCAT. Each year, the student will be assessed in core midwifery practice area/s at incremental levels by Preceptors/Co-preceptor and Registered Midwives, who support, supervise and assess the student throughout her/his practice/clinical placement. It is recommended that this document be read in conjunction with the following:

• Academic Regulations and Procedures of the relevant HEI/University

and

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

The student and the Preceptor/Co-preceptor must be familiar with their 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 effectively' (NMBI 2015), fulfilling their professional responsibility within their scope of practice, the knowledge, skills and professional behaviours required of the midwife for safe practice in any setting and indicates what a midwife is expected to know and what a midwife does (ICM 2013).

The 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 2014) and are based on the Practice Standards for Midwives (NMBI 2015).

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, evidence-based and compassionate midwifery care in partnership with women during pregnancy, labour, birth and the postnatal period and provide care for the newborn and the infant, as reflected in the definition of the midwife endorsed by the NMBI.

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 year 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 in Year 1** of the programme and culminating in **Distant Supervision in Year 4**. The level of supervision expected for each year is stipulated by the NMBI (2016) and is defined in the MCAT specific to the year of the Midwife Registration programme.

Year	Level and Description of Supervision	Scope of Practice
Four	Indirect Supervision: Defined as the Preceptor/Co-preceptor being accessible whenever the student is taking the lead in providing care to women and their babies. The student can safely and effectively perform the skill and provide care and can support care with evidence.	approach to the provision of safe midwifery care. The student actively participates in the care of women and

In each year of the Midwife Registration programme, all competencies and their associated assessment criteria must be assessed and successfully achieved when in a core clinical placement before the student progresses to the next year 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/clinical placement and assessment. Following an opportunity to repeat, if the student fails the assessment, the student may be asked to exit the Midwife Registration programme. Regulations in relation to repeat attempts will be agreed and managed as per the Academic Regulations and Procedures of the relevant HEI.

Guidance on the Assessment of Competence Process

Successful completion of the MCAT facilitates student's progression from one year to the next and to culminate in competence in midwifery practice on completion of the four-year Midwife Registration programme.

It is the responsibility of the student to ensure that the MCAT document is:

- (i) available on practice/clinical placement,
- (ii) completed accurately
- (iii) submitted as per HEI guidelines on the prescribed submission date.

This document 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/clinical placement the student should review their learning needs incorporating any earlier experience of the practice/clinical settings and identify specific learning outcomes for the practice/clinical placement. In addition, the student should review the learning opportunities specific to the practice/clinical placement. If it is the student's first practice/clinical placement the student is advised to discuss learning outcomes with the Clinical Placement Coordinator (CPC), clinical placement module leader or link Lecturer.

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

Initial interview

An initial interview takes place, as early as possible, during **week one** and is facilitated by the Preceptor/Co-preceptor. The degree of supervision expected, as prescribed by the Midwife Registration Programme Standards and Requirements (NMBI 2016) is discussed.

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

Intermediate interview

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

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

Final interview

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

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

Assessment of the student includes:

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

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

Where there are concerns in relation to the student's progress, the Preceptor/Co-preceptor, in consultation with the student, should liaise with the Clinical Placement Coordinator (CPC), and a *learning plan* must be put in place to support the student to successfully complete the relevant competence/competencies over the remaining time of the clinical placement. Personnel also need to be informed and may provide advice and support regarding the learning plan.

The *learning plan* must be:

- Recorded in the Intermediate Learning Plan section and referred to over the course of the remaining practice/clinical placement.
- Explicit in detailing what the student must do to successfully complete the assessment of competence.
- The Personal Tutor/Link Lecturer supporting the practice/clinical placement area may also be consulted for advice and support.

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 CPC 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** practice/clinical placement to repeat the complete assessment. Procedures specific to each HEI in relation to a failed assessment of competence such as informing the relevant personnel in the HEI and arrangement of practice/clinical placement to facilitate reassessment will be provided locally by the HEI and must be adhered to (see appendix).

The Role and Responsibilities of the Midwifery Student

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

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.
 - o 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.
 - o 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 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 CPC and the Personal Tutor.
- If at any stage, the Preceptor/Co-preceptor, in consultation with the CPC, 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:
Number of weeks in this Fractice Flacement.
Placement Dates:
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Placement Co-ordinator (CPC):

RECORD OF ATTENDANCE

	_	NLC.			_		
Week 1	Date	Date	Date	Date	Date		
Hours of Duty						Number of Hours Absent:	Number of Days Absent:
Student Signature						Hours Absent.	Absent.
Student Signature							
Preceptor/Co- Preceptor Signature							
Week 2	Date	Date	Date	Date	Date	Total hours com	ppleted:
Hours of Duty							
Student Signature						Declaration by S	Student:
D + (0 D + 0; +						_	hours recorded on
Preceptor/Co- Preceptor Signature							
Week 3	Date	Date	Date	Date	Date	this sheet are a t	
						accurate account	of the duty I have
Hours of Duty						worked.	
Student Signature							
Preceptor/Co- Preceptor Signature						Signature of Stu	ıdent:
Week 4	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature						Date:	
Preceptor/Co- Preceptor Signature							
Week 5	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor Signature							
Week 6	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor Signature							

In each indirect supervision level clinical placement all competencies and their associated assessment criteria must be assessed and passed successfully before the student can progresses to distant supervision level clinical placements. On completion of the clinical placement, the student is deemed to have either passed or failed the competence/competencies.

Principle 1: Respect for the Dignity of the Person	on		
	pinned by a philosophy that protects and promotes	the safety	and
autonomy of the woman and respects her expe	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
1.1 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event and a profound event in a women's life.	 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event. Demonstrates ability to provide the necessary support, care and advice to women in the promotion of normal birth. Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same. 		
1.2 Demonstrates the ability to advocate on 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.	 Advocates on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth. 		
1.3 Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women their families.	 Provides care for women consistent with their cultural and religious beliefs and preferences where appropriate. 		
1.4 Demonstrates the ability to provide sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.	Provides evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.		
1.5 Demonstrates the ability to support women to engage with maternity care.	 Educates women on the importance of being actively engaged in their own maternity care. 		
1.6 Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	 Respects the role of women as partners in their care and contributions they can make to it. Actively involves the woman in all decisions regarding her healthcare and that of her baby. 		

Principle 2: Professional Responsibility and Accountability

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Demonstrates the ability to act 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.	 Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014) and the Practice Standards for Midwives (NMBI 2015). 		
2.2 Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	Demonstrates acceptance of accountability for own professional practice.		
2.3 Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	Evaluates own abilities and level of professional competence and acts accordingly.		
2.4 Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues or themselves at unnecessary risk.	 Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk. 		
2.5 Demonstrates the ability to provide care in an emergency situation or any situation where something occurs that is outside their scope of practice and refers to the most appropriate healthcare professional.	Identifies an emergency situation and is capable of alerting the appropriate healthcare professionals – may be simulated practice.		

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

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

Principle 3: Quality of Practice

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

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

Principle 3: Quality of Practice

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

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

Principle: 4: Trust and Confidentiality

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

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

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

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

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF ANTENATAL ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

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

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF ANTENATAL ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

ESSENTIAL SKILLS	Student Self -Assessment Date & Sign	Midwife Date & Sign
Actively participates in the interpretation of obstetric ultrasounds and can discuss the impact of findings on the plan of care	5 acc et 5.g	5 acc ac 5.5
Actively participates in the care of women with complex pregnancies, including timely reporting of any significant changes in maternal and/or fetal condition		
Actively participates in the care and management of women having induction of labour		
Identifies the onset of labour of women in the antenatal ward: • Can assess uterine contractions in terms of frequency, strength and duration		
Actively participates in the care and management of a women who requires an elective/emergency caesarean section and participates in providing a comprehensive handover to theatre staff		
Actively participates in providing care of a woman and her family who are experiencing bereavement		
Under supervision, prepare, calculate and safely administer oral medication		
Under supervision, prepare, calculate and safely administer subcutaneous injection medication		
Under supervision, prepare, calculate and safely administer intramuscular injection medication		
Actively participates under supervision in the preparation of intravenous fluid infusions		

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF <u>ANTENATAL</u> ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

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

^{*}Midwifery students are only permitted to flush intravenous cannulae under supervision as part of the peripheral intravenous cannula insertion procedure, according to local policies, protocols, procedures, and guidelines (HSE/OMNSD, 2020a; 2020b).

Midwifery students are not permitted to administer intravenous fluids, either with or without additives, or blood products at any other time during their midwifery registration education programme.

