

# National Student Midwife Competence Assessment Tool

## Year 3



Full Student Name (as per Candidate Register):	
Student ID number:	
HEI:	
HSP:	

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## STUDENT DECLARATION

*I declare that I have achieved all the signed indicators, domains, skills and performance criteria through my own efforts, and that all signatures are the authentic signatures of the relevant named personnel.*

Student Name (please print name): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**Complete practice placement assessment details in chronological order**

<b>Name of placement incl. core/specialist placement</b>	<b>Allocation dates: from - to</b>	<b>Name of Preceptor/CMM</b>	<b>No of weeks allocated</b>	<b>No of weeks completed</b>



**SCHOOL OF NURSING AND MIDWIFERY, UCC AND  
PARTICIPATING HEALTH SERVICE PROVIDERS**

**PRACTICE PLACEMENT AGREEMENT 2022/2023**

**Version 16/06/22**

**Valid until end of September 2023 unless otherwise indicated**

**INTRODUCTION**

As a **Nursing or Midwifery** student you are studying to obtain a University Degree that will allow you to register with the Nursing and Midwifery Board of Ireland (NMBI) and upon registration, to work as a Registered Nurse or Registered Midwife. Part of being a nurse or midwife is the ability to demonstrate professionalism. Regardless of their position, an effective nurse or midwife is someone who exhibits caring, compassion, empathy, and commitment whilst up-holding the values of accountability, respect, and integrity and the willingness to continuously deliver the highest-quality care to patients/clients/women and babies. To help students, we have listed out key areas that provide evidence of the student demonstrating professionalism in their role.

During your study you will gain practice experiences in various health care settings, interacting with individuals, members of staff and other health care professionals. It is therefore essential that you agree with the conditions set out below to ensure that you can learn effectively and become a competent nurse or midwife. These conditions are based upon NMBI's *Programmes Standards and Requirements and Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives* (2021)

<https://www.nmbi.ie/NMBI/media/NMBI/Code-of-Professional-Conduct-and-Ethics.pdf?ext=.pdf>,

University College Cork's (UCC) Student Policies

<http://www.ucc.ie/en/study/undergrad/orientation/policies/>, and the School of Nursing and Midwifery's

Student Policies <http://www.ucc.ie/en/nursingmidwifery/students/bscnursemid/>. Failure to comply with the conditions set out in this agreement, which you will be asked to sign, may result in you not being allowed to continue in your BSc Nursing or BSc Midwifery programme.

**Student Name:** \_\_\_\_\_ **Student ID Number:** \_\_\_\_\_

**I AGREE THAT:**

1. I will listen to individuals and respect their views, treat individuals politely and considerately, and respect their privacy, dignity, and their right to refuse to take part in teaching.
2. I will act according to NMBI's *Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives* (2021).
3. My views about a person's lifestyle, culture, beliefs, race, colour, gender, sexuality, age, social status, disability or perceived economic worth will not prejudice my interaction with individuals, members of staff, or fellow students.
4. I will respect and uphold an individual's trust in me.
5. I will always make clear to individuals that I am a nursing or midwifery student and not a registered nurse or registered midwife.
6. I will maintain appropriate standards of dress, cleanliness and appearance.

7. I will wear a health service provider identity badge with my name clearly identified.
8. I will familiarise myself and comply with the Health Service Provider's values, policies and procedures.
9. I have read and understood the guidelines as set out in the current Clinical Practice Placement Guidelines <http://www.ucc.ie/en/nursingmidwifery/students/bscnursemid/>.
10. I understand and accept to be bound by the principle of confidentiality of individuals' records and data. I will therefore take all necessary precautions to ensure that any personal data concerning individuals, which I have learned by virtue of my position as a nursing student or a midwifery student, will be kept confidential. I confirm that I will not discuss individuals with any other party outside the clinical setting, except anonymously. When recording data or discussing care outside the clinical setting, I will ensure that individuals cannot be identified by others. I will respect all Health Service Providers' and individuals' records. I understand that patient/client /women's records must never be left where an unauthorised person can access them. I also understand that at the end of a clinical placement shift, any notes that I record containing patient/client/women's details, medical and/or details of patients/clients, women and babies, staff, or other confidential HSP information (e.g. handover notes) must be either shredded on site or placed in a HSP confidentiality bin for shredding at a later date. Professional or personal issues around confidentiality should be addressed with the Preceptor/CPC/CDC/Link Lecturer. I understand that in preparing for clinical practice placement I am required to complete the **Fundamentals of GDPR Learning Module** on HSEland <https://www.hseland.ie/dash/Account/Login>
11. I am aware that the School of Nursing and Midwifery, UCC shares information (student number, name, address, email, phone contact details, age, occupational health clearance, (yes/no), year of programme, vaccination status (yes/no), garda vetting clearance (yes/no), completion of mandatory skills (yes/no), next of kin contact details with my allocated placement area(s) (i.e. Allocation Liaison Officers and Clinical Placement Coordinators) via the ARC system for the sole purpose of clinical placement organisation and planning as part of the BSc Nursing/BSc Midwifery Placement.
12. I have read and understand the BSc Programme's Grievance and Disciplinary Procedures <http://www.ucc.ie/en/nursingmidwifery/students/bscnursemid/>
13. I understand that, if I have (or if I develop) an impairment or condition, **it is my responsibility** to seek advice regarding the possibility that it may impact on my ability to learn, to perform safely in the clinical environment, or affect my personal welfare or the welfare of others. An appropriate person to seek advice from in the clinical setting may be an Allocations Liaison Officer, Clinical Placement Coordinator, Staff Nurse or Staff Midwife. I understand **it is also my responsibility** to declare the impairment or condition on the relevant health disclosure form which can be found at the following link: <https://www.ucc.ie/en/academicgov/aago-policies/fitnesstopractise/>  
I accept that only through disclosure of this impairment/condition can an appropriate plan of support to reach required clinical learning outcomes/competencies be explored. In addition, in the event that a preceptor or other health care professional observes or is made aware by the student of an impairment or condition, it is their responsibility to seek advice regarding the possibility that the impairment or condition may impact on your ability to learn, to perform safely in the clinical environment, or affect your personal welfare or welfare of others. After seeking advice, the appropriate support and action/reasonable accommodations will be provided and taken. Following a discussion with the host health service provider, I also



understand, that is my responsibility to provide consent for my host health care provider to disclose my impairment or condition to external clinical sites where I may be placed so that the appropriate support, assessment and reasonable accommodations can be undertaken and implemented.

14. I understand that if I have any criminal conviction(s) during the programme that I will declare same on the relevant Fitness to Practice disclosure form that can be located at the following link: <https://www.ucc.ie/en/academicgov/aago-policies/fitnesstopractise/>
15. If I am returning from a period of illness/hospitalisation/surgery, it is expected that I report this to the Allocation Liaison Officer (attached to my Health Service Provider), as I may be required to attend the occupational health department prior to accessing my clinical placement.
16. I understand and accept that any dispute between parties in relation to this Agreement, outside of UCC's and NMBI's relevant regulations, may be referred to the BSc Nursing and Midwifery Joint Disciplinary Committee for a decision.
17. I confirm that I shall endeavour to recognise my own limitations and shall seek help/support when my level of experience is inadequate to handle a situation (whether on my own or with others), or when I or other individuals perceive that my level of experience may be inadequate to handle a situation.
18. I shall conduct myself in a professional and responsible manner in all my actions and communications (verbal, written and electronic including text, e-mail or social communication media).
19. I will attend all scheduled teaching sessions and all scheduled clinical placements, as I understand these are requirements for satisfactory programme completion. If I am unable to attend any theoretical or Mandatory/Essential Skills element (including online requirement) of the programme, I will notify the Attendance Monitoring Executive Assistant in G.03 (prior to scheduled date) and provide a written explanation for the Module Leader as soon as possible and in accordance with the current Mandatory and Essential Skills Policy (<http://www.ucc.ie/en/nursingmidwifery/students/bscnursemid/>). I will also inform the relevant HSP Allocation Liaison Officer (ALO) prior to the commencement date of my clinical placement. If I am then unable to attend my scheduled clinical placement due to the above reasons, I will act according to Local HSP Guidelines and the Practice Placement Agreement and will inform the relevant personnel in a timely manner e.g. Clinical Placement Coordinator (CPC), Clinical Nurse Manager (CNM), Clinical Midwifery Manager (CMM) as soon as possible.
20. I understand that students are **not permitted** to arrange/book holidays during clinical placement blocks.
21. I understand and accept that travelling to placements will be expected throughout the duration of my programme. Typically travel will be within the Munster region. This is to ensure that the programme I have registered for meets the required clinical instruction, set out by the NMBI (Nursing and Midwifery Board of Ireland).
22. I understand that when engaging in **social media** and **social networking** that I must act professionally at all times and keep posts positive in addition to patient or person free. I will respect patient/client's /woman's/family's privacy and confidentiality. I understand that I must

protect my professionalism and reputation. I will keep my personal and professional life separate. I will check my privacy settings and respect the privacy of others. I will consider the implications of what I am posting. I will avoid posting in haste or anger. I will not respond to other posts in haste. Please read NMBI's Guidance document in relation to social media and social networking: [Guidance to Nurses and Midwives on Social Media and Social Networking](#)

23. I understand that if I have a conscientious objection based on religious or moral beliefs, which is relevant to my professional practice, I will share this with an appropriate person in the clinical setting. Even if I have a conscientious objection, I will provide care to a patient in an emergency where there is a risk to the patient's life (The Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives 2021 p.14, Principle 2, Standard 7).
24. I know that I have a personal responsibility to protect myself, my patients/clients/women and babies and the general public from the potential of Covid-19 virus transmission. I will ensure that:
- I am aware of COVID-19 symptoms or other related pandemic symptoms. Please see: <https://www2.hse.ie/coronavirus/>
  - I understand that if I have symptoms of COVID-19 or acute infections such as symptoms of viral respiratory tract infection or gastroenteritis, that I will undertake not to present myself to clinical placement or to the University.
  - I will ensure that I keep myself up to date with and adhere to current **National Public Health Advice regarding COVID-19**.
  - I will undertake the Infection Prevention and Control training recommended by the School of Nursing and Midwifery and the HSE.
  - I will ensure that I abide by the rule of 'bare below the elbows/bare above the wrist' while on clinical placement.
  - I will comply with Infection Prevention and Control directions given by HSE and other Clinical staff when I am in clinical areas.
  - I undertake to cooperate with requirements for management of outbreaks or other incidents of infection including providing samples for testing where required.
  - I will commit to declaring that I am free of key symptoms of COVID-19 each day before I present myself to clinical placement by completing the **UCC Covid Tracker and Day Pass App**. I understand that if I do not receive a day pass, I do not attend scheduled clinical placement. I will inform the HSP ALO/CPC of absence as per local HSP guidelines.

Students can move from a placement in one institution to a placement in another without an interval of time as part of their programme. Thus, I undertake to:

- Adhere to recommended Infection Prevention and Control Practice at all times when interacting with all individuals during clinical placement.
- Complete the **UCC Covid Tracker and Day Pass App** and not present to the new placement area if a day pass has not been issued.
- Complete the **UCC Covid Tracker and Day Pass App** in cases when I am reassigned from one institution/service to another on completion of the placement in one institution/service. (For example, if I am moving from one hospital to a community unit or from a primary care service to a hospital).
- Similarly, I understand that if I work in a healthcare setting during the same period as attending clinical placements, I should complete this **UCC Covid Tracker and Day Pass App** on an ongoing basis.