INITIAL INTERVIEW

Orientated to the clinical area Yes No		
Review and discussion of Principles, Assessment Criteria and	Essential Skills: Student:	Preceptor:
Learning needs identified by the midwifery student (refer to	practice placement learning outcomes):	
Specific learning opportunities identified by the Preceptor/Co	p-preceptor that are available during this clinical placem	ent:
opening to a mining opportunities in a mining of the mining opportunities in a mining opportunit	proceptor that are available daring time climear pracein.	o
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Date set for intermediate interview:		
Date set for intermediate interview.	CPC Present if applicable: Yes	No L
Comments (where appropriate):	Signature of CPC:	Date:
Designation:	Signature:	

INTERMEDIATE INTERVIEW

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills Student self-assessment of progress to date and identify own learning needs for remainder of practice placement: Preceptor/Co-preceptor review of students' progress to date: Signature of Preceptor/Co-preceptor: Signature of Student Midwife: Date: CPC Present if applicable: Yes Nο Student progressing satisfactorily: Yes No If **No**, please complete Intermediate Learning Plan Date of Final interview: Signature of CPC: Date: Comments (where appropriate): Date: Designation: Signature:

INTERMEDIATE LEARNING PLAN

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the initial interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When an internship student is having significant difficulties in meeting Performance Indicators in NCAD or Principles/Assessment Criteria in MCAT during a practice placement'

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

INTERMEDIATE LEARNING PLAN - CONTINUED

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

INTERMEDIATE LEARNING PLAN - CONTINUED

FOLLOW UP/FEEDBACK PAGE

Feedback from Preceptor/Co-Preceptor and 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 **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

FOLLOW UP/FEEDBACK PAGE

Ongoing feedback from Preceptor/Co-Preceptor and 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 **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any Midwife/CPC 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/DISCUSSION SESSIONS ATTENDED

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

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

RECORD OF TEACHING/DISCUSSION SESSIONS ATTENDED

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

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

FINAL INTERVIEW

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

Student self-assessment of progress to date:		
student sen assessment of progress to date.		
Preceptor/Co-preceptor review:		
rieceptor/co-preceptor review.		
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
All Philiciples and Assessment Criteria achieved.	All Essential Skills List Completed.	Date.
Pass Fail		
	Yes No L	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of CPC (where appropriate):	Signature of Personal Tutor (where appropriate):	
If the student has not attained the required Principles, Assess	ment Critoria and Essential Skills for this placement, the S	Precentor/Co-
	· · · · · · · · · · · · · · · · · · ·	
Preceptor will document in detail each Principle, Assessment	•	o-Preceptor should
enact Step 2 of the protocol 'When an internship student is u	nsuccessful in their clinical Assessment".	

FINAL INTERVIEW CONTINUED

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

FINAL INTERVIEW CONTINUED

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

LABOUR AND BIRTH

(INTRANATAL)

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 Placement Co-ordinator (CPC):

RECORD OF ATTENDANCE

			JOND OI A	= : 1 > / . : 1 \			
Week 1	Date	Date	Date	Date	Date		
						Number of	Number of Days
Hours of Duty						Hours Absent:	Absent:
Student Signature							
Preceptor/Co- Preceptor							
Signature						Total haven as	
Week 2	Date	Date	Date	Date	Date	Total nours co	mpleted:
Hours of Duty						Declaration by	/ Student:
Student Signature							he hours recorded
Preceptor/Co- Preceptor Signature						on this sheet ar	
Week 3	Date	Date	Date	Date	Date	accurate accour	nt of the duty I
	Dute	Dute	Date	Dute	Dute	have worked.	
Hours of Duty							
Student Signature						Signature of S	Student:
Preceptor/Co- Preceptor							
Signature							
Week 4	Date	Date	Date	Date	Date	Date:	
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor							
Signature							
Week 5	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor							
Signature							
Week 6	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor							
Signature							

In each indirect supervision level clinical placement all competencies and their associated assessment criteria must be assessed and passed successfully before the student can progresses to distant supervision level clinical placements. On completion of the clinical placement, the student is deemed to have either passed or failed the competence/competencies.

Principle 1: Respect for the Dignity of the Perso			
	inned by a philosophy that protects and promotes	the safety	and
autonomy of the woman and respects her exper LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor	Date & Sign
		Pass	Fail
1.1 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event and a profound event in a women's life.	 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event. Demonstrates ability to provide the necessary support, care and advice to women in the promotion of normal birth. Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same. 		
1.2 Demonstrates the ability to advocate on 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.	 Advocates on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth. 		
1.3 Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women their families.	 Provides care for women consistent with their cultural and religious beliefs and preferences where appropriate. 		
1.4 Demonstrates the ability to provide sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.	 Provides evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby. 		
1.5 Demonstrates the ability to support women to engage with maternity care.	Educates women on the importance of being actively engaged in their own maternity care.		
1.6 Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	 Respects the role of women as partners in their care and contributions they can make to it. Actively involves the woman in all decisions regarding her healthcare and that of her baby. 		

Principle 2: Professional Responsibility and Accountability

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Demonstrates the ability to act 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.	 Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014) and the Practice Standards for Midwives (NMBI 2015). 		
2.2 Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	 Demonstrates acceptance of accountability for own professional practice. 		
2.3 Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	 Evaluates own abilities and level of professional competence and acts accordingly. 		
2.4 Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues or themselves at unnecessary risk.	 Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk. 		
2.5 Demonstrates the ability to provide care in an emergency situation or any situation where something occurs that is outside their scope of practice and refers to the most appropriate healthcare professional.	 Identifies an emergency situation and is capable of alerting the appropriate healthcare professionals – may be simulated practice. 		

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

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

Principle 3: Quality of Practice

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor	Date & Sign
		Pass	Fail
3.7 Demonstrates the ability to support and educate women with infant-feeding practices which include protecting, promoting and supporting breastfeeding.	 Supports and educates women in infant feeding practices include protecting, promoting and supporting breastfeeding. Recognises challenges and complications that may be associated with infant feeding and can develop an individualised care plan in partnership with the woman. 		
3.8 Demonstrates the ability to comply with standard universal infection prevention and control measures.	 Uses standard universal infection prevention and control measures. Educates women to minimise infection through safe hygiene practice. 		
3.9 Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) medication administration guidance.	 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 administrated. Has knowledge of medication legislation and NMBI guidance on medication management. 		
3.10 Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	 Critically reflects on own practice and demonstrates learning from previous experience. Can identify future learning needs. 		
3.11 Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	 Identifies and discusses with the midwife how clinical guidelines/policies influence and guide midwifery practice. 		

Principle 3: Quality of Practice

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor	Date & Sign
		Pass	Fail
3.12 Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	 Begins to adopt a problem-solving approach to the provision of safe midwifery care. Prioritises, plans and provides care to a caseload of women and their babies in consultation with the midwife. It may be difficult for the student to prioritise care in particular situations. 		
3.13 Demonstrates the ability to apply clinical riskmanagement processes in their own practice.	 Participates in clinical risk assessment and reporting of adverse clinical incidents. Can discuss the importance of clinical risk management in the safe care of women and their babies. 		
3.14 Demonstrates the ability to participate in audits of clinical care in practice.	 Demonstrates the ability to participate in audits of clinical care in practice. 		
3.15 Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	 Supports and teaches other student midwife colleagues appropriately. 		

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

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

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

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF INTRAPARTUM ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

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

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF <u>INTRAPARTUM</u> ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

ESSENTIAL SKILLS	Student	Midwife
	Self -Assessment Date & Sign	Date & Sign
Correctly apply CTG machine and interpret CTG with the midwife using a systematic	Date & Sign	Date & Sign
approach:		
Can recognise and report suspicious or pathological fetal heart rate patterns, and can initiate appropriate action with the midwife		
Identify indications and contraindications for use of fetal scalp electrode (FSE) and actively participates in applying an FSE where indicated		
 Identify indications and rationales for fetal blood sampling in labour: Actively participates in preparing for and assisting with fetal blood sampling Actively participates in interpreting the results and planning subsequent management 		
Identify indications and contraindications for vaginal examination: • Performs a vaginal examination and actively participates in interpreting, reporting and documenting the findings		
Identify indications and contraindications for artificial rupture of membranes and actively participates in performing an amniotomy		
Assess liquor volume, colour and odour throughout labour, reporting any deviations from the norm and initiates appropriate referral and management plan with the midwife		
Perform urinary catheterisation where appropriate		
Identify the indications and contraindications for the administration of intravenous		
oxytocin to induce or accelerate labour:		
 Actively participates in the care of a woman requiring an oxytocin infusion, adhering to protocols regarding the dose and titration, assessing uterine contractions, resting tone and assessment of fetal well-being 		

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF INTRAPARTUM ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

ESSENTIAL SKILLS	Student Self -Assessment	Midwife
	Date & Sign	Date & Sign
Provide care and advice for women who choose non-pharmacological comfort		
measures in labour:		
 Supports women who choose hydrotherapy, hypnobirthing, labour hopscotch, use of mobility aids such as birthing balls, stools and mats etc. 		
Provide care for women who choose inhalation, intramuscular and/or epidural		
analgesia pain relief in labour adhering to:		
NMBI and HIQA Guidance on Medication Management and Administration		
Student midwives' Scope of Practice		
Local policies and guidelines		
Assess progress during the first and second stage of labour using:		
 Observation, such as maternal behaviour, expulsive uterine contractions 		
Abdominal examination to assess descent of the presenting part		
Vaginal examination as appropriate, determining station and position		
Prepares the appropriate environment for birth:		
Birthing room		
Birthing Trolley		
Emergency equipment (including Neonatal Resuscitaire)		
Assist women in birthing their baby by providing emotional and physical support as		
appropriate and uses appropriate techniques to minimise perineal trauma		
Identify the indications and contraindications for selective use of episiotomy:		
 Actively participates in infiltrating the perineum with local anaesthetic 		
 Actively participates in performing an episiotomy if indicated 		

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF INTRAPARTUM ESSENTIAL SKILLS & KNOWLEDGE

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

ESSENTIAL SKILLS	Student Self -Assessment Date & Sign	Midwife Date & Sign
Identify indications and contraindications for assisted birth (ventouse/forceps): • Actively participates in in preparing for an instrumental assisted birth • Actively participates in providing midwifery care for women requiring an assisted birth		
Actively participates in the preparation of women for transfer to theatre for emergency caesarean section and actively participates in providing a comprehensive handover to theatre staff		
Actively participates in the care of women with complex pregnancies, including timely reporting of any significant changes in maternal and or fetal condition		
 Facilitate safe expulsion of the placenta and membranes in the third stage of labour: Physiological management (if not seen can discuss) Active Management of the third stage Examines the placenta and membranes and disposes of the placenta appropriately Reserves umbilical cord blood to assess blood group and rhesus status where indicated Reserves paired cord pH samples where indicated 		
 Perineal Trauma: Actively participates in classifying the degree of perineal trauma and identifying the structures affected Identify indications for repair of perineal trauma and appropriate technique that should be used Actively participates in perineal repair 		

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF <u>INTRAPARTUM</u> ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

ESSENTIAL SKILLS	Student	Midwife
	Self -Assessment Date & Sign	Date & Sign
Actively participates in the provision of sensitive and compassionate physical and emotional care of women and their family who are experiencing pregnancy loss		
 Provide immediate care to the newborn following birth: Assesses transition to extrauterine life by assessing respiratory effort, colour, tone, response to stimuli and can auscultation the neonatal heart rate using stethoscope Assesses and records APGAR score Initiate initial steps of neonatal resuscitation if indicated (or can discuss) Promotes thermoregulation of the infant Promotes and assists with the initiation of early skin to skin contact Supports women/partners to have skin to skin contact with their baby in a safe and unhurried environment Promotes breastfeeding and assists the mother to breastfeed her newborn as soon as possible following birth Applies infant identification bands and electronic security tag 		
Correctly performs the initial midwife examination of the newborn		
Under supervision, prepare and administer vitamin K to the newborn following the woman's informed consent		
Assess maternal and newborn well-being prior to transfer to the postnatal ward or home		
Under supervision, prepare, and safely administer inhalation analgesia		
Under supervision, prepare, calculate and safely administer oral medication		

YEAR FOUR (INDIRECT SUPERVISION) ASSESSMENT OF INTRAPARTUM ESSENTIAL SKILLS & KNOWLEDGE (ALL SKILLS MUST BE COMPLETED/SIGNED BY END OF THE CLINICAL PLACEMENT)

ESSENTIAL SKILLS	Student Self -Assessment Date & Sign	Midwife Date & Sign
Under supervision, prepare, calculate and safely administer PR medication		
Under supervision, prepare, calculate and safely administer intramuscular medication		
Actively participates in the preparation of intravenous fluid infusions		
Actively participate under supervision in the preparation and calculation of additives for intravenous infusions*		
Performs venepuncture safely and effectively		
Actively participates in performing adult peripheral intravenous cannulation *		

^{*}Midwifery students are only permitted to flush intravenous cannulae under supervision as part of the peripheral intravenous cannula insertion procedure, according to local policies, protocols, procedures, and guidelines (HSE/OMNSD, 2020a; 2020b).

^{*}Midwifery students are not permitted to administer intravenous fluids, either with or without additives, or blood products at any other time during their midwifery registration education programme.

INITIAL INTERVIEW

Orientated to the clinical area Yes No		
Review and discussion of Principles, Assessment Criteria an	d Essential Skills: Student:	Preceptor:
Specific opportunities identified by the Preceptor/Co-preceptor	stor that are available during this clinical placement:	
Specific learning objectives identified by the midwifery stud	lent:	
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:
Signature of Fredeptor/Co-predeptor.	Signature of Student Mawire.	Date.
Date set for intermediate interview:	CPC Present if applicable: Yes	No \square
	Signature of CPC:	Date:
Comments (where appropriate):	Torginature of all of	Date:
Designation:	Signature:	

INTERMEDIATE INTERVIEW

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

Student self-assessment of progress to date and identify own learning needs for remainder of practice placement:				
Preceptor/Co-preceptor review of students' progress to date:				
Signature of Preceptor/Co-preceptor:	Signature of Student Midwife:	Date:		
Student progressing satisfactorily: Yes No	CPC Present if applicable: Yes	No 🗆		
If No , please complete Intermediate Learning Plan				
Date of Final interview:	Signature of CPC:	Date:		
Comments (where appropriate):		Date:		
Designation:	Signature:			

INTERMEDIATE LEARNING PLAN

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the initial interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When an internship student is having significant difficulties in meeting Performance Indicators in NCAD or Principles/Assessment Criteria in MCAT during a practice placement'

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

INTERMEDIATE LEARNING PLAN - CONTINUED

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

INTERMEDIATE LEARNING PLAN - CONTINUED

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

FOLLOW UP/FEEDBACK PAGE

Feedback from Preceptor/Co-Preceptor and other *midwives*, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

FOLLOW UP/FEEDBACK PAGE

Ongoing feedback from Preceptor/Co-Preceptor and 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 **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any Midwife/CPC 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/DISCUSSION SESSIONS ATTENDED

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

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

RECORD OF TEACHING/DISCUSSION SESSIONS ATTENDED

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

Teaching/Discussion Session Title/Topic:	Given By:
I confirm that I have attended the above teaching/discussion session:	Date:
Cianatura of Chudont Midurifo	
Signature of Student Midwife:	
Teaching/Discussion Session Title/Topic:	Given By:
3, 2222 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	,
I confirm that I have attended the above teaching/discussion session:	Date:
Signature of Student Midwife:	
Teaching/Discussion Session Title/Topic:	Given By:
readining, biocassion bession ridio, replet	
I confirm that I have attended the above teaching/discussion session:	Date:
Signature of Student Midwife:	
	1

FINAL INTERVIEW

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

The Treespeer, so preceptor and seadent mawn	re review an immerpres, resessiment enteria and Essential	<u> </u>
Student self-assessment of progress to date:		
Preceptor/Co-preceptor review:		
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
Pass Fail	Yes No	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Circulation of CDC (when a serious into)		
Signature of CPC (where appropriate):	Signature of Personal Tutor (where appropriate):	
If the student has not attained the required Principles, Asses	sment Criteria and Essential Skills for this placement, the	Preceptor/Co-
Preceptor will document in detail each Principle, Assessment	• •	o-Preceptor should
enact Step 2 of the protocol 'When an internship student is u	nsuccessful in their clinical Assessment".	