I understand that vaccinations are part of occupational health requirements for nursing and midwifery undergraduate programmes (e.g. Hepatitis B). I understand that completion of the recommended vaccination programme is a **pre-requirement** for access to clinical placements. As clinical placements are a critical component of nursing and midwifery undergraduate programmes and are regulated by requirements set down by the Nursing and Midwifery Board of Ireland, failure to complete the recommended vaccination programme can delay progression through the programme and can potentially prevent completion of a nursing or midwifery educational undergraduate programme with UCC.

I understand that **sharing of information regarding vaccination status** will be a **pre-requirement** for access to clinical placements.

For students who are unable to receive the required vaccination programme **due to a medical contraindication**, they are advised to make contact with the Head of School Professor Josephine Hegarty, who will in turn refer the student for assessment by the University's designated Occupational Health Provider.

### **Additional declarations for students who are not vaccinated against respiratory viruses (SARS-CoV-2 (Covid19 and/or Influenza)**

Please tick answer if relevant to you:

I have not completed the vaccination programme for respiratory viruses (SARS-CoV-2 (Covid19 and/or Influenza) as recommended by the HSE, thus I am agreeing to the following additional actions as part of this practice placement agreement:

- I have read and considered the information pertaining to vaccination presented in Appendix 1
- In line with enabling risk management strategies to be implemented I will disclose my vaccination status to the Nurse/Midwife in Charge & Clinical Placement Coordinator (CPC) in each ward/unit I am allocated to
- I am aware of my daily responsibilities in terms of self-monitoring for evidence of Covid19 infection and the need to complete UCCs Covid-19 symptom tracker App to obtain a daily pass prior to clinical placement.
- I have chosen not to be vaccinated against key respiratory viruses (SARS-CoV-2 and Influenza) in accordance with current public health guidance I will, to the greatest degree practical, limit contact with patients in high-risk areas in particular haematology and oncology in-patient areas, haemodialysis services, intensive care units including neonatal intensive care units<sup>1</sup>
- I have chosen not to be vaccinated against key respiratory viruses (SARS-CoV-2 and Influenza) in accordance with current public health guidance I will not engage in unsupervised learning activity that places high-risk patients /clients at risk of infection related to the students vaccination choice
- I understand even with all of the measures put in place to lower the risk to unvaccinated students attending on clinical placement, the risk to the student of contracting Covid19 is not eliminated
- I am aware of the evidence on transmission of COVID19 for those without vaccination; the evidence supports the increased risk of morbidity, mortality and hospitalisation

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<sup>1</sup> Please note this list can vary and any updates will be notified to students as soon as is practicable.

- I am aware that as national guidance, legislation, or local situations change that clinical placement availability may be affected for unvaccinated students
- I confirm that I have been offered vaccination and that I understand that vaccination remains available to me if I change my mind or if my circumstances change.
- I confirm that I have read and understand the risks and my responsibilities in relation to undertaking my clinical placement whilst not having completed a Covid19 vaccination programme.

By my signature hereunder I confirm that I have read and understood all the above conditions and that I agree to comply with ALL of these conditions for the duration of the BSc Programme.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Signed on behalf of the Health Service Provider:**

Health Service Provider: \_\_\_\_\_

*Please print name*

Director of Nursing/Midwifery/Nominee/Title: \_\_\_\_\_

*Please print name*

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Signed on behalf of University College Cork:**

Head, School of Nursing and Midwifery/Nominee/Title: \_\_\_\_\_

*Please print name*

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## **Appendix 1 Information relating to Covid19 Vaccinations**

As nursing and midwifery students at the School of Nursing and Midwifery, University College Cork, vaccinations are advocated not only in the interest of the individual student, but also as a protection to health service users and workers, some of whom may have medical vulnerabilities. Getting vaccinated helps to protect people around students, particularly people at increased risk for severe illness from certain viruses.

Access to educational opportunities in some healthcare settings may not be granted to healthcare students if they are not fully vaccinated against COVID-19 including booster dose(s) where indicated, except where COVID-19 vaccination is contra-indicated for them. The very limited conditions or circumstances where vaccination against COVID-19 is contra-indicated are listed in the immunisation guidelines for Ireland<sup>2</sup>. In many instances it may not be possible for the Higher Educational Institutions to provide alternative training/educational opportunities to replace this access. As placements are a critical component of nursing and midwifery programmes and are regulated by the Nursing and Midwifery Board of Ireland (NMBI) programme requirements, this in turn may delay progression through and potential completion of a nursing or midwifery educational programme at UCC. The number of weeks and placement categories are predetermined by NMBI for registration purposes. As many of the placement categories are deemed “High risk areas”- this in turn may mean that UCC will be unable to provide access to such placement areas during a nursing or midwifery programme for unvaccinated students. Furthermore, from a practical perspective if outbreaks should occur on wards/units the student will need to be reallocated thus interrupting preceptorship linkage, assessment and necessitating reorientation to new environments. In the incidence where an unvaccinated student is reallocated placement area due to an increased COVID risk to student or patients, completion of assessments and associated documentation and the reorganisation of a placement allocation may not be achieved in the allocated time frame of the placement.

According to the Health Service Executive:

- “Frontline Healthcare Workers (HCWs) have a higher exposure to COVID-19 virus due to the nature of their work”.
- “During outbreaks of vaccine preventable disease, for which there is a safe and effective vaccine, institutions have a responsibility to provide and promote immunisation to staff to protect them from infection and disease. Healthcare institutions have a further responsibility to limit patient/service user exposure and the exposure of other staff to risk of infection from individuals who are not immunised”.
- “European Centre for Disease Prevention and Control have stated that ‘COVID-19 vaccines licensed in the EU/EEA have been shown during clinical trials to be highly effective in providing protection against symptomatic and severe COVID-19. Evidence from real-life usage of COVID-19 vaccines has confirmed these clinical trial findings and showed high vaccine effectiveness against PCR-confirmed SARS-CoV-2 infection.’”
- “All Category A positions (includes student nurses and midwives) must be assessed according to the level of risk of exposure to COVID-19 in the context of work location and client group”

Thus, UCC’s School of Nursing and Midwifery in line with Government policy encourages and supports nursing and midwifery students to get the Covid19 vaccine. Full details of the HSEs COVID19 vaccination programme can be found at: <https://www2.hse.ie/screening-and-vaccinations/covid-19-vaccine/>

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<sup>2</sup> <https://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/covid19.pdf>

## Introduction

This document contains the Competence Assessment Tool (CAT) for Year 3 of the BSc (Hons) Midwife Registration programme and guidance for its use.

The **CAT** and guidance document has been developed by the Nursing and Midwifery Board of Ireland (NMBI) in consultation with relevant Higher Education Institutes (HEIs) / University and associated healthcare providers.

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 CAT acts as a record of on-going achievements in clinical practice over the four-year Midwife Registration programme, which is a requirement of the NMBI to register as a midwife in the Midwives Division of the Nurses and Midwives Register.

This guide has been developed to help the student and their Preceptor/Associate Preceptor (Co-preceptor) complete the CAT. Each year the student will be assessed in core midwifery practice area/s at incremental levels by Preceptors/Associate Preceptor (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  
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/Associate 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 CAT.

### **Competencies for Entry to the Midwives Division of the Nurses and Midwives Register maintained by the NMBI.**

Competence is defined as 'the ability of the Registered Midwife to practise safely and effectively' (NMBI 2015 p2), 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 2021) and are based on the Practice Standards for Midwives (NMBI 2015).

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

The aim of the CAT is to ensure that, on completion of the Midwife Registration programme, students provide safe, effective, evidence-based, and compassionate midwifery care to women and their babies before and during pregnancy, in labour and at birth and postnatal, 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 and associated skills 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 CAT, specific to the year of the Midwife Registration programme.

Year	Level and Description of Supervision	Scope of Practice
<b>Three</b>	<b>Indirect Supervision:</b> Defined as the Preceptor/Associate 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.	The student can identify the needs of the women and their families, and beings to adopt a problem-solving approach to the provision of safe midwifery care. The student actively participates in the care of women and their babies and is able to demonstrate the requisite knowledge, skills and professional behaviours under the indirect supervision of the midwife. It may be difficult for the student to prioritise care in particular situations. The student demonstrates awareness of the need for best practice and supports care with evidence and can identify their learning needs from clinical experience.

In each year of the Midwife Registration programme, all competencies and their associated assessment criteria and skills must be assessed at least once and successfully achieved 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 Higher Education Institute (HEI)/ University.

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

Successful completion of the CAT facilitates student 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 CAT document (i) is available on practice/clinical placement, (ii) it is completed accurately and (iii) submitted as per HEI guidelines on the prescribed submission date. It must be presented on request by the student to the Preceptor/Associate Preceptor (Co-preceptor), members of the Midwifery Practice Development team and to the relevant HEI personnel. While the CAT was developed and published by the NMBI, the governance of the process involved in assessment of competence remains with the respective HEI. The CAT document remains the property of the HEI.

Prior to the start of practice/clinical placement the student should review their learning needs incorporating any earlier experience of the practice/clinical settings and identify specific learning objectives 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 potential learning objectives with the Clinical Placement Coordinator in Midwifery (CPC), practice/clinical placement module leader or link lecturer.

The student is orientated to the placement on **day 1** of the practice/clinical placement, ideally by their allocated Preceptor/Associate Preceptor (Co-preceptor). Where this is not possible, a named midwife should be allocated to work with the student and details of Preceptor/ Associate 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/Associate Preceptor (Co-preceptor). Preceptors/Associate preceptor (Co-preceptor) are midwives *'who have a role in supporting, supervising and assessing students, have completed a teaching and assessment course approved by NMBI that enables them to support, guide and assess students in the clinical practice environment and assist students to learn the practice of midwifery'* (NMBI 2016 p53). At this interview, the student, and Preceptor/Associate Preceptor (Co-preceptor):

- Identify learning needs, objectives, opportunities, and resources specific to this practice/clinical placement. The degree of supervision expected, as prescribed by the Midwife Registration Programme Standards and Requirements (NMBI 2016) is discussed. In Year 3, **Indirect Supervision** is provided which is defined as 'the Preceptor/Associate Preceptor (Co-preceptor) being accessible whenever the student is taking the lead in providing care to women and their babies'. (NMBI 2016p19). The student is expected to have observed and participated in practice with the Preceptor/Associate Preceptor (Co-preceptor) and be able to describe the care provided.
- The student and Preceptor/Associate Preceptor (Co-preceptor) discuss the competencies, assessment criteria and associated skills, which the student is expected to achieve on completion of the practice/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 is provided and documented for future learning and competence attainment. The follow up/feedback page should be used throughout the practice/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/Associate Preceptor (Co-preceptor) and any other supervising midwives where continuity of Preceptor is not possible.
- Identify and document renegotiated learning objectives.

### **Final interview**

At the final interview, the student, and Preceptor/Associate Preceptor (Co-preceptor):

- Review the competencies, the assessment criteria, and associated skills that the student is expected to achieve on completion of the practice/clinical placement.
- The student is deemed to have passed or failed in the assessment of competence.



- Feedback is provided by the Preceptor/Associate Preceptor (Co-preceptor) and student, and documentation is completed.
- This should be accompanied by written comments by the student and the Preceptor/Associate Preceptor (Co-preceptor) on the overall process and result of the assessment of competence to guide future learning needs.

**Assessment of the Student includes:**

- Observation of **relevant knowledge, skills, and professional behaviours** in the provision of care.
- Demonstration by the student through participation in the provision of care.
- Exploration of rationale for care with the student.
- Discussion with other midwives who have supervised and supported the student in practice.
- Demonstration by the student in a simulated situation, where demonstration in practice is not possible.
- Reference to comments on 'follow up/feedback' sheet and to development plans if used during the placement.
- Review of student's attendance during 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/Associate Preceptor (Co-preceptor), in consultation with the student, should consult with the Clinical Placement Coordinator in Midwifery, and a **development plan** must be put in place to support the student to successfully complete the relevant competencies over the remaining time of the practice/clinical placement. Link Lecturers' also need to be informed in the development plan.

The development plan must be:

- Recorded in the follow up/feedback sheet 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 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/Associate Preceptor (Co-preceptor) documents the reason/s for a failed assessment of competence and complete an **action plan** in consultation with the student, the Clinical Placement Coordinator in Midwifery and, where appropriate, link lecturer.

The written action plan must provide:

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

If a student is unsuccessful in any element of the assessment of competence including skills element, the student will have a **minimum of 4 weeks** practice/clinical placement to repeat the complete assessment.

Procedures specific to each HEI/ University in relation to a failed assessment of competence e.g., informing the relevant personnel in the HEI, arrangement of practice/clinical placement to facilitate reassessment will be provided locally and must be adhered to.

### **The Role and Responsibilities of the Midwifery Student**

- The student is responsible for completion and submission of the completed CAT to the HEI / University on the prearranged 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 CAT.
- If there are any operational difficulties in arranging working with a named Preceptor/Associate Preceptor (Co-preceptor) or organising practice/clinical assessment, the student must consult with the Clinical Midwifery Manager (CMM2) or deputy. If the difficulty cannot be resolved, the student should then contact the Clinical Placement Coordinator in Midwifery.
- Procedures specific to each HEI, regarding a failed assessment of competence e.g., informing the relevant personnel in the HEI, arrangement of practice/clinical placement to facilitate reassessment etc. will be provided locally and must be adhered to.

### **The Role and Responsibilities of the Preceptor/Associate Preceptor (Co-preceptor)**

- The Preceptor/Associate Preceptor (Co-preceptor) must be a Registered Midwife and is a gatekeeper to the Register of Midwives maintained by the NMBI and therefore plays a vital role in promoting and protecting safety for women and their babies accessing maternity services.
- The Preceptor/Associate Preceptor (Co-preceptor) 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 CAT.
- All Preceptor/Associate Preceptor (Co-preceptor) must have 'completed a teaching and assessment course approved by NMBI that enables them to support, guide and assess students in the clinical practice environment and assist students to learn the practice of midwifery' (NMBI 2016 p53).
- The Preceptor/Associate Preceptor (Co-preceptor) should facilitate the student in arranging the Initial, Intermediate and Final interviews and use these interviews to:
  - Review learning outcomes specific to the practice/clinical area.
  - Identify learning opportunities and learning resources.
  - Assess learning needs in consultation with the student.
  - Identify competencies to be achieved including assessment criteria and associated skills.
  - Provide ongoing feedback and direction to the student.
  - Complete documentation.
- The Preceptor/Associate Preceptor (Co-preceptor) and the student will complete an action plan if the student is unsuccessful in achieving competence.
- If a student has been absent, in a placement where he/she is being assessed, the Preceptor/Associate Preceptor (Co-preceptor) can decide not to allow the assessment to proceed. Consultation will take place with the Clinical Placement Coordinator in Midwifery.
- If at any stage, the Preceptor/Associate Preceptor (Co-preceptor), in consultation with the Clinical Placement Coordinator in Midwifery, has concerns about a student achieving their learning outcomes and competencies, the Preceptor/Associate Preceptor (Co-preceptor) may contact the link lecturer to discuss the situation. The link lecturer will provide guidance and support as appropriate.

### **The Role and Responsibilities of the Clinical Placement Coordinator**

- Clinical Practice Co-ordinators (CPC's) are in a unique position as they understand the clinical area and the learning needs of the student. The support provided relates to adaptation to the clinical learning environment and guidance in the achievement of learning outcomes.
- CPC's play a significant role in providing education through discussion and reflection therefore promoting evidence based practice and critical analysis of midwifery care. An integral part of the role of a CPC is to facilitate the student in the identification and optimisation of the learning opportunities thus consolidating and integrating theory into practice.
- CPC's develop trusting relationships with students and are in a position to listen, empathise and advocate the needs of the student. CPC's ensure that the supernumerary status of the student is protected during clinical placement which allows the student to focus primarily on learning opportunities. CPC's works closely with the student and Preceptor, to discuss the students' level of knowledge and clinical performance providing support as appropriate.
- CPC's act as a link between clinical area and the higher educational institutes. The CPC's supports both the student and the preceptor throughout the learning process, monitoring the clinical learning environment to ensure safe practice.

### **The Role and Responsibilities of the Allocations Liaison Officer**

- The role of Student Allocations Liaison Officer (SALO) is to establish, organise and co-ordinate multiple core and specialists clinical placements for Undergraduate and Internship midwifery students in partnership with UCC.
- The Student Allocations Liaison Officer (SALO) ensures each Midwifery student meets the Requirements and Standards for Midwife Registration Education Programme 5<sup>th</sup> Edition (NMBI, 2022 ) regarding clinical placements undertaken.
- The SALO also liaises with Clinical Midwifery Managers within the hospital (CUMH) and the responsible person within the associated hospitals and UCC.
- The SALO liaises with the Clinical Placement Coordinators (CPC's) involved in the educational process within the clinical placement sites.
- The SALO needs to be aware of staffing levels and skill mix in all the clinical areas to ensure students have the required clinical supervision and an optimum learning environment.
- The SALO co-ordinate issues involving Occupational Health issues/requirements, vaccinations and payment of clinical placement allowances where applicable.
- The SALO keeps accurate and up to date information for each student i.e. Placement History Information.
- The SALO ensures Travel Expenses are paid to each student following each clinical placement.

### **The Role and Responsibilities of the Link Lecturer**

- Act as a resource for students, preceptors and clinical placement co-ordinator (CPC) attached to linked placement area, particularly in using the Clinical Learning Outcomes/Competency Booklets.
- Be available to address clinical learning queries specific to students in your named placement area.
- Liaise with CPC to discuss any specific learning issues arising concerning individual students.
- Meet with student, preceptor, and CPC in the event of a Supportive Learning Plan being formulated.

- Communicate details of students' progress to responsible module leader at the end of placement period with specific consideration to their achievement of learning outcomes.

## References

- International Confederation of Midwives (ICM) (2017) International Definition of the Midwife Toronto
- 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
- Nursing and Midwifery Board of Ireland (2015) Practice Standards for Midwives 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

## REFLECTION

**What is reflective learning?** Reflective learning is a learned process that requires time and practice. It is an active process: involving thinking through the issues yourself, asking questions and seeking out relevant information to aid your understanding. Reflective learning works best when you think about what you are doing before, during and after your learning experience. Reflective learning is therefore not only about recognizing your something new; it is also about see reality in a new way. Reflection is an important skill to develop and requires you to think about how you are personally relating to what is happening in the workshop or in your work.

The student is encouraged to reflect on his/her learning experiences, which s/he may wish to draw on in meetings with preceptors, clinical placement co-ordinators (CPC) and link lecturers.

Reflection on clinical practice may help to refine reflective thinking and writing skills.

Students need to complete **one reflection per placement** related to the clinical practice area that they are in e.g. antenatal, intranatal or postnatal. These can be about any aspect of clinical practice and may incorporate any literature that the student considers appropriate to learning.

The student and preceptor/midwife/assessor should sign completed reflective pieces.

### Why do I need to reflect on my practice?

There are many reasons why you need to reflect on your practice. For example, it helps you to acknowledge your thoughts and feelings, thereby enabling you to scrutinise your practice. Following on from this it may prompt you to embrace new ideas and better ways of delivering midwifery care. This helps to improve your midwifery skills and make clearer links between theory and practice. Reflection assists you to identify your own learning needs and develop your practice further. Reflecting on practice will identify for you your own core decision making skills, help you to problem solve and assist you in developing your critical thinking skills

### What should I reflect on?

You can reflect on anything that occurs during clinical placement. It may be an experience that went well, an experience that was particularly demanding, a very ordinary, everyday experience or an experience in which things did not go as planned. You can link your reflective notes back to any one of the Clinical learning outcomes or Domains that you have achieved.

### How can I reflect?

Use Gibbs Cycle (1988) **framework and use all stages of that framework**

- **Start writing as early as possible**, in your own words. You may find it helpful to refer to the literature for examples of how to write reflectively. While there is no right or wrong style of writing up your reflections, these guidelines may make it easier for you
- You are provided with **five hours per week as off ward time** to write up your reflections

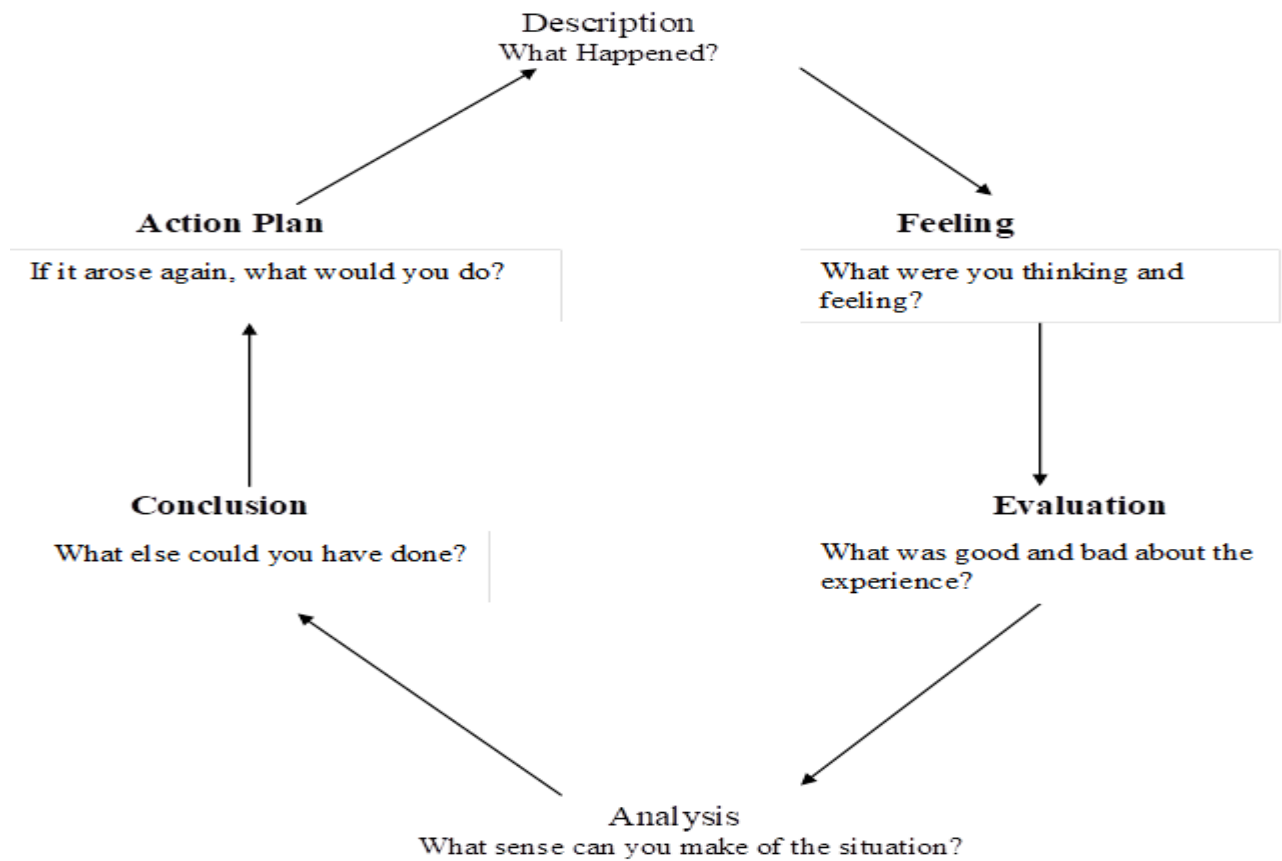
- It may be helpful to write something, leave it, return to it later and then try to question different aspects of this experience
- Remember to maintain confidentiality and anonymity of the individual, staff and placement area
- **Use the supports available** to you e.g. CPC, preceptor, link lecturer, and other students. It may help you to get started by talking through an experience with somebody
- Remember reflection is a skill that you can develop, so the more you practice the better you will become.