FINAL INTERVIEW CONTINUED

FINAL INTERVIEW CONTINUED

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

POSTNATAL

Name of Practice Placement - Unit/Ward:
Number of weeks in this Practice Placement:
Placement Dates:
Name of Preceptor:
Name of Freceptor.
Name of Co-Preceptor:
Name of Clinical Placement Co-ordinator (CPC):

RECORD OF ATTENDANCE

		ILC		LINDANCE			
Week 1	Date	Date	Date	Date	Date		T
Have of Duty						Number of	Number of Days
Hours of Duty						Hours Absent:	Absent:
Student Signature							
Preceptor/Co- Preceptor Signature							
Week 2	Date	Date	Date	Date	Date	Total hours co	mpleted:
Hours of Duty							
Student Signature						Declaration by	Student:
Preceptor/Co- Preceptor Signature						I confirm that th	ne hours recorded
						on this sheet ar	e a true and an
Week 3	Date	Date	Date	Date	Date	accurate accour	
Hours of Duty						have worked.	•
Student Signature							
Preceptor/Co- Preceptor Signature						Signature of S	tudent:
Week 4	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature						Date:	
Preceptor/Co- Preceptor Signature							
Week 5	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor Signature							
Week 6	Date	Date	Date	Date	Date		
Hours of Duty							
Student Signature							
Preceptor/Co- Preceptor Signature							

In each indirect supervision level clinical placement all competencies and their associated assessment criteria must be assessed and passed successfully before the student can progresses to distant supervision level clinical placements. On completion of the clinical placement, the student is deemed to have either passed or failed the competence/competencies.

Principle 1: Respect for the Dignity of the Person	n		
	inned by a philosophy that protects and promotes	the safety	and
autonomy of the woman and respects her exper LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
1.1 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event and a profound event in a women's life.	 Demonstrates ability to promote and protect pregnancy and childbirth as a healthy and normal physiological event. Demonstrates ability to provide the necessary support, care and advice to women in the promotion of normal birth. Discusses the requirement for possible interventions if complications arise during pregnancy, labour, birth or the postnatal period, providing evidence to underpin same. 		
1.2 Demonstrates the ability to advocate on 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.	 Advocates on behalf of women and their babies to ensure their rights and interests are protected, including the women's right to choose how and where to give birth. 		
1.3 Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women their families.	 Provides care for women consistent with their cultural and religious beliefs and preferences where appropriate. 		
1.4 Demonstrates the ability to provide sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby.	 Provides evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby. 		
1.5 Demonstrates the ability to support women to engage with maternity care.	 Educates women on the importance of being actively engaged in their own maternity care. 		
1.6 Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	 Respects the role of women as partners in their care and contributions they can make to it. Actively involves the woman in all decisions regarding her healthcare and that of her baby. 		

Principle 2: Professional Responsibility and Accountability

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
2.1 Demonstrates the ability to act 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.	 Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives (NMBI 2014) and the Practice Standards for Midwives (NMBI 2015). 		
2.2 Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	Demonstrates acceptance of accountability for own professional practice.		
2.3 Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	Evaluates own abilities and level of professional competence and acts accordingly.		
2.4 Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues or themselves at unnecessary risk.	 Recognises acts and omissions that may place the woman, her baby, colleagues or themselves at unnecessary risk. 		
2.5 Demonstrates the ability to provide care in an emergency situation or any situation where something occurs that is outside their scope of practice and refers to the most appropriate healthcare professional.	 Identifies an emergency situation and is capable of alerting the appropriate healthcare professionals – may be simulated practice. 		

Principle 3: Quality of Practice

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

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

Principle 3: Quality of Practice

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

relevant continuing professional development LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.6 Demonstrates the ability to act effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).	 Acts effectively as a member of the multidisciplinary team in an emergency situation (real or simulated). 		
3.7 Demonstrates the ability to support and educate women with infant-feeding practices which include protecting, promoting and supporting breastfeeding.	 Supports and educates women in infant feeding practices include protecting, promoting and supporting breastfeeding. Recognises challenges and complications that may be associated with infant feeding and can develop an individualised care plan in partnership with the woman. 		
3.8 Demonstrates the ability to comply with standard universal infection prevention and control measures.	 Uses standard universal infection prevention and control measures. Educates women to minimise infection through safe hygiene practice. 		
3.9 Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) medication administration guidance.	 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 administrated. Has knowledge of medication legislation and NMBI guidance on medication management. 		

Principle 3: Quality of Practice

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

LEVEL: INDIRECT SUPERVISION	Assessment Criteria	Preceptor Date & Sign	
		Pass	Fail
3.10 Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	 Critically reflects on own practice and demonstrates learning from previous experience. Can identify future learning needs. 		
3.11 Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	 Identifies and discusses with the midwife how clinical guidelines/policies influence and guide midwifery practice. 		
3.12 Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	 Begins to adopt a problem-solving approach to the provision of safe midwifery care. Prioritises, plans and provides care to a caseload of women and their babies in consultation with the midwife. It may be difficult for the student to prioritise care in particular situations. 		
3.13 Demonstrates the ability to apply clinical riskmanagement processes in their own practice.	 Participates in clinical risk assessment and reporting of adverse clinical incidents. Can discuss the importance of clinical risk management in the safe care of women and their babies. 		
3.14 Demonstrates the ability to participate in audits of clinical care in practice.	 Demonstrates the ability to participate in audits of clinical care in practice. 		
3.15 Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	 Supports and teaches other student midwife colleagues appropriately. 		

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

person(s).

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

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

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

ESSENTIAL SKILLS	Student Self -Assessment Date & Sign	Midwife Date & Sign
Provide evidence-based information to women and their partners on: Transition to parenthood and parenting skills The National Healthy Childhood Programme Maternal physical and emotional wellbeing Sexual health Family planning and contraception Breastfeeding supports in the community Community supports		
Actively participates in providing midwifery care to women who have had a complex pregnancy/labour/birth		
Actively participates in providing care to women who develop complex postnatal complications e.g. postpartum haemorrhage, thromboembolic complications, sepsis, severe perineal trauma etc.		
Identify the indications for blood transfusion and actively participates in the collection, checking, monitoring and recording of blood products (note that midwifery students are not permitted to administer blood products)		
Perform a daily examination of the newborn and evaluate the baby's adaptation to extrauterine life, health and wellbeing: • Recognises symptoms that may require discussion, intervention or referral and acts Appropriately		

ESSENTIAL SKILLS	Student	Midwife
	Self -Assessment	D 1 0 0'
	Date & Sign	Date & Sign
Advise parents on thermoregulation, bathing, clothing, sleeping positions, skin care, immunisations, normal infant development and social needs		
Support the woman to express breastmilk, identifying when hand expression and pump expression may be appropriate		
Provide evidence-based information to women who are taking medications in relation to breastfeeding		
Explain and discuss with women how to sterilise feeding equipment and make up a formula feed safely		
Identifies indications for newborn screening and actively participates in: • Post-ductal oxygen saturations • Newborn bloodspot screening		
Identifies indications for newborn testing and actively participates in: Transcutaneous bilirubinometer Haemocue for blood glucose assessment		
Actively participates in advising parents on recognition of signs of newborn ill health requiring the immediate attention of a medical professional		
Identifies risk factors for neonatal complications, and monitors appropriately and can identify sign and symptoms of illness that may require discussion, intervention or referral and acts accordingly		

ESSENTIAL SKILLS	Student Self -Assessment	Midwife
	Date & Sign	Date & Sign
Provide compassionate and sensitive care to parents when the newborn requires transfer to NICU/SCBU		
Under supervision, prepare, calculate and safely administer oral medication		
Under supervision, prepare, calculate and safely administer PR medication		
Under supervision, prepare, calculate and safely administer subcutaneous medication		
Actively participates in the preparation of an intravenous fluid infusion		
Actively participates under supervision in the preparation and calculation of additives for an intravenous infusion		

INITIAL INTERVIEW

Orientated to the clinical area Y	'es No			
Review and discussion of Principles, Ass	sessment Criteria and	Essential Skills: Student:		Preceptor:
Learning needs identified by the midwif	fery student (refer to p	oractice placement learning or	utcomes):	
Specific opportunities identified by the	Precentor/Co-precent	or that are available during th	is clinical placement:	
Specific opportunities facilities by the	receptor, do precepto	or that are available daring th	is enficient procenting.	
Signature of Preceptor/Co-preceptor:		Signature of Student Midwife	e:	Date:
Date set for intermediate interview:		CPC Present if applicable:	Yes	No 🗌
		Signature of CPC:		Date:
Comments (where appropriate):				Date:
Designation:		Signature:		

INTERMEDIATE INTERVIEW

The Preceptor/Co-preceptor and student midwife review all Principles, Assessment Criteria and Essential Skills Student self-assessment of progress to date and identify own learning needs for remainder of practice placement: Preceptor/Co-preceptor review of students' progress to date: Signature of Preceptor/Co-preceptor: Signature of Student Midwife: Date: Student progressing satisfactorily: Yes CPC Present if applicable: Yes Nο No If **No**, please complete Intermediate Learning Plan Date of Final interview: Signature of CPC: Date: Comments (where appropriate): Date: Designation: Signature:

INTERMEDIATE LEARNING PLAN

- The student is required to reflect on his/her own learning to date
- The Preceptor/Co-Preceptor should review the students' progress in relation to the learning needs and learning opportunities identified at the initial interview and relate this progress in their MCAT
- The Preceptor/Co-Preceptor should if appropriate enact Step 1 of the protocol 'When an internship student is having significant difficulties in meeting Performance Indicators in NCAD or Principles/Assessment Criteria in MCAT during a practice placement'

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

INTERMEDIATE LEARNING PLAN - CONTINUED

e student must document below which learning need(s) are outstanding and with the Preceptor/ Co-Preceptor specify new learning ed(s) and the supports and actions required to address these
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INTERMEDIATE LEARNING PLAN - CONTINUED

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

FOLLOW UP/FEEDBACK PAGE

Feedback from Preceptor/Co-Preceptor and other *midwives*, comment on key areas of progress and identify areas for development from the Principles, Assessment Criteria and Essential Skills. Please date, sign and print name for each entry **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

FOLLOW UP/FEEDBACK PAGE

Ongoing feedback from Preceptor/Co-Preceptor and 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 **Print Name:** Signature: Date: Signature: **Print Name:** Date: Signature: **Print Name:** Date:

RECORDS OF MEETINGS/ADDITIONAL FEEDBACK

This page may be completed by any Midwife/CPC 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/DISCUSSION SESSIONS ATTENDED

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

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

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

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

FINAL INTERVIEW

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

The Treceptor, co preceptor and stadent mawn	re review an i inicipies, resessinent enteria ana Essentiar	Skiiis
Student self-assessment of progress to date:		
Preceptor/Co-preceptor review:		
All Principles and Assessment Criteria achieved:	All Essential Skills List completed:	Date:
Pass Fail	Yes No	
Signature of Preceptor/Co-Preceptor:	Signature of Student Midwife:	
Signature of CDC (whore appropriate).	Cianatura of Davidan Living (whose appropriate)	
Signature of CPC (where appropriate):	Signature of Personal Tutor (where appropriate):	
If the student has not attained the required Principles,Assess	· ·	
Preceptor will document in detail each Principle, Assessment	• •	o-Preceptor should
enact Step 2 of the protocol 'When an internship student is u	nouccessiul III tileli tililitai Assessillelit .	

FINAL INTERVIEW CONTINUED

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

FINAL INTERVIEW CONTINUED

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

Antenatal/Parent Education

Name of Practice Placement - Unit/Ward:
Name of Preceptor:
Name of Co-Preceptor:
Name of Clinical Blacoment Co-ordinator (CBC):
Name of Clinical Placement Co-ordinator (CPC):

SIGNATURE BANK

Each registered midwife who acts as a preceptor for this student must sign this bank.

Preceptors Name (Print)	Signature	Initials	Preceptorship Course Date	Ward

RECORD OF ATTENDANCE

Week	Date	Date	Date	Date	Date
Hours of Duty					
Student Signature					
Preceptor Signature					

Antenatal/Parent Education Placement

BSc student midwives are allocated to Antenatal Education Department during their BSc Midwifery programme. The midwifery student will be expected to plan and provide antenatal and/or parenthood preparation/support class to a group of women and/or partners on **at least two occasions** in accordance with EU regulations Clinical Practice Experience (NMBI,2016).

During this clinical placement the student midwife should:

- 1. Maximise exposure to educational opportunities during this placement by attending all antenatal/parent craft classes scheduled during their rostered working hours.
- 2. Become familiar with the schedule of antenatal and parent craft classes
- 3. Use any time between scheduled classes to prepare lesson plans for two antenatal/parent craft sessions that she/he is required to provide.
- 4. Discuss their written lesson plans with the Antenatal Educator prior to presenting to parents.
- 5. Ensure completion of antenatal education/parent craft documentation within Clinical Practice Experience Book and MCAT.

At the end of this placement, under supervision of the RM/preceptor, the student midwife should be able to:

Utilise a philosophy of midwifery care that promotes pregnancy and childbirth as a normal physiological event, where the safety and autonomy of women is promoted and women's experiences, choices, priorities, beliefs and values are respected.

Promote pre-conception care and preparation for pregnancy as beneficial for all women but of particular importance for women with pre-existing conditions or on particular medications.

Adopt a health and wellbeing approach in the provision of evidence-based advice and information to women and their partners in order to enable them to make healthy choices on nutrition, exercise, optimal weight gain in pregnancy, and abstention from alcohol, smoking and drug use during pregnancy.

Work in equal partnership with women and their partners, to assess and address their individual needs for evidence-based information and strategies which enhance and support their preparation for labour, birth and the postnatal period.

Inform women of potential complications which may occur during pregnancy, labour and birth, and the postnatal period, to promote resilience and empower women and their partners when problems arise.

Advise women and their partners on strategies to promote positive mental health and wellbeing, providing evidence-based information and advice to enable recognition of the development of depression antenatally and postnatally, and the services which are available.

Promote and support breastfeeding as the optimal method of infant feeding, while respecting and supporting women who make alternative choices.

Encourage, support, and enable active partner involvement during pregnancy, labour and birth and the transition to parenthood, through the provision of supportive strategies, educational offerings and reputable on-line material.

Adopt a facilitative approach to parent education, promoting and respecting the views, experiences and choices of women and their partners.

Promote accessible, inclusive and tailored approaches to antenatal education, which respects diversity, is culturally appropriate and addresses the needs of women and their partners with specific needs or are reluctant to avail of antenatal education.

Provide access to clear, concise and comprehensible information in a range of formats and languages to address the information needs of women and their partners.

Communicate with all service users and colleagues courteously and respectfully, and utilising all opportunities to develop midwifery knowledge, skills and competencies.

ANTENATAL / PARENT EDUCATION Assessment form

Student Name:	Placement Date:
Topic	
Criteria	Assessors' comments and feedback
Attendance / Punctuality	
Adheres to code of professional conduct and professional guidelines pertaining to midwifery practice, and within scope of practice	
Preparation / Lesson Plan	
Preparation of room for session	
Introduces self to class	
Incorporates adult learning principles	
Teaching tools /strategies	
Verbal / nonverbal communication	
Student midwife / Parent interaction	
Accurate /up to date information within hospital policies	
Demonstration where appropriate	
Content of session delivered in timely manner	
Follow up resources provided	
Summary/ conclusion of session	
Answers questions within scope of practice or directs to supervising midwife	
Satisfactory: Yes/No (please circle)	
Assessor Signature:	Date:
Student Signature:	Date:

ANTENATAL / PARENT EDUCATION Assessment form

Student Name:	Placement Date:		
Topic			
Criteria	Assessors' comments and feedback		
Attendance / Punctuality			
Adheres to code of professional conduct and professional guidelines pertaining to midwifery practice, and within scope of practice			
Preparation / Lesson Plan			
Preparation of room for session			
Introduces self to class			
Incorporates adult learning principles			
Teaching tools /strategies			
Verbal / nonverbal communication			
Student midwife / Parent interaction			
Accurate /up to date information within hospital policies			
Demonstration where appropriate			
Content of session delivered in timely manner			
Follow up resources provided			
Summary/ conclusion of session			
Answers questions within scope of practice or directs to supervising midwife			
Satisfactory: Yes/No (please circle)			
Assessor Signature:	Date:		
Student Signature:	Date:		

MCAT SUMMARY SHEET - PROGRESS REVIEW

To be completed by the Personal Tutor in the University

Full Student Name: Student College		e ID Number:
Antenatal Module Code: Pass Fail	Intranatal Module Code: Pass Fail	Postnatal Module Code: Pass Fail
Clinical Time complete:	Clinical Time complete:	Clinical Time complete:
Yes: No:	Yes: No:	Yes: No:
If `No' hours outstanding:	If 'No' hours outstanding:	If 'No' hours outstanding:
Intravenous Cannulation Complete	Antenatal/Parent Education Complete	Continuity of Care Placement Complete
Yes: No:	Yes: No:	Yes: No:
Clinical Record Book Reviewed:	Medication Management Workbook Reviewed:	Date:
Yes No	Yes No	
Personal Tutor Print Name:	Personal Tuto	r Signature:

References

Nursing and Midwifery Board of Ireland (2015) *Practice Standards for Midwives* Nursing and Midwifery Board of Ireland, Dublin

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 (2016) *Midwife Registration Programme Standards and Requirements* Nursing and Midwifery Board of Ireland, Dublin

Nursing and Midwifery Board of Ireland (2021) Code of Professional Conduct and Ethics for Registered Nurses and Midwives

Nursing and Midwifery Board of Ireland, Dublin

APPENDICES

CLINICAL ASSESSMENT PROTOCOL

Each student is required to complete an internship period of thirty-six weeks which commences usually in January. There are six clinical placements during the internship period in Stage 4. Students are assessed on all clinical placements. **Full attendance is required on all clinical placements** thus ensuring compliance with the Nursing and Midwifery Board of Ireland (NMBI) registration requirements.