**Note: All Reflective Notes must be completed and signed prior to/or at the final interview**

### **References**

- Collington V and Hunt SC (2006) Reflection in midwifery education and practice: an exploratory analysis. Evidence Based Midwifery. Vol 4, No 3, pp 76-82
- Dykes F. (2006) The education of health practitioners supporting breastfeeding women: time for critical reflection. Maternal and Child Nutrition. Vol 2, No 4, pp 204-216
- Gibbs, G. (1988) Learning by Doing A guide to Teaching and Learning' Methods. Oxford Polytechnic, Further Education Unit.
- Minter A. (2005) Teaching and assessing: reflection upon planning, delivery and evaluation. British Journal of Midwifery. Vol 13, No 11, pp 722-725
- Phelan O. (2006) Structured reflection in midwifery practice. All Ireland Journal of Nursing and Midwifery. Vol 2, No 3, pp 18-19

## **GIBBS REFLECTIVE CYCLE**



(Gibbs, 1988), cited in Johns, 2000)

### **Format for Documenting Reflective practice**

**Description of event (what happened?)**

**Feelings** (what I was feeling and thinking)

**Evaluation** (what was good and bad about the experience)

**Analysis** (what sense can I make of the situation – re-evaluating the experience)

**Conclusion** (what else could I have done, what knowledge did or could have informed me)

**Action Plan** (If the situation arose again, what else could I do?)

**References (to support your reflection)**

**Practice Placement Area:**

**Assessment of Competence in Year 3 of the Midwife Registration programme**

<b>Principle 1: Respect for the Dignity of the Person</b>			
<b>Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs, and values</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Discusses how the physiological changes of pregnancy may impact on the woman in her daily life.</li> <li>• Discusses some interventions with the woman which may alleviate the impact of these changes and provide evidence to underpin same.</li> </ul>		
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates an awareness of how best practice informs options and choices of maternity care and how this may impact on pregnancy/birth outcomes.</li> </ul>		
<b>1.3</b> Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women and her family.	<ul style="list-style-type: none"> <li>• Ensures that the women's care is consistent with her cultural and religious beliefs and preferences where appropriate.</li> </ul>		
<b>1.3</b> Demonstrates the ability to provide sufficient evidence- based information to the woman to empower her to make informed decisions about her care and that of her baby.	<ul style="list-style-type: none"> <li>• Demonstrates effective communication skills when providing information to a woman/group of women.</li> </ul>		
<b>1.3</b> Demonstrates the ability to support women to engage with maternity care.	<ul style="list-style-type: none"> <li>• Educates women on the importance of being actively engaged in their own maternity care.</li> </ul>		
<b>1.3</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	<ul style="list-style-type: none"> <li>• Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>		

<b>Principle 2: Professional Responsibility and Accountability</b>			
<b>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)</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>2.1</b> 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.	<ul style="list-style-type: none"> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives and the Practice Standards for Midwives.</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	<ul style="list-style-type: none"> <li>Demonstrates acceptance of accountability for own professional practice.</li> </ul>		
<b>2.3</b> Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> <li>Evaluates own abilities and level of professional competence.</li> </ul>		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	<ul style="list-style-type: none"> <li>With the midwife recognises acts and omissions that may place the woman her baby and colleagues at unnecessary risk.</li> </ul>		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	<ul style="list-style-type: none"> <li>Identifies an emergency situation and is capable of alerting the appropriate health care professionals.</li> </ul>		



<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.1</b> 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.	<ul style="list-style-type: none"> <li>Assesses, plans, implements, and prioritises key aspects of care.</li> <li>Advocates for preferences and supports women to make informed choices with the midwifery team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or in the postnatal period.	<ul style="list-style-type: none"> <li>Prioritises care based on relevant aspects in the woman's history.</li> <li>Participates in caring for women with complex needs.</li> <li>Understands the relevant pathophysiology that must be considered.</li> </ul>		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and /or other healthcare professional during a women's pregnancy labour or the postnatal period.	<ul style="list-style-type: none"> <li>Recognises deviations from normal, the significance of the findings and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates the ability to recognise factors during pregnancy, labour and birth or in the post-natal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.	<ul style="list-style-type: none"> <li>Understands the significance of abnormal findings and how to escalate care.</li> </ul>		
<b>3.5.</b> 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.	<ul style="list-style-type: none"> <li>Understands conditions and emergency situations that necessitate referral to, and consultation with the multidisciplinary team.</li> </ul>		
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).	<ul style="list-style-type: none"> <li>Is able to identify and activate emergency procedures.</li> <li>Demonstrates an understanding of their role as part of the team.</li> </ul>		

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting promoting and supporting breastfeeding.	<ul style="list-style-type: none"> <li>• Is able to support women with infant feeding practices.</li> <li>• Recognises challenges and complications that may be associated with infant feeding and can develop a support plan.</li> </ul>		
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul style="list-style-type: none"> <li>• Uses standard universal infection prevention and control measures.</li> <li>• Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) Medication administration guidance.	<ul style="list-style-type: none"> <li>• Administers medication in compliance with local policy and NMBI guidance.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul style="list-style-type: none"> <li>• Critically reflects in and on own practice.</li> <li>• Uses the learning to inform future learning.</li> </ul>		
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul style="list-style-type: none"> <li>• Identifies and discusses with the midwife how clinical guidelines/policies influence practice.</li> </ul>		
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul style="list-style-type: none"> <li>• Prioritises plans and provides care in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes in their own practice.	<ul style="list-style-type: none"> <li>• Participates in risk assessment and is aware of reporting of clinical incidents.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	<ul style="list-style-type: none"> <li>• Discusses the relevance of audits for practice.</li> </ul>		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	<ul style="list-style-type: none"> <li>• Supports student colleagues.</li> </ul>		

<b>Principle: 4: Trust and Confidence</b>			
<b>Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality.</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>4.1</b> Demonstrates the ability to ensure that the woman and her baby are the primary focus of practice.	<ul style="list-style-type: none"> <li>• Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner.</li> <li>• Includes the woman in plan of care and decision making by using appropriate language.</li> <li>• Obtains informed consent when providing midwifery care.</li> </ul>		
<b>4.2</b> Demonstrates the ability to provide care that is safe, evidence-based, supportive, responsive and compassionate taking into account the needs of the woman, her baby and her family.	<ul style="list-style-type: none"> <li>• Provide midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family.</li> </ul>		
<b>4.3</b> Demonstrates the ability to respect the woman's right to privacy and confidentiality.	<ul style="list-style-type: none"> <li>• Understand how privacy and confidentiality can be breached in accordance with law and safety.</li> </ul>		
<b>4.4</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates a professional judgement and responsibility when sharing the woman's information and only discloses the minimal amount necessary to the appropriate person(s).</li> </ul>		

<b>Principle 5: Collaboration with others</b>			
<b>Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>5.1</b> Demonstrates the ability to provide information in a format that is understandable and accessible to all women and their families.	<ul style="list-style-type: none"> <li>• Provides information that is clear and accurate, at a level which women and their families can understand.</li> <li>• Listens and communicates with women and their families in a manner that is kind, caring and compassionate.</li> </ul>		
<b>5.2</b> Demonstrates the ability to communicate appropriately and effectively with women, their families and with the multidisciplinary healthcare team.	<ul style="list-style-type: none"> <li>• Communicates clearly and consistently with women, their families and members of the multidisciplinary healthcare team using professional language.</li> <li>• Actively listens, observes and responds to verbal and non-verbal cues from the woman and her family.</li> <li>• Actively participates in clinical handover and is able to verbalise the rationale of the care provided.</li> </ul>		
<b>5.3</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Identifies barriers to effective communication.</li> <li>• Demonstrates the ability to identify factors that facilitate effective communication.</li> <li>• Identifies the need for the assistance of a professional interpreter where appropriate.</li> </ul>		
<b>5.4</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Works effectively with midwives and other healthcare professionals with the intent of building professional caring relationships.</li> <li>• Uses appropriate communication tools.</li> <li>• Identifies deviations from the normal and reports promptly to appropriate healthcare professional.</li> </ul>		

<p><b>5.5</b> Demonstrates the ability to record clinical practice in a manner which is clear, objective, accurate, and timely.</p>	<ul style="list-style-type: none"> <li>• Documents care in a clear, concise and accurate manner in the healthcare record.</li> </ul>		
<p><b>5.6.</b> Demonstrate 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.</p>	<ul style="list-style-type: none"> <li>• Participates in discussions with other members of multidisciplinary team.</li> <li>• Respects the views of others and their right to hold and express their views through informed discussion.</li> </ul>		

**Initial interview**

**Core placement area:**

**Orientated to the clinical area**      Yes     No

**Discussion of assessment criteria and skills (Preceptor/Co-preceptor and student):**

--

**Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice/clinical placement:**

--

**Signature of Preceptor/Co-preceptor:**

**Signature of student midwife:**

**Date:**

**Print name:**

**Print name:**

**Date set for mid-point interview:**

**CPCM signature (review of document- where appropriate):**

**Link Lecturer comments & signature (where appropriate):**

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<b>Midpoint interview</b>		
<b>Core placement area:</b>		
<b>Student review of progress to date:</b>		
<b>Preceptor/Co-preceptor review of student's progress to date:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>Date of final interview:</b>		
<b>CPCM signature (review of document):</b>		
<b>Link Lecture comments &amp; signature (where appropriate):</b>		

**Final interview: The Preceptor/Co-preceptor and student review all criteria and skills**  
**Core placement area:**

**Student review:**

**Preceptor/Co-preceptor review:**

**Signature of Preceptor/Co-preceptor:**

**Signature of student midwife:**

**Date:**

**Print name:**

**Print name:**

**All assessment criteria and skills achieved: Pass  Fail**

**CPCM signature (review of document where appropriate):**

**Link Lecturer comments & signature (where appropriate):**



Feedback from other midwives, comment on key areas of progress and identify areas for development from the assessment criteria and skills. Please date, sign and print name for each entry.

<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

## STUDENT REFLECTIVE NOTES

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.  
Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_

**Practice Placement Area:**

**Assessment of Competence in Year 3 of the Midwife Registration programme**

<b>Principle 1: Respect for the Dignity of the Person</b>			
<b>Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Discusses how the physiological changes of pregnancy may impact on the woman in her daily life.</li> <li>• Discusses some interventions with the woman which may alleviate the impact of these changes and provide evidence to underpin same.</li> </ul>		
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates an awareness of how best practice informs options and choices of maternity care and how this may impact on pregnancy/birth outcomes.</li> </ul>		
<b>1.3</b> Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women and her family.	<ul style="list-style-type: none"> <li>• Ensures that the women's care is consistent with her cultural and religious beliefs and preferences where appropriate.</li> </ul>		
<b>1.3</b> Demonstrates the ability to provide sufficient evidence- based information to the woman to empower her to make informed decisions about her care and that of her baby.	<ul style="list-style-type: none"> <li>• Demonstrates effective communication skills when providing information to a woman/group of women.</li> </ul>		
<b>1.3</b> Demonstrates the ability to support women to engage with maternity care.	<ul style="list-style-type: none"> <li>• Educates women on the importance of being actively engaged in their own maternity care.</li> </ul>		
<b>1.3</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	<ul style="list-style-type: none"> <li>• Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>		

<b>Principle 2: Professional Responsibility and Accountability</b>			
<b>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)</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>2.1</b> 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.	<ul style="list-style-type: none"> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives and the Practice Standards for Midwives.</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	<ul style="list-style-type: none"> <li>Demonstrates acceptance of accountability for own professional practice.</li> </ul>		
<b>2.3</b> Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> <li>Evaluates own abilities and level of professional competence.</li> </ul>		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	<ul style="list-style-type: none"> <li>With the midwife recognises acts and omissions that may place the woman her baby and colleagues at unnecessary risk.</li> </ul>		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	<ul style="list-style-type: none"> <li>Identifies an emergency situation and is capable of alerting the appropriate health care professionals.</li> </ul>		

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.1</b> 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.	<ul style="list-style-type: none"> <li>Assesses, plans, implements and prioritises key aspects of care.</li> <li>Advocates for preferences and supports women to make informed choices with the midwifery team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or in the postnatal period.	<ul style="list-style-type: none"> <li>Prioritises care based on relevant aspects in the woman's history.</li> <li>Participates in caring for women with complex needs.</li> <li>Understands the relevant pathophysiology that must be considered.</li> </ul>		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and /or other healthcare professional during a women's pregnancy labour or the postnatal period.	<ul style="list-style-type: none"> <li>Recognises deviations from normal, the significance of the findings and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates the ability to recognise factors during pregnancy, labour and birth or in the post-natal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.	<ul style="list-style-type: none"> <li>Understands the significance of abnormal findings and how to escalate care.</li> </ul>		
<b>3.5.</b> 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.	<ul style="list-style-type: none"> <li>Understands conditions and emergency situations that necessitate referral to, and consultation with the multidisciplinary team.</li> </ul>		
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).	<ul style="list-style-type: none"> <li>Is able to identify and activate emergency procedures.</li> <li>Demonstrates an understanding of their role as part of the team.</li> </ul>		

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting promoting and supporting breastfeeding.	<ul style="list-style-type: none"> <li>• Is able to support women with infant feeding practices.</li> <li>• Recognises challenges and complications that may be associated with infant feeding and can develop a support plan.</li> </ul>		
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul style="list-style-type: none"> <li>• Uses standard universal infection prevention and control measures.</li> <li>• Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) Medication administration guidance.	<ul style="list-style-type: none"> <li>• Administers medication in compliance with local policy and NMBI guidance.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul style="list-style-type: none"> <li>• Critically reflects in and on own practice.</li> <li>• Uses the learning to inform future learning.</li> </ul>		
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul style="list-style-type: none"> <li>• Identifies and discusses with the midwife how clinical guidelines/policies influence practice.</li> </ul>		
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul style="list-style-type: none"> <li>• Prioritises plans and provides care in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes in their own practice.	<ul style="list-style-type: none"> <li>• Participates in risk assessment and is aware of reporting of clinical incidents.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	<ul style="list-style-type: none"> <li>• Discusses the relevance of audits for practice.</li> </ul>		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	<ul style="list-style-type: none"> <li>• Supports student colleagues.</li> </ul>		



<b>Principle: 4: Trust and Confidence</b>			
<b>Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality.</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>4.1</b> Demonstrates the ability to ensure that the woman and her baby are the primary focus of practice.	<ul style="list-style-type: none"> <li>• Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner.</li> <li>• Includes the woman in plan of care and decision making by using appropriate language.</li> <li>• Obtains informed consent when providing midwifery care.</li> </ul>		
<b>4.2</b> Demonstrates the ability to provide care that is safe, evidence-based, supportive, responsive and compassionate taking into account the needs of the woman, her baby and her family.	<ul style="list-style-type: none"> <li>• Provide midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family.</li> </ul>		
<b>4.3</b> Demonstrates the ability to respect the woman's right to privacy and confidentiality.	<ul style="list-style-type: none"> <li>• Understand how privacy and confidentiality can be breached in accordance with law and safety.</li> </ul>		
<b>4.4</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates a professional judgement and responsibility when sharing the woman's information and only discloses the minimal amount necessary to the appropriate person(s).</li> </ul>		

<b>Principle 5: Collaboration with others</b>			
<b>Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>5.1</b> Demonstrates the ability to provide information in a format that is understandable and accessible to all women and their families.	<ul style="list-style-type: none"> <li>• Provides information that is clear and accurate, at a level which women and their families can understand.</li> <li>• Listens and communicates with women and their families in a manner that is kind, caring and compassionate.</li> </ul>		
<b>5.2</b> Demonstrates the ability to communicate appropriately and effectively with women, their families and with the multidisciplinary healthcare team.	<ul style="list-style-type: none"> <li>• Communicates clearly and consistently with women, their families and members of the multidisciplinary healthcare team using professional language.</li> <li>• Actively listens, observes and responds to verbal and non-verbal cues from the woman and her family.</li> <li>• Actively participates in clinical handover and is able to verbalise the rationale of the care provided.</li> </ul>		
<b>5.3</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Identifies barriers to effective communication.</li> <li>• Demonstrates the ability to identify factors that facilitate effective communication.</li> <li>• Identifies the need for the assistance of a professional interpreter where appropriate.</li> </ul>		
<b>5.4</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Works effectively with midwives and other healthcare professionals with the intent of building professional caring relationships.</li> <li>• Uses appropriate communication tools.</li> <li>• Identifies deviations from the normal and reports promptly to appropriate healthcare professional.</li> </ul>		

<p><b>5.5</b> Demonstrates the ability to record clinical practice in a manner which is clear, objective, accurate, and timely.</p>	<ul style="list-style-type: none"> <li>• Documents care in a clear, concise and accurate manner in the healthcare record.</li> </ul>		
<p><b>5.6.</b> Demonstrate 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.</p>	<ul style="list-style-type: none"> <li>• Participates in discussions with other members of multidisciplinary team.</li> <li>• Respects the views of others and their right to hold and express their views through informed discussion.</li> </ul>		

**Initial interview**

**Core placement area:**

**Orientated to the clinical area**      Yes     No

**Discussion of assessment criteria and skills (Preceptor/Co-preceptor and student):**

--

**Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice/clinical placement:**

--

<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	

**Date set for mid-point interview:**

**CPCM signature (review of document- where appropriate):**

**Link Lecturer comments & signature (where appropriate):**

<b>Midpoint interview</b>		
<b>Core placement area:</b>		
<b>Student review of progress to date:</b>		
<b>Preceptor/Co-preceptor review of student's progress to date:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>Date of final interview:</b>		
<b>CPCM signature (review of document):</b>		
<b>Link Lecture comments &amp; signature (where appropriate):</b>		

**Final interview: The Preceptor/Co-preceptor and student review all criteria and skills**

**Core placement area:**

**Student review:**

**Preceptor/Co-preceptor review:**

**Signature of Preceptor/Co-preceptor:**

**Signature of student midwife:**

**Date:**

**Print name:**

**Print name:**

**All assessment criteria and skills achieved: Pass  Fail**

**CPCM signature (review of document where appropriate):**

**Link Lecturer comments & signature (where appropriate):**

Feedback from other midwives, comment on key areas of progress and identify areas for development from the assessment criteria and skills. Please date, sign and print name for each entry.

<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>

<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>



**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.*

*Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_

**Practice Placement Area:**

**Assessment of Competence in Year 3 of the Midwife Registration programme**

<b>Principle 1: Respect for the Dignity of the Person</b>			
<b>Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Discusses how the physiological changes of pregnancy may impact on the woman in her daily life.</li> <li>• Discusses some interventions with the woman which may alleviate the impact of these changes and provide evidence to underpin same.</li> </ul>		
<b>1.3</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates an awareness of how best practice informs options and choices of maternity care and how this may impact on pregnancy/birth outcomes.</li> </ul>		
<b>1.3</b> Demonstrates the ability to respect the diversity of beliefs, values, choices and priorities of the women and her family.	<ul style="list-style-type: none"> <li>• Ensures that the women's care is consistent with her cultural and religious beliefs and preferences where appropriate.</li> </ul>		
<b>1.3</b> Demonstrates the ability to provide sufficient evidence- based information to the woman to empower her to make informed decisions about her care and that of her baby.	<ul style="list-style-type: none"> <li>• Demonstrates effective communication skills when providing information to a woman/group of women.</li> </ul>		
<b>1.3</b> Demonstrates the ability to support women to engage with maternity care.	<ul style="list-style-type: none"> <li>• Educates women on the importance of being actively engaged in their own maternity care.</li> </ul>		
<b>1.3</b> Demonstrates the ability to ensure that the woman is the primary decision maker in all matters regarding her own healthcare and that of her baby.	<ul style="list-style-type: none"> <li>• Actively involves the woman in all decisions regarding her healthcare and that of her baby.</li> </ul>		

<b>Principle 2: Professional Responsibility and Accountability</b>			
<b>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)</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>2.1</b> 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.	<ul style="list-style-type: none"> <li>Practices within the Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives and the Practice Standards for Midwives.</li> </ul>		
<b>2.2</b> Demonstrates the ability to be accountable for their practice to the woman, to the midwifery profession, the Nursing and Midwifery Board of Ireland (NMBI) and the wider community.	<ul style="list-style-type: none"> <li>Demonstrates acceptance of accountability for own professional practice.</li> </ul>		
<b>2.3</b> Works within the scope of practice for a third-year midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> <li>Evaluates own abilities and level of professional competence.</li> </ul>		
<b>2.4</b> Demonstrates the ability to ensure that no act or omission by the student places the woman, her baby, her family, their colleagues, or themselves at unnecessary risk.	<ul style="list-style-type: none"> <li>With the midwife recognises acts and omissions that may place the woman her baby and colleagues at unnecessary risk.</li> </ul>		
<b>2.5</b> Demonstrates the ability to provide care in an emergency situation, or any situation where something occurs that is outside their scope of practice and refer to the most appropriate healthcare professional.	<ul style="list-style-type: none"> <li>Identifies an emergency situation and is capable of alerting the appropriate health care professionals.</li> </ul>		

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.1</b> 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.	<ul style="list-style-type: none"> <li>Assesses, plans, implements and prioritises key aspects of care.</li> <li>Advocates for preferences and supports women to make informed choices with the midwifery team.</li> </ul>		
<b>3.2</b> Demonstrates the ability to assess plan, implement and evaluate care using observation, history taking and clinical assessment to plan individualised care for women during pregnancy, labour and birth or in the postnatal period.	<ul style="list-style-type: none"> <li>Prioritises care based on relevant aspects in the woman's history.</li> <li>Participates in caring for women with complex needs.</li> <li>Understands the relevant pathophysiology that must be considered.</li> </ul>		
<b>3.3</b> Demonstrates the ability to recognise and respond appropriately in a timely manner to any condition (pre-existing or otherwise) and/or event that necessitates consultation with or referral to another midwife and /or other healthcare professional during a women's pregnancy labour or the postnatal period.	<ul style="list-style-type: none"> <li>Recognises deviations from normal, the significance of the findings and refers appropriately.</li> </ul>		
<b>3.4</b> Demonstrates the ability to recognise factors during pregnancy, labour and birth or in the post-natal period that indicate deterioration of the women and/or baby and acts appropriately to escalate the level of care.	<ul style="list-style-type: none"> <li>Understands the significance of abnormal findings and how to escalate care.</li> </ul>		
<b>3.5.</b> 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.	<ul style="list-style-type: none"> <li>Understands conditions and emergency situations that necessitate referral to, and consultation with the multidisciplinary team.</li> </ul>		
<b>3.6</b> Demonstrates the ability to act effectively as a member of the multidisciplinary team in an emergency situation (real or simulated).	<ul style="list-style-type: none"> <li>Is able to identify and activate emergency procedures.</li> <li>Demonstrates an understanding of their role as part of the team.</li> </ul>		