Regulations for Meeting Standards and Progression In Internship:

A student will not be eligible for the award of a degree of BSc Midwifery without having

- o Attained a pass in all the internship clinical modules in stage 4 and
- Met the requirement for attendance for internship clinical placements.

Regulations for Meeting Standards:

- The final outcome of clinical assessment is recorded as either 'pass' or 'fail' and is grade point neutral. The student must attain a 'pass' grade in all practice placements in order to attain an overall 'pass' for the stage.
- A 'pass' in clinical assessment is determined on the basis of a student attaining the required standards of assessment for a practice placement/module as outlined in the Midwifery Competency Assessment Tool (MCAT).
- The relevant sections of the assessment must be completed at the appropriate time, in consultation with the student's clinical preceptor and presented to the personal tutor.
- The first three clinical placements of the internship period will be assessed at indirect supervision level. The second three clinical placements of the internship period will be assessed at distant supervision level. In order to progress through the internship period, the student must successfully 'pass' all three indirect supervision level MCATs in antenatal care, labour and birth, and postnatal care before undertaking a distant supervision level MCAT. Therefore, in order to successfully complete the internship period of stage 4 of the BSc Midwifery programme the student must attain a 'pass' grade at indirect and distant supervision levels in antenatal care, labour and birth, and postnatal care.
- o All students are responsible to be familiar with the documents listed below.
- Students should obtain comprehensive feedback from their preceptor during their practice placements and at the intermediate meeting, to ensure they are aware of the areas of competence they may need to focus on for the remainder of a clinical placement.
- Students should be very familiar with protocol `When an Internship Student Is Having Significant Difficulties In Meeting Standards During A Clinical Placement And When An Internship Student Is Unsuccessful In Their Clinical Assessment' (appendix II).
- In the case of a student failing to obtain a pass standard in a single placement, a final learning plan will be set in place for the student. The final learning plan will be prepared by the student's personal tutor, in consultation with the student and the relevant person(s) in the student's hospital, that is, Clinical Placement Co-ordinator, Midwife Practice Development Co-ordinator, Director of Midwifery and Nursing. In the case of a student not attaining the standards in a particular module, a repeat placement will be required.
- A student who fails an internship clinical placement in stage four having had two attempts will be ineligible to continue in that nursing or midwifery programme. No subsequent attempt can be considered except with written agreement of Director of Nursing/Midwifery of the clinical partner site and through application to the School of Nursing, Midwifery and Health Systems' Governing Board.

Regulations Regarding Attendance

- Full attendance is required on all practice placements. This is necessary in order to ensure that each student meets the Nursing and Midwifery Board of Ireland (NMBI) minimum registration requirements in respect of clinical instruction and the academic requirements of the programme.
- All absences from practice placements in Stage 4 will be recorded and all absences must be made up at the end of Stage 4.
- You cannot pay back time within a module that you are repeating. If you fail a practice placement you must repeat the complete duration of the failed placement. For example, if the failed placement was 6 weeks in duration you repeat the whole 6 weeks. Any time owing is in addition to this.

Protocol for Recording Student Attendance

- As an employee of the health service employer, you are bound by the rules, policies and procedures of the employer. Under normal custom and practice, you are required to provide a service (under supervision) for the salary received. As a salaried employee you must abide by local and statutory attendance regulations. This means that when absent you must follow local reporting policies and procedures. While on the internship period, you are also required to meet the Nursing and Midwifery Board of Ireland (NMBI) minimum registration requirements in respect of clinical instruction. As a registered student with UCD, you will continue to be bound by the rules and regulations of the College, as set out in the Student Handbook.
- During the internship period the health service provider will forward a summary of your absences to the Allocations Office at the UCD School of Nursing, Midwifery and Health Systems. Where appropriate, the Allocations Office will plan supplementary placements to commence at the end of the internship period. Please note that students will not be considered for the award of Degree or registration with The Nursing and Midwifery Board of Ireland (NMBI) until the registration requirements in respect of clinical instruction and attendance have been met.

All students should be familiar with the following documents:

- UCD Information Handbook for Students with particular reference to the section on Student Conduct on Work Placements.
- Midwife Registration Programme Standards and Recommendations (2016) (Fourth Edition) Nursing Midwifery of Ireland.
- Protocol on the presentation of undergraduate clinical modules (Appendix I).
- Protocol in the event of the following: When an Internship Student Is
 Having Significant Difficulties In Meeting Standards During A Clinical
 Placement And When An Internship Student Is Unsuccessful In Their
 Clinical Assessment (Appendix II)
- Protocol for nursing/midwifery students wishing to avail of compassionate leave (Appendix III).

Recommended reading (available from the Health Sciences Library)

o Levett-Jones T. and Bourgeois S. (2009) *The Clinical Placement: A Nursing Guide.* 2nd edn. Bailliere Tindall, London.

STEPS TO BE FOLLOWED IN THE CLINICAL ASSESSMENT PROTOCOL

- Meet with the Clinical Placement Co-ordinator (CPC) to review learning opportunities for the placement.
- Report to the Clinical Nurse/Midwife Manager and the clinical preceptor and provide the clinical preceptor with the relevant NCAD/MCAT. It is the student's responsibility to make all relevant documentation available for the assessment process. Read the NCAD/MCAT prior to your placement and think about your learning needs and objectives.
- > All absences must be reported to relevant personnel as per local policy.
- Undertake an **initial interview** with the clinical preceptor to discuss learning needs, opportunities and standards to be attained during the placement and co-sign the record of the meeting.
- > Undertake an **intermediate interview** (where appropriate) with the clinical preceptor to review progress, with particular reference to the learning needs and standards to be attained. Review standards attained at this stage and co-sign the record of the meeting. The student's attendance is also reviewed at this meeting.
- > Undertake a **final interview** with the clinical preceptor to review the learning needs and standards attained and where appropriate, the record of skills.
- > Co-sign the record of the final meeting which may include a Record of Attendance in the presence of the preceptor.
- > At the end of each trimester, submit updated NCAD/MCAT to personal tutor for inspection and review.
- > Any requirement to meet outstanding clinical time should be documented on the Clinical Outcome Form and should be submitted to the Clinical Allocations Team. Students are required to have all documentation completed within **two** weeks of the last day of their clinical placement.
- ➤ A Final Learning Plan, following Unsuccessful Clinical Placement, and a form should be completed in consultation with the student, preceptor, clinical placement coordinator and personal tutor. A copy of the Final Learning Plan should be retained by the student for their own records.



PROTOCOL ON THE PRESENTATION OF UNDERGRADUATE CLINICAL MODULES FOR PERSONAL TUTORS

BSc General Nursing Stages 1, 2, 3 and 4

BSc Mental Health Nursing Stages 1, 2, 3 and 4

BSc Midwifery Stages 1, 2, 3 and 4

BSc Children's and General Nursing Stages 1, 2, 3, and 4

All students undertaking undergraduate nursing or midwifery programmes are required to present NCAD or MCAT documentation to personal tutors in UCD School of Nursing, Midwifery & Health Systems following completion of practice placements. It is the students' responsibility to ensure that they have their standards signed within 2 weeks of completing their clinical placement. Students will be given the specific date to present their documentation to their personal tutor at the beginning of each trimester in which a practice placement takes place.

The results of clinical modules will then be entered for either Autumn, Spring or Summer trimester, at the programme examination boards in UCD, with one of the following outcomes:

Outcome	Description				
Pass (P)	Domains / Performance Indicators in NCAD or Principles / Assessment Criteria in MCAT have been achieved.				
Incomplete (IM)	Incomplete (IM) Must Pass (temporary)- the student has not satisfactorily completed a 'must pass' component of a practice assessment and on in module repeat for that component was not available.				
	Domains /Performance Indicators in NCAD or Principles /Assessment Criteria in MCAT have not been achieved, as the student cannot be assessed due to insufficient time in the clinical area, and the student has no extenuating circumstances.				
	The incomplete assessment will only become a Pass (P) once overall domains/ performance indicators in NACD or principles/assessment criteria in MCAT have been achieved. The student is required to complete outstanding clinical time before completion of the stage.				
Fail (F)	Domains /Performance Indicators in NCAD or Principles /Assessment Criteria in MCAT have not been achieved during the practice placement.				
Extenuating Circumstances (IX)	Domains/ Performance Indicators in the NCAD or Principles/ Assessment Criteria in MCAT have not been achieved due to extenuating circumstances. An 'Incomplete with Extenuating' (IX) grade is awarded based on a recommendation from the Extenuating Circumstances Committee.				