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.7</b> Demonstrates the ability to support and educate women with infant feeding practices which include protecting promoting and supporting breastfeeding.	<ul style="list-style-type: none"> <li>• Is able to support women with infant feeding practices.</li> <li>• Recognises challenges and complications that may be associated with infant feeding and can develop a support plan.</li> </ul>		
<b>3.8</b> Demonstrates the ability to comply with standard universal infection prevention and control measures.	<ul style="list-style-type: none"> <li>• Uses standard universal infection prevention and control measures.</li> <li>• Educates women to minimise infection through safe hygiene practice.</li> </ul>		
<b>3.9</b> Demonstrates the ability to safely manage drug administration, monitoring effects and documenting appropriately in accordance with Midwifery Board of Ireland (NMBI) Medication administration guidance.	<ul style="list-style-type: none"> <li>• Administers medication in compliance with local policy and NMBI guidance.</li> </ul>		
<b>3.10</b> Demonstrates the ability to reflect on their own practice and learning from previous experience in midwifery and can identify future learning needs.	<ul style="list-style-type: none"> <li>• Critically reflects in and on own practice.</li> <li>• Uses the learning to inform future learning.</li> </ul>		
<b>3.11</b> Demonstrates the ability to integrate appropriate national and local guidelines and policies in the provision of evidence-based care.	<ul style="list-style-type: none"> <li>• Identifies and discusses with the midwife how clinical guidelines/policies influence practice.</li> </ul>		
<b>3.12</b> Demonstrates the ability to manage and organise effectively the provision of safe and evidence-based care for a caseload of women and their babies.	<ul style="list-style-type: none"> <li>• Prioritises plans and provides care in consultation with the midwife.</li> </ul>		
<b>3.13</b> Demonstrates the ability to apply clinical risk management processes in their own practice.	<ul style="list-style-type: none"> <li>• Participates in risk assessment and is aware of reporting of clinical incidents.</li> </ul>		
<b>3.14</b> Demonstrates the ability to participate in audits of clinical care in practice.	<ul style="list-style-type: none"> <li>• Discusses the relevance of audits for practice.</li> </ul>		
<b>3.15</b> Demonstrates the ability to promote a quality clinical learning environment by engaging in teaching and supporting peers.	<ul style="list-style-type: none"> <li>• Supports student colleagues.</li> </ul>		

<b>Principle: 4: Trust and Confidence</b>			
<b>Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality.</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>4.1</b> Demonstrates the ability to ensure that the woman and her baby are the primary focus of practice.	<ul style="list-style-type: none"> <li>• Demonstrates dignity, respect, compassion and empathy for the woman and her family in a professional manner.</li> <li>• Includes the woman in plan of care and decision making by using appropriate language.</li> <li>• Obtains informed consent when providing midwifery care.</li> </ul>		
<b>4.2</b> Demonstrates the ability to provide care that is safe, evidence-based, supportive, responsive and compassionate taking into account the needs of the woman, her baby and her family.	<ul style="list-style-type: none"> <li>• Provide midwifery care that is sensitive, kind, compassionate, supportive and recognises the diverse needs of the woman and her family.</li> </ul>		
<b>4.3</b> Demonstrates the ability to respect the woman's right to privacy and confidentiality.	<ul style="list-style-type: none"> <li>• Understand how privacy and confidentiality can be breached in accordance with law and safety.</li> </ul>		
<b>4.4</b> 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.	<ul style="list-style-type: none"> <li>• Demonstrates a professional judgement and responsibility when sharing the woman's information and only discloses the minimal amount necessary to the appropriate person(s).</li> </ul>		

<b>Principle 5: Collaboration with others</b>			
<b>Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team</b>			
<b>Indirect Supervision</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>5.1</b> Demonstrates the ability to provide information in a format that is understandable and accessible to all women and their families.	<ul style="list-style-type: none"> <li>• Provides information that is clear and accurate, at a level which women and their families can understand.</li> <li>• Listens and communicates with women and their families in a manner that is kind, caring and compassionate.</li> </ul>		
<b>5.2</b> Demonstrates the ability to communicate appropriately and effectively with women, their families and with the multidisciplinary healthcare team.	<ul style="list-style-type: none"> <li>• Communicates clearly and consistently with women, their families and members of the multidisciplinary healthcare team using professional language.</li> <li>• Actively listens, observes and responds to verbal and non-verbal cues from the woman and her family.</li> <li>• Actively participates in clinical handover and is able to verbalise the rationale of the care provided.</li> </ul>		
<b>5.3</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Identifies barriers to effective communication.</li> <li>• Demonstrates the ability to identify factors that facilitate effective communication.</li> <li>• Identifies the need for the assistance of a professional interpreter where appropriate.</li> </ul>		
<b>5.4</b> Demonstrate 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.	<ul style="list-style-type: none"> <li>• Works effectively with midwives and other healthcare professionals with the intent of building professional caring relationships.</li> <li>• Uses appropriate communication tools.</li> <li>• Identifies deviations from the normal and reports promptly to appropriate healthcare professional.</li> </ul>		



<p><b>5.5</b> Demonstrates the ability to record clinical practice in a manner which is clear, objective, accurate, and timely.</p>	<ul style="list-style-type: none"> <li>• Documents care in a clear, concise and accurate manner in the healthcare record.</li> </ul>		
<p><b>5.6.</b> Demonstrate 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.</p>	<ul style="list-style-type: none"> <li>• Participates in discussions with other members of multidisciplinary team.</li> <li>• Respects the views of others and their right to hold and express their views through informed discussion.</li> </ul>		

**Initial interview**

**Core placement area:**

**Orientated to the clinical area**      Yes     No

**Discussion of assessment criteria and skills (Preceptor/Co-preceptor and student):**

**Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice/clinical placement:**

**Signature of Preceptor/Co-preceptor:**

**Signature of student midwife:**

**Date:**

**Print name:**

**Print name:**

**Date set for mid-point interview:**

**CPCM signature (review of document- where appropriate):**

**Link Lecturer comments & signature (where appropriate):**

**Midpoint interview**

**Core placement area:**

**Student review of progress to date:**

**Preceptor/Co-preceptor review of student's progress to date:**

**Signature of Preceptor/Co-preceptor:**

**Signature of student midwife:**

**Date:**

**Print name:**

**Print name:**

**Date of final interview:**

**CPCM signature (review of document):**

**Link Lecture comments & signature (where appropriate):**

<b>Final interview: The Preceptor/Co-preceptor and student review all criteria and skills</b>		<b>Core</b>
<b>placement area:</b>		
<b>Student review:</b>		
<b>Preceptor/Co-preceptor review:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>All assessment criteria and skills achieved: Pass <input type="checkbox"/> Fail <input type="checkbox"/></b>		
<b>CPCM signature (review of document where appropriate):</b>		
<b>Link Lecturer comments &amp; signature (where appropriate):</b>		

Feedback from other midwives, comment on key areas of progress and identify areas for development from the assessment criteria and skills. Please date, sign and print name for each entry.

Signature:	Print name:	Date:
Signature:	Print name:	Date:
Signature:	Print name:	Date:

Signature:	Print name:	Date:
Signature:	Print name:	Date:
Signature:	Print name:	Date:

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.*

*Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_



**Signature Bank**

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

## National Student Midwife Competence Assessment Tool Midwifery Led Care Placement for CUMH/UCC



Placement area	Date	Learning Objectives	Midwife's signature
Diabetic Clinic			
Colposcopy Clinic			
Lactation Consultant			
Emergency Room			
DOMINO			
Parentcraft			
Midwives Clinic			
Primary Care Centre			

Dear Student,

You are currently rotating clinical placement areas during your Midwifery Led Care Placement area. Though this is a 4-week placement, it is not possible to complete the competency assessment tool. Therefore, please review the learning outcomes/objectives for the placements you are allocated to and write a learning log relating to that placement area (as below) and one reflection for the overall Midwifery led Care placement. Also, the midwife you will be assigned to for the day will need to sign the above document as evidence of learning on this placement area. If you are working with a different midwife each day, then please ask one midwife to sign and enter the dates you were on this placement area.

Dr Margaret Murphy  
BSc in Midwifery Programme Lead

## Learning Log: What is a learning log?

A learning log is a collection of notes, observations, thoughts and other relevant materials built-up over a period of time and maybe a result of a period of study, learning and/or working experience. Its purpose is to enhance your learning through the process of writing and thinking about your learning experiences. Your learning log is personal to you and will reflect your personality, preferences and experiences.

This will enable you:

- To provide evidence of your growing understanding of a subject experience
- To demonstrate how your learning is developing
- To keep a record of your thoughts and ideas throughout your experiences
- To help you identify your strengths, areas for improvement and preferences in learning



**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.*

*Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

# National Student Midwife Competence Assessment Tool Neonatal Unit Placement



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



COMPETENCE ASSESSMENT TOOL

<b>Principle 1: Respect for the Dignity of the Person</b>			
<b>Competency 1: The midwife's practice is underpinned by a philosophy that protects and promotes the safety and autonomy of the woman and respects her experiences, choices, priorities, beliefs and values</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>1.1</b> Participates with the midwife/nurse in advocating on behalf of parents and their babies to ensure their rights and interests are protected.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in acting as an advocate for parents and babies rights.</li> </ul>		
<b>1.2</b> Participates with the midwife/nurse in respecting the diversity of parents and their families including their beliefs, values, choices and priorities and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in recognising and respecting the beliefs, values, choices and priorities of parents and families.</li> <li>Acts in a manner that supports equality, diversity and rights of all individuals.</li> </ul>		
<b>1.3</b> Participates with the midwife/nurse in providing sufficient evidence-based information to the woman to empower her to make informed decisions about her care and that of her baby and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in providing sufficient evidence-based information to the woman to empower her to make informed decisions about the care of her baby and provides a rationale for this.</li> <li>Adopts a questioning/reflective attitude towards clinical practice and can discuss pertinent research studies that guide evidence based practice for neonatal care.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 2: Professional Responsibility and Accountability</b>			
<b>Competency 2: The practises in line with legislation and professional guidance and is responsible and accountable within their scope of midwifery practice. This encompasses the full range of activities of the midwife as set out in the EC Directive 2005/36/EC and the adapted Definition of the Midwife (ICM, 2011) as adopted by the Nursing and Midwifery Board of Ireland (NMBI)</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>2.1</b> Participates with the midwife/nurse in acting at all times within the law and follows the rules and regulations of the Nursing and Midwifery Board of Ireland (NMBI) and other applicable bodies and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Demonstrates knowledge of the rules and regulations of the Nursing and Midwifery Board of Ireland (NMBI) and other applicable bodies and how these may impact on neonatal care.</li> </ul>		
<b>2.2</b> Works within the scope of practice of a midwifery student and recognises their own level of knowledge, skills and professional behaviours.	<ul style="list-style-type: none"> <li>• Works within the scope of practice midwifery student and recognises their own level of knowledge, skills and professional behaviours.</li> <li>• Participates in partnership with the neonatal unit team.</li> <li>• Recognises the need to organise and prioritise workload under the supervision of a nurse/midwife and as part of the team taking note of activities within the neonatal unit.</li> <li>• Participates in the preparation and maintenance of neonatal equipment.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.1</b> Participates with the midwife/nurse in the provision of safe, competent, kind, compassionate and respectful professional care to the neonate, which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in the provision of safe, competent, kind, compassionate and respectful professional care to the neonate care which is informed by the best available evidence, knowledge and the experiences, preferences and values of the woman and provides rationale for this.</li> </ul>		
<b>3.2</b> Participates with the midwife/nurse in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for babies.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in assessing, planning, implementing and evaluating care using observation, history taking and clinical assessment to plan individualised care for babies.</li> <li>Discusses the normal physiology of adaptation of the baby to extra uterine life.</li> <li>Discusses the admission criteria for babies admitted to the Neonatal Unit.</li> <li>Participates in the admission of a baby to the Neonatal Unit.</li> <li>Accurately undertakes and records neonatal vital signs</li> <li>Advises a woman on the follow-up care of her baby following discharge from NNU.</li> </ul>		
<b>3.3</b> Participates with the midwife/nurse in recognising and responding appropriately in a timely manner to any deterioration in a baby's condition and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in identifying emergency situations, summoning help and acting within own level of expertise.</li> <li>Participates with the midwife/nurse in maintaining accurate and up to date clinical records.</li> </ul>		
<b>3.4</b> Participates with the midwife/nurse in recognising risk factors during pregnancy, labour and birth that may require a baby's admission to the neonatal unit and provides a rationale for this	<ul style="list-style-type: none"> <li>Recognises the importance of the woman's antenatal and intranatal history which may contribute to the baby's condition and admission to NNU.</li> </ul>		
<b>3.5</b> Participates with the midwife/nurse in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the baby and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in recognising and responding in a timely and appropriate manner to emergencies affecting the health and/or safety of the baby and provides a rationale for this.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
	<ul style="list-style-type: none"> <li>• Discusses normal vital signs in the neonate and factors which may lead deterioration in a baby's condition.</li> <li>• Discusses the initial steps of neonatal resuscitation.</li> </ul>		
<b>3.6</b> Participates with the midwife/nurse in supporting and educating women with infant feeding practices which include protecting promoting and supporting breastfeeding and provided a rationale for this.	<ul style="list-style-type: none"> <li>• Discusses with the midwife/nurse the chosen method of infant feeding with the woman, with particular reference to the advantages of breastfeeding and nutritional requirements of the baby.</li> </ul>		
<b>3.7</b> Participates with the midwife/nurse complying with standard universal infection prevention and control measures and provided rationale for this.	<ul style="list-style-type: none"> <li>• Is aware of and complies with infection control policies.</li> <li>• Can identify the signs and symptoms of a baby with suspected neonatal infection.</li> <li>• Demonstrates an awareness of the causes, prevention and management of neonatal infections.</li> </ul>		
<b>3.8</b> Participates with the midwife/nurse in the safe management of drug administration, monitoring the effects and documenting appropriately in accordance with Nursing and Midwifery Board of Ireland (NMBI) medication management guidance, and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Discusses the principles involved in safe administration of medications to a baby in line with hospital policy and NMBI guidelines.</li> </ul>		
<b>3.9</b> Participates with the midwife/nurse in reflection on their own practice and can demonstrate learning from previous experience in midwifery and can identify future learning needs and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Participates with the midwife/nurse in reflection on their practice in the neonatal unit and can demonstrate learning from previous experience in midwifery</li> <li>• Reflects on one aspect of neonatal care and can discuss how this may impact their future practice.</li> </ul>		
<b>3.10</b> Participates with the midwife/nurse in the appropriate use of national and local guidelines and policies in the provision of evidence-based care and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Discusses the use of national or local guidelines in the neonatal unit and understands the importance of incorporating evidence-based guidelines into practice.</li> </ul>		
<b>3.12</b> Participates with the midwife/nurse in applying clinical risk management processes into their own practice and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Is aware of and complies with national health and safety legislation and risk management policies.</li> <li>• Can identify potential clinical risks and take appropriate action to minimise risk.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 3: Quality of Practice</b>			
<b>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</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>3.13</b> Participates with the midwife/nurse in identifying the importance of clinical audits of clinical care in practice and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in identifying the importance of clinical audits in the Neonatal Unit and identifies examples of same.</li> </ul>		
<b>3.14</b> Demonstrates a willingness to learn from the multidisciplinary team within the neonatal unit.	<ul style="list-style-type: none"> <li>Demonstrates an interest in neonatal care by accessing learning opportunities, appropriate questioning and seeking feedback on care given.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 4: Trust and Confidentiality</b>			
<b>Competency 4: The midwife works in equal partnership with the woman and her family and establishes a relationship of trust and confidentiality</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>4.1</b> Participates with the midwife/nurse in ensuring that the baby is the primary focus of practice and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in ensuring that the baby is the primary focus of practice and promotes family-centred care.</li> </ul>		
<b>4.2</b> Participates with the midwife/nurse in providing care that is safe, evidence-based, supportive, responsive and compassionate taking into account the needs of the baby and the parents and provides a rationale for this.	<ul style="list-style-type: none"> <li>Participates with the midwife/nurse in providing care that is safe, evidence-based, supportive, responsive and compassionate taking into account the needs of the baby and the parents.</li> <li>Recognises the importance of family centred care</li> </ul>		
<b>4.3</b> Participates with the midwife/nurse in respecting the baby's and family's right to privacy and confidentiality and provides a rationale for this.	<ul style="list-style-type: none"> <li>Ensures confidentiality with regards to delivery of care and documentation in the Neonatal Unit.</li> <li>Communicates tactfully with the parents, developing and maintaining trust, integrity and confidence.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Principle 5: Collaboration with others</b>			
<b>Competency 5: The midwife communicates and collaborates effectively with women, women's families and with the multidisciplinary healthcare team</b>			
<b>CLOSE SUPERVISION</b>	<b>Assessment Criteria</b>	<b>Date &amp; Sign Pass</b>	<b>Date &amp; Sign Fail</b>
<b>5.1</b> Participates with the midwife/nurse in providing information in a format that is understandable and accessible to the baby's parents/ family and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Understands the importance of effective communication in the neonatal unit.</li> <li>• Participates in sharing information that is clear and accurate, at a level that the baby's parents/family can understand.</li> </ul>		
<b>5.2</b> Participates with the midwife/nurse in communicating appropriately and effectively with parents/families and with the multidisciplinary healthcare team and provides a rationale for this.	<ul style="list-style-type: none"> <li>• Communicates clearly and consistently with parents/families and members of the multidisciplinary healthcare team using professional language.</li> </ul>		
<b>5.3</b> Participates with the midwife/nurse in recognising and taking appropriate actions to challenge and reduce barriers to effective communication with parents/families and with the multidisciplinary healthcare team and provide a rationale for this.	<ul style="list-style-type: none"> <li>• Discusses with the midwife/nurse, factors that facilitate effective communication in the neonatal unit.</li> <li>• Discusses with the midwife/nurse, the barriers to effective communication in the neonatal unit.</li> </ul>		
<b>5.4</b> Participates with the midwife/nurse in collaborating with parents/families and other healthcare professionals using appropriate communication tools.	<ul style="list-style-type: none"> <li>• Participates with the midwife/nurse and other healthcare professionals in using effective communication skills to provide parents/families with all relevant information to make informed choices regarding the care of their baby.</li> </ul>		
<b>5.5</b> Participates with the midwife/nurse in recording clinical practice in a manner which is clear, objective, accurate, and timely and provides rationale for this.	<ul style="list-style-type: none"> <li>• Understands the importance of recording clinical practice and maintaining accurate and up to date records.</li> <li>• Participates in documenting care in a clear, concise and contemporaneous manner in the healthcare records.</li> </ul>		
<b>5.6</b> Participates with the midwife/nurse in addressing differences of professional opinion with colleagues by discussion and informed debate in a professional and timely manner, and provides a rationale for this	<ul style="list-style-type: none"> <li>• Respects the views of others and their right to hold and express their views through informed discussion.</li> </ul>		

COMPETENCE ASSESSMENT TOOL

<b>Initial interview</b>		
<b>Core placement area:</b>		
<b>Orientated to the clinical area</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Discussion of assessment criteria and skills (Preceptor/Co-preceptor and student):</b>		
<b>Specific opportunities identified by the Preceptor/Co-preceptor that are available during this practice/clinical placement:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>Date set for mid-point interview:</b>		
<b>CPCM signature (review of document- where appropriate):</b>		
<b>Link Lecturer comments &amp; signature (where appropriate):</b>		



COMPETENCE ASSESSMENT TOOL

<b>Midpoint interview</b>		
<b>Core placement area:</b>		
<b>Student review of progress to date:</b>		
<b>Preceptor/Co-preceptor review of student's progress to date:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>Date of final interview:</b>		
<b>CPCM signature (review of document):</b>		
<b>Link Lecture comments &amp; signature (where appropriate):</b>		

COMPETENCE ASSESSMENT TOOL

<b>Final interview: The Preceptor/Co-preceptor and student review all criteria and skills</b>		
<b>Core placement area:</b>		
<b>Student review:</b>		
<b>Preceptor/Co-preceptor review:</b>		
<b>Signature of Preceptor/Co-preceptor:</b>	<b>Signature of student midwife:</b>	<b>Date:</b>
<b>Print name:</b>	<b>Print name:</b>	
<b>All assessment criteria and skills achieved: Pass <input type="checkbox"/> Fail <input type="checkbox"/></b>		
<b>CPCM signature (review of document where appropriate):</b>		
<b>Link Lecturer comments &amp; signature (where appropriate):</b>		

COMPETENCE ASSESSMENT TOOL

Feedback from other midwives, comment on key areas of progress and identify areas for development from the assessment criteria and skills. Please date, sign and print name for each entry.

<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>
<b>Signature:</b>	<b>Print name:</b>	<b>Date:</b>

COMPETENCE ASSESSMENT TOOL

**Clinical Placement Co-Ordinator Comments / meetings:**

Date	Comments	Signature

COMPETENCE ASSESSMENT TOOL

**Clinical Placement Co-Ordinator Comments / meetings:**

Date	Comments	Signature

## STUDENT REFLECTIVE NOTES

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.  
Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_

**Learning Log: What is a learning log?**

A learning log is a collection of notes, observations, thoughts and other relevant materials built-up over a period of time and maybe a result of a period of study, learning and/or working experience. Its purpose is to enhance your learning through the process of writing and thinking about your learning experiences. Your learning log is personal to you and will reflect your personality, preferences and experiences.