Absent (ABS)	Failure to attend and/or present a completed NCAD / MCAT assessment document to the UCD personal tutor, with no evidence of extenuating circumstances.
	NCAD or MCAT submitted did not merit a grade (e.g. performance indicators or assessment criteria are not signed appropriately or missing signatures in signature bank)
No Grade (NM)	ABS and NM is treated as a fail grade and a clinical attempt. The student will need to undertake a repeat placement which is a second and final attempt and will incur a repeat fee.

Presentation of the NCAD/MCAT to the personal tutor is **compulsory** and failure to attend during the designated timeframe will normally result in an NM 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 application forms should be submitted online, 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 and **immediately** present their time sheets, confirming completion of this time, to the clinical allocations officer. The student should keep a copy of the time sheet as proof of submission. Failure to submit the completed time sheet may result in the student being unable to progress into the next stage of or complete their programme.



THIS PROTOCOL PERTAINS TO THE FOLLOWING EVENTS: WHEN AN INTERNSHIP STUDENT IS HAVING SIGNIFICANT DIFFICULTIES IN MEETING STANDARDS DURING A CLINICAL PLACEMENT

WHEN AN INTERNSHIP STUDENT IS UNSUCCESSFUL IN THEIR CLINICAL ASSESSMENT

BSc General Nursing
BSc Mental Health Nursing
BSc Children's and General Nursing
BSc Midwifery

The School of Nursing, Midwifery and Health Systems, and our clinical partners, are committed to supporting students as they progress through their internship clinical placements to prepare them to become registered nurses or midwives.

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 assessment (NCAD/MCAT) on an internship placement. This protocol is implemented in the context of the programme derogation on progression which all students, preceptors, CPCs and personal tutors should be familiar with¹.

The following actions should occur to assist the student in meeting the required standards in any (NCAD/MCAT) assessment while on any individual internship placement. They are sub- divided into sections reflecting the series of events commencing at the intermediate meeting and follows a series up until the repeat and final opportunity for the student.

Step 1- Intermediate Interview and 'Intermediate Learning Plan'.

- If the student is having significant difficulties in achieving the NCAD/MCAT standards it is vital that these difficulties are identified as early as is possible in order to allow time for improvement within that clinical placement period.
- If significant difficulties in meeting standards are identified they should be formally addressed in the intermediate meeting where the preceptor will prepare a plan to support the student to address the competencies that require improvement during the remaining weeks of that placement.
- An 'intermediate learning plan' is developed for the student. In this plan detailed notes of the students learning needs and the proposed actions to address these needs are made. This learning plan should be written in the NCAD/MCAT.
- The CPC will support this student throughout the placement and focus on their learning needs. They will also contact and inform the personal tutor of the specific issues raised. The personal tutor/UCD nominee may meet with the student at this or any time. At the same time, the student is advised to contact their personal tutor themselves also for additional support.
- It is advisable that the preceptor document any further meetings/observations with this student in the period between the intermediate and final meeting. This can be documented briefly giving dates and a brief description of the support offered and this too should be documented at the end of the 'intermediate learning plan'.

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 $^{^{1}}$ All programme derogations are outlined at the end of this document. See 'Programme Requirements for Progression'.

^{1.} This protocol can be relevant for anyone who is involved in supporting students in their clinical practice i.e. CNMs/CMMs, ALOs.

Step 2- Final Interview.

- Subsequent to the final interview, if the student has not met the required standards in the NCAD/MCAT for that placement, the preceptor will inform the CPC who will in turn inform the personal tutor by e-mail.
- The CPC can be present for the final meeting if requested by the student or preceptor.
- A record of the ways in which the student has not met the standards will be documented in detail by the preceptor in the final meeting outcome sheet in the NCAD/MCAT.
- Students can prepare for step 3. A copy of the 'Final Learning Plan' is included in the appendix of the NCAD/MCAT. Students should consider doing some preparatory work on their learning needs prior to the 'Final Learning Plan' meeting.

Step 3- Implementing a 'Final Learning Plan' after an 'unsuccessful' Clinical Placement².

- The student, CPC, personal tutor (or UCD nominee) and preceptor³ will arrange to meet (if possible by the end of the placement but normally within one week⁴ of the end of the placement).
- The purpose of this meeting is to discuss with the student their learning needs and draw up a 'Final Learning Plan' that will guide and support them in their subsequent clinical learning. (These documents are available from the UCD programme office).
- 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.
- The duration of the repeat practice placement will be of the same duration as the original clinical placement with a new NCAD/MCAT. The assessment will be the same level as the original NCAD/MCAT (see related programme derogation at the end of this document).
- 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.
 - o In the case of the 'repeat' practice placement, it is mandatory that the student presents their 'final learning plan' to their new preceptor so that they can avail of the required support.
 - The subsequent practice placement is <u>not always</u> the 'repeat practice placement'. However, in order for the student to maximise the benefits of their learning plan and improve their clinical learning outcomes in both the medium and long term, they are expected to discuss their learning needs (as outlined in the Learning Plan) with their next preceptor in their subsequent practice placement. 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.
- The Learning Plan will be agreed and duplicated so that the Student, CPC & Personal tutor retain a copy.

 $^{^2}$ The 'Final Learning Plan' replaces the original 'Action plan'. The wording was changed to reflect the emphasis on supporting the student's clinical learning in both subsequent and repeat clinical placements.

³ In some cases the preceptor may not be available to be present. In which case, another representative from the clinical placement can be present. The learning plan can be devised drawing on the documentation supplied by the preceptor in the final meeting.

 $^{^4}$ There may be exceptions to one week in cases where a student is off duty/annual leave.

Step 4 - NCAD/MCAT Presentation to the UCD Personal Tutor.

- The student presents this NCAD/MCAT to their personal tutor at the designated date for presentation of the clinical assessment documentation. The student then proceeds to SNM&HS Allocations Office to submit the details of subsequent practice placement requirements.
- The 'Fail grade' is recorded at the next available examination board.
- The student is offered a repeat practice placement, which will be the second and final opportunity to repeat the clinical module.
- The repeat clinical module will incur a repeat fee.

Step 5- Repeat (and final) Practice Placement.

- The student is offered a second and final opportunity to repeat the practice placement/ module. A new NCAD/MCAT is provided and normally a new clinical placement are a function placement will be of the same duration as the original practice placement. The assessment will be the same level as the original NCAD/MCAT (see related programme derogation at the end of this document).
- As early as is convenient on the repeat practice placement the new preceptor will hold a preliminary/initial interview with the student. The CPC⁷ may be in attendance if necessary. During this meeting the student must present the 'Final Learning Plan' to their new preceptor, outlining their documented learning needs and the areas in which the student requires additional support.
- The intermediate meeting initiates the same protocol as step 1 if the student is having significant difficulties.
- Given that this is the final opportunity for this student in this clinical placement/ module, the personal tutor/UCD nominee in their supportive role shall meet the student at a convenient time soon after the intermediate meeting.
- The final interview follows the same protocol as outlined in step 2 if the student fails to attain their required standards.
- Presentation of this NCAD/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 in the nursing/midwifery programme. No subsequent attempt can be considered except with written agreement of the Director of Nursing/Midwifery of the clinical partner site and through application to the School of Nursing, Midwifery and Health Systems' Governing Board.

⁵ Students can contact the UCD SNMHS programme office to organise the collection of a new NCAD/MCAT

⁶ In the Midwifery and Children's and General programme, students usually return to the original clinical placement area for their repeat opportunity.

⁷ In an exceptional circumstance that a CPC cannot attend the preliminary meeting of a clinical placement that is the internship student's final opportunity, the personal tutor/UCD nominee will be informed of this and will attend.



Programme Requirements for Progression and Description of Outcomes for Internship Clinical modules

BSc General Nursing BSc Mental Health Nursing BSc Children's and General Nursing BSc Midwifery

Programme Derogations

Derogations are implemented to ensure that the standards of progression within clinical internship modules are met. Derogation describes where a module or programme is granted formal exemption from the University Academic Regulations. Approval of derogations is granted by the University Undergraduate Programme Board.