This will enable you:

- To provide evidence of your growing understanding of a subject experience
- To demonstrate how your learning is developing
- To keep a record of your thoughts and ideas throughout your experiences
- To help you identify your strengths, areas for improvement and preferences in learning


COMPETENCE ASSESSMENT TOOL






# National Student Midwife Competence Assessment Tool

## TWO WEEK SPECIALIST CLINICAL PLACEMENTS



Bord Altranais agus  
Cnáimhseachais na hÉireann  
Nursing and Midwifery Board  
of Ireland

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COMPETENCE ASSESSMENT TOOL

TWO WEEK SPECIALIST CLINICAL PLACEMENTS

**ASSESSMENT OF PRACTICE INTERVIEW(S) FORM**

**Preceptor Name:**

**Placement Dates: *From:*                      *To:***

**Specialist placement:**

At commencement of placement please locate the following: fire exits, fire extinguishers, tel. nos. for Cardiac arrest, obstetric emergencies and fire. Bleep systems

<b>COMMENCEMENT OF PLACEMENT INTERVIEW</b> <b>Date:</b> <b>Student Comments</b>          <b>Preceptor/Assessor Comments</b>          <b>Student Signature:</b>  <b>Preceptor/Assessor Signature and print:</b>
<b>END OF PLACEMENT INTERVIEW</b> <b>Date:</b> <b>Student Comments</b>          <b>Preceptor/Assessor Comments</b>          <b>Student Signature:</b>  <b>Preceptor/Assessor Signature and print:</b>  <b>CMM 1 and/or CMM 2 Signature and print:</b>

COMPETENCE ASSESSMENT TOOL

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas. Please use black pen only.*

Date: \_\_\_\_\_

Signature

Preceptor \_\_\_\_\_ Student \_\_\_\_\_

COMPETENCE ASSESSMENT TOOL

**ASSESSMENT OF PRACTICE INTERVIEW(S) FORM**

**Preceptor Name:**

**Placement Dates: *From:*                      *To:***

**Specialist placement:**

At commencement of placement please locate the following: fire exits, fire extinguishers, tel. nos. for Cardiac arrest, obstetric emergencies and fire. Bleep systems

<b>COMMENCEMENT OF PLACEMENT INTERVIEW</b>	<b>Date:</b>
Student Comments	
Preceptor/Assessor Comments	
Student Signature:	
Preceptor/Assessor Signature and print:	
<b>END OF PLACEMENT INTERVIEW</b>	<b>Date:</b>
Student Comments	
Preceptor/Assessor Comments	
Student Signature:	
Preceptor/Assessor Signature and print:	
CMM 1 and/or CMM 2 Signature and print:	

COMPETENCE ASSESSMENT TOOL

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas.  
Please use black pen only.*

Date: \_\_\_\_\_

Signature

Preceptor \_\_\_\_\_ Student \_\_\_\_\_





COMPETENCE ASSESSMENT TOOL

**Clinical Placement Co-Ordinator Comments / meetings:**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>

**STUDENT REFLECTIVE NOTES**

*To ensure anonymity throughout, please do not make any reference to named individual women/relatives/professionals, or names of placement areas. Please use black pen only.*

Date: \_\_\_\_\_

*Signature*

Preceptor \_\_\_\_\_ Student \_\_\_\_\_



**Additional Interview Section**

<b>Date:</b>
<b>Student's view of their progress</b>
<b>Preceptor's concern about student's progress</b>
<b>Decisions reached</b>
<b>Preceptor signature</b>

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**Additional Interview Section**

<b>Date:</b>
<b>Student's view of his/her progress</b>
<b>Preceptor's concern about student's progress</b>
<b>Decisions reached</b>
<b>Preceptor signature</b>

**Learning Log: What is a learning log?**

A learning log is a collection of notes, observations, thoughts and other relevant materials built-up over a period of time and maybe a result of a period of study, learning and/or working experience. Its purpose is to enhance your learning through the process of writing and thinking about your learning experiences. Your learning log is personal to you and will reflect your personality, preferences and experiences.

This will enable you:

- To provide evidence of your growing understanding of a subject experience
- To demonstrate how your learning is developing
- To keep a record of your thoughts and ideas throughout your experiences
- To help you identify your strengths, areas for improvement and preferences in learning


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**SUPPORTIVE LEARNING PLAN (SLP) ALGORITHM**

<p><b>Planning the SLP</b></p> <ul style="list-style-type: none"> <li>▪ Review outcome of Additional Supportive Interview</li> <li>▪ Preceptor/CNM/CMM/CPC/LL identifies that a student is not achieving their clinical learning requirements, is not conducting themselves in a professional and responsible manner and/or not working within their agreed Practice Placement Agreement (PPA).</li> <li>▪ Preceptor/CNM/CMM liaises with CPC/CDC to discuss the ongoing concerns in relation to a student's failure to progress following Additional supportive interview.</li> <li>▪ Student is informed by the preceptor/CNM/CMM/CPC or LL in advance of the proposed/scheduled SLP meeting and of their preceptors/CNMs concerns.</li> <li>▪ CPC/CDC/LL liaises with all relevant personnel (student, preceptor/CNM/CMM, CPC, LL) to arrange a meeting, giving details of the purpose, date, time and venue.</li> </ul>
<p><b>Initial Meeting</b></p> <p>The CPC/LL or CNM/CMM will chair the meeting and the LL/CPC will record the process.</p> <p><b>First</b>, the student is invited to give a view of his/her progress.</p> <p><b>Secondly</b>, the preceptor is asked to comment on the following: (using specific examples/incidents)</p> <ul style="list-style-type: none"> <li>• why he/she considers it necessary to implement an SLP</li> <li>• to identify the student's clinical learning requirements needing attention (See indicators for SLP above, pgs. 126/127 of this book).</li> </ul> <p>The student is given the opportunity to respond to the preceptor's comments/concerns.</p> <p><b>Thirdly</b>, any other evidence that highlights a student's learning deficits is then presented/discussed e.g. from a CPC/CNM/CMM or LL where relevant. The student is given the opportunity again to respond.</p> <p><b>Fourthly</b>, an appropriate plan with <i>Agreed Goals</i> and support mechanisms are identified to help the student to achieve the learning/practice concern(s).</p> <p><b>Finally</b>, a time frame is agreed and review date set. SLP is signed and dated by all present.</p> <p>The SLP is documented in the student's Clinical Booklet and a copy must be placed in the student's file in the School of Nursing and Midwifery, GO3, UCC.</p>
<p><b>Review Meeting</b></p> <p>The student's progress is reviewed. Follow procedure as for Initial meeting (outlined above)</p> <ul style="list-style-type: none"> <li>▪ Student is invited to give a view of his/her progress.</li> <li>▪ Preceptor/CNM/CMM/CPC/LL gives his/her feedback.</li> <li>▪ If learning/practice concern(s) has been achieved - SLP is signed off and closed</li> <li>▪ If the student is not achieving the <i>Agreed Clinical Goals</i>, a revised plan is formulated with a new review date within a reasonable timeframe. (<i>Refer to 'notification' section above if student with open SLP moving to a new placement area</i>)</li> <li>▪ The section "<i>Review of student's progress and further recommendations</i>" in the <i>Clinical Booklet</i> is intended for use at the review meeting.</li> <li>▪ The SLP review meeting record must be signed and dated by all present at meeting. LL must place a copy of the SLP review meeting in the student's file in GO3, SONM, UCC.</li> </ul>

**On closure of an SLP, there is no requirement to notify future placement areas of the prior existence of an SLP, thus upholding confidentiality.**

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**SUPPORTIVE LEARNING PLAN FOR PRACTICE**

Student Name: \_\_\_\_\_ Intake Year: \_\_\_\_\_

Student I.D Number: \_\_\_\_\_

Practice Placement Area \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Preceptor's Name & Grade: \_\_\_\_\_

Date \_\_\_\_\_

**Description of specific concern/s** as described by Student and Preceptor. (Link specific concerns with the Domains and the Competencies).

Agreed Goals

***(Suggested/recommended methods to facilitate achievement of Competencies)***

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

Review Date Agreed \_\_\_\_\_

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**REVIEW MEETING**

Date of Review Meeting \_\_\_\_\_

**Agreed Evaluation of agreed goals**

**Further recommendations and comments**

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

**REVIEW MEETING**

Date of Review Meeting \_\_\_\_\_

**Agreed Evaluation of agreed goals**

**Further recommendations and comments**

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

COMPETENCE ASSESSMENT TOOL

**SUPPORTIVE LEARNING PLAN FOR PRACTICE**

Student Name: \_\_\_\_\_ Intake Year: \_\_\_\_\_

Student I.D Number: \_\_\_\_\_

Practice Placement Area \_\_\_\_\_

Practice Placement Dates: From \_\_\_\_\_ To \_\_\_\_\_

Preceptor's Name & Grade: \_\_\_\_\_

Date \_\_\_\_\_

**Description of specific concern/s** as described by Student and Preceptor. (Link specific concerns with the Domains and the Competencies).

Agreed Goals

*(Suggested/recommended methods to facilitate achievement of Competencies)*

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

Review Date Agreed \_\_\_\_\_

**REVIEW MEETING**

Date of Review Meeting \_\_\_\_\_

**Agreed Evaluation of agreed goals**

**Further recommendations and comments**

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

**REVIEW MEETING**

Date of Review Meeting \_\_\_\_\_

**Agreed Evaluation of agreed goals**

**Further recommendations and comments**

Student Signature \_\_\_\_\_ Preceptor Signature \_\_\_\_\_

Link Lecturer \_\_\_\_\_

Clinical Placement Coordinator \_\_\_\_\_

Clinical Midwife Manager \_\_\_\_\_

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Signature Bank

Print Name	Signature	Designation	NMBI Pin



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**End of Year Clinical Assessment**  
**BSc Midwifery Year 3**

<b>BSc in Midwifery</b>	<b>End of Year Clinical Practice Assessment</b>			<b>Year 3</b>
<b>Name of Student</b>				
<b>CLINICAL PRACTICE ASSESSMENT (CUMH)</b>				
<b>Date:</b>	<b>Start time:</b>		<b>Finish time:</b>	
<b>Case Presentation:</b>				
<b>CASE PRESENTATION VIA MN-CMS</b>	Able to perform with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs well with few prompts required	Performs but requires several prompts to achieve	Unable to perform satisfactorily
<b>5 MOMENTS OF HAND HYGIENE</b>	Able to perform with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs well with few prompts required	Performs but requires several prompts to achieve	Unable to perform satisfactorily
<b>ASSESSMENT OF WOMAN AT BEDSIDE</b>	Able to perform with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs well with few prompts required	Performs but requires several prompts to achieve	Unable to perform satisfactorily
<b>ASSESSMENT OF INFANT AT BEDSIDE (OR SIMULATION)</b>	Able to perform with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs well with few prompts required	Performs but requires several prompts to achieve	Unable to perform satisfactorily
<b>Additional Comments:</b>				

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CLINICAL PRACTICE SIMULATION				
	Able to recognise key features, unaided & able to provide appropriate rationale +/- or definitions	Recognise key features well with few prompts required to provide appropriate rationale +/- or definitions	Recognise key features but requires several prompts to achieve to provide appropriate rationale +/- or definitions	Unable to recognise key features satisfactorily to provide appropriate rationale +/- or definitions
	Able to perform the required simulation with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs simulation well with few prompts required	Performs simulation but requires several prompts to achieve	Unable to perform simulation satisfactorily
	Able to perform the required simulation with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs simulation well with few prompts required	Performs simulation but requires several prompts to achieve	Unable to perform simulation satisfactorily
	Able to perform the required simulation with proficiency, unaided & able to provide appropriate rationale +/- or definitions	Performs simulation well with few prompts required	Performs simulation but requires several prompts to achieve	Unable to perform simulation satisfactorily
<b>Additional Comments:</b>				
<div style="display: flex; justify-content: space-between; margin-top: 50px;"> <div style="width: 45%;"> <p><b>Overall assessment:</b> <span style="margin-left: 20px;"><b>PASS</b></span></p> <p><b>Assessor:</b></p> <p><b>Assessor:</b></p> </div> <div style="width: 45%;"> <p><b>REFER</b></p> <p><b>Date:</b></p> <p><b>Date:</b></p> </div> </div>				

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**Link Lecturer Review**

<b>Date</b>	<b>Comments</b>	<b>Signature</b>