Derogation 1

All clinical modules in each stage of the three nursing programmes and midwifery programme must be passed before the student can complete the programme.

A student who fails an internship clinical placement in stage four having had two attempts will be ineligible to continue in that nursing or midwifery programme. No subsequent attempt can be considered except with written agreement of the Director of Nursing/Midwifery of the clinical partner site and through application to the School of Nursing, Midwifery and Health Systems' Governing Board.

Derogation 2

- **General and Mental Health:** students must pass 4A and 4B NCADs) before they can progress to 4C and 4D NCADs). Similarly, within the NCADs, students must achieve NCAD 4C before progressing to NCAD 4D.
- **Midwifery:** students must successfully complete Indirect Supervision level MCATs before undertaking Distant Supervision MCATs.
- **Children's and General:** students must successfully complete the Level 1 NCAD before undertaking the level 2 NCAD. Students must successfully complete the 2 clinical modules in each registration strand before they can move into the next registration strand.

Derogation 3

In addition to passing all the clinical modules, all students must complete their outstanding clinical time before or at the end of internship and their programme.

Note: Upon completing any outstanding clinical time for a module, students must immediately present their time sheets, confirming completion of this time, to the SNM&HS clinical allocations officer. The student should keep a copy of the time sheet as proof of submission. Failure to submit the completed time sheet will result in the student being unable to complete their programme.

Note: As students on internship are 'employees'; the student should refer to the HSE/HR policies.

Description of Outcomes for Internship Clinical modules

Outcome	Description of Outcomes for Internship Clinical modules Description
PASS (P)	NCAD/MCAT standards have been achieved. A Pass (P) grade is awarded.
	Derogation requirement: Students are required to complete all of the clinical time before or at the end of internship and their programme.
Incomplete (IM)	NCAD/MCAT standards have not been achieved, as the student cannot be assessed due to insufficient time in the clinical area, and the student has no extenuating circumstances. An 'Incomplete' (IM) grade is awarded.
	 Students will be given only one opportunity to attend a clinical placement to achieve outstanding standards in the NCAD/MCAT. This re-scheduled time is considered part of the first attempt. Normally the time required to complete the clinical assessment will be equivalent to the outstanding time for that clinical placement. If the standards are not completed during this one opportunity, due to absenteeism, the CPC will contact the personal tutor. The case will be reviewed and a plan of action will be put in place with the involvement of the Clinical Allocations Office. The Incomplete (IM) will only become a Pass (P) when all standards have been achieved. Derogation requirement: Students are required to complete all of the clinical time before or at the end of internship and their programme.
Incomplete Extenuating Circumstance (IX)	NCAD/MCAT standards have not been achieved due to extenuating circumstances. An 'Incomplete with Extenuating' (IX) grade is awarded based on a recommendation from the Extenuating Circumstances Approval Committee.
	 Remediation strategy: The student is required to undertake a supplemental placement which is considered as part of the first attempt. This provides an opportunity to complete the unattained/incomplete standards in the NCAD/MCAT. The supplemental placement duration may vary to meet the needs of individual students. The IX grade will only become a Pass (P) when all standards have been achieved. Derogation requirement: Students are required to complete all of the clinical time before or at the end of internship and their programme.

Fail (F) on 1st attempt

NCAD/MCAT standards have not been achieved. A Fail grade is awarded.

Remediation strategy for second attempt

- The student is required to undertake a repeat practice placement.
- The duration of the repeat practice placement is the same as the 1 st (original) practice placement.
- The assessment will be the same level as the original NCAD/MCAT.
- The student is required to complete a new NCAD/MCAT and must achieve all standards of that assessment.
- The outcome grade for the 2nd attempt will be presented at the next available examination board.

Derogation requirement: Students are required to complete all of the clinical time before or at the end of internship and their programme.

Fail (F) on 2nd attempt

NCAD/MCAT standards have not been achieved. A Fail grade is awarded. As per the progression derogation, a student who fails an internship practice placement in stage four having had <u>two attempts</u> will be ineligible to continue in that nursing or midwifery programme.

 No subsequent attempt can be considered except with written agreement of the Director of Nursing/Midwifery of the clinical partner site and through application to the School of Nursing, Midwifery and Health Systems' Governing Board.

No Grade (NM)

Failure to attend and/or present a completed NCAD/MCAT assessment to the personal tutor, with no evidence of extenuating circumstances.

Remediation strategy:

- No Grade (NM) is treated the same as a fail grade and considered as a clinical attempt
- The student is required to repeat the clinical module.



PROTOCOL FOR BSc NURSING & MIDWIFERY STUDENTS WISHING TO AVAIL OF COMPASSIONATE LEAVE WHILST ON SUPERNUMERARY CLINICAL PLACEMENT AND INTERNSHIP PLACEMENT

BSc General Nursing
BSc Mental Health Nursing
BSc Children's and General Nursing
BSc Midwifery

UCD School of Nursing, Midwifery and Health Systems, and the clinical partner sites, aim to support nursing and midwifery students who need to avail of compassionate leave while on clinical placement. Compassionate leave is granted at the **discretion** of the UCD School of Nursing, Midwifery and Health Systems and the healthcare institution. Students can also contact their personal tutor and/or student advisor, chaplain, programme and/or stage coordinators to avail of additional UCD support.

Supernumerary

- > Students on supernumerary clinical placement must request Compassionate Leave from their Clinical Placement Co-ordinator and/or Personal Tutor.
- > Students on supernumerary clinical placement may be granted:
 - Up to a maximum of **three** working days on the death of an immediate relative (for example, father, mother, brother, sister, mother-in-law, father-in-law, grandparent, aunt, uncle, niece or nephew).
 - on the death of a spouse/partner or child, the maximum number of days may be increased to **five** consecutive days.
- If the period of compassionate leave impacts on the student's ability to successfully complete his/her clinical placement, then the student must complete any outstanding clinical time as per UCD School of Nursing, Midwifery and Health Systems Guidelines.
- > Students are advised to read this policy in conjunction with section 7 of the UCD Parental Leave policy which addresses compassionate leave as force majure leave (see policy document http://www.ucd.ie/hr/leave/parentalleave/)

Internship

> The local hospital policy/guideline on compassionate leave must be followed by students on **internship placement**, which may differ from this protocol.

Students may need to refer to other relevant UCD policies i.e.: policy on extenuating circumstances, late submission of course work and/or leave of absence/withdrawal policy.

Staff guidelines for responding to clinical or academic issues raised by UCD BSc or HDip Nursing and Midwifery Student(s)

These guidelines outline the principles and procedures agreed by UCD School of Nursing, Midwifery and Health Systems (SNMHS) and partner hospitals to direct how issues raised in one service or institution and which pertain more properly to the other, should be addressed. From time to time, 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 the primary considerations at all times.
- 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, s\he will:
 - o draw the student(s) attention to these guidelines and
 - o follow appropriate communication lines within UCD SNMHS
- The Clinical Placement Coordinator (CPC), Clinical Nurse or Midwife Manager (CNM/CMM), Practice Development Coordinator, CNM 3 or the Director of the Centre for Nurse Education (CNE), the Acting Director/Director of Nursing or Midwifery (ADON, 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 and with the 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 the Dean of Nursing and Head of the UCD SNMHS will be kept informed of progress and outcomes.

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, s\he will:
 - o draw the student(s) attention to these guidelines and
 - o follow appropriate communication lines within the Clinical Service
- The UCD Programme Director, Personal Tutor, Associate Dean or Dean of Nursing and Programme Director, 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 Dean of Nursing and Head of the UCD SNMHS and Associate Dean for Undergraduate Programmes will agree procedures as to how major 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 Dean of Nursing and 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:		
Please document the individual principles, associated assessment criteria and any essential skills that were not attained				
Principles	Associated Assessment Criteria	Essential Skills		
Action/Supports Needed				
Signature of Preceptor/Co- Preceptor:	Signature of Student Midwife:		Date/Time:	
Signature of CPC:	Signature of Personal Tutor:			

FINAL LEARNING PLAN – CONTINUED

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

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Acknowledgements: This National Midwifery Competency Assessment Tool (MCAT) has been developed by the Midwifery Competency Assessment Tool Working Group in the Nursing and Midwifery Board of Ireland (NMBI) and Barbara Lloyd Assistant Professor/Lecturer in Midwifery in University College Dublin, in collaboration with clinical partners, preceptors/midwives, academic staff and students across Ireland.

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