**BSc (HONS) MIDWIFERY PRACTICE**

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**Practice Module S3**

Practice Assessment

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| Name of student:  Student Number: |
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| Cohort: |

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**Introduction**

Practice placement areas in Yorkshire and the Humber provide students with a diverse and varied experience of midwifery practice. Six universities providing pre-registration midwifery programmes within the region are working in partnership to provide the best practice experience and to utilise all practice placement areas. To fully utilise the practice areas students could be allocated to practice placements throughout the region. This will mean that a sign-off mentor could be supporting the learning and assessment of students from any of the six universities. To support and assist students and sign-off mentors with the assessment process the Strategic Health Authority funded the development of a common practice assessment document.

This common assessment practice document records an individual student midwife’s progress towards becoming a registered midwife. Education programmes are designed to prepare students to practise safely and effectively so that on registration they can assume responsibility and accountability for their practice as midwives (NMC 2009).

The sign-off mentor and student should make sure all discussions, feedback, self-assessment and practice assessment are carefully recorded and documented within the common assessment document. Record keeping is an important part of midwifery education and should be viewed as integral process to supporting learning and assessment in practice. The best records are ones that are a product of consultation and discussion between healthcare professionals, lecturers and midwives supporting students in practice.

Any queries regarding the common assessment document or practice placement should be made to the individual University link lecturer or module team member. Also, information can be accessed related to sign-off mentors, supporting learning and assessment of students in individual University practice website or from the NMC publication Standards to support learning and assessment in practice(NMC 2008).

Instructions for use

In accordance with Standard 15 of the Standards for Pre-registration education (NMC, 2009), clinical practice must be graded and be counted as part of the academic award. This document should be completed alongside your portfolio which is a key assessment document which is used to records all clinical experience and assessments in practice throughout your three year programme.

This practice assessment is an important document. Its correct use will assist you in identifying and achieving learning needs, planning appropriate clinical activities and applying the theoretical aspects of the course to clinical practice.

Your portfolio will also provide the essential evidence of progress needed to pass the summative assessment of each practice module; demonstrate that the minimum amount of clinical experience required by the NMC has been achieved and by the end of the programme that the student has been assessed as competent in accordance with the European Legislation (80/155/EEC) and as amended by European Union Directive (89/594/EEC) and the Standards for pre-registration programmes (NMC, 2009).

**Responsibilities**

It is the **student’s** responsibility to produce evidence that the assessment criteria have been met.

It is the **sign-off mentor’s** responsibility to consider the validity and reliability of any evidence presented and to advise on any additional evidence required for appropriate assessment. When the available evidence does not clearly demonstrate achievement of the set criteria, the mentor should discuss the outcome with the link lecturer.

It is the **link lecturer’s** responsibility to monitor the consistency of the assessment process in clinical practice ensuring valid and appropriate assessment of practice. The link lecturer will support the assessment process through tripartite practice placement discussions/ interviews. If a student fails the practice module the link lecturer will inform the relevant module leader.

**Record of clinical/educational experience (diary pages)**

You are required to record brief details of educational and clinical activities undertaken as a part of the programme. This information will be used to demonstrate the engagement in sufficient clinical and educational activities to warrant the academic award. It will also be used to assist in identifying factors which may be hindering your progress.

**The learning contract**

During the programme you will undertake three practice modules. A new learning contract will be negotiated at the beginning of each module. The contracts are colour coded to denote the different practice modules.

The learning contract is negotiated between you and your sign-off mentor. The main purpose is to ensure you gain appropriate clinical experience, allowing the development and assessment of clinical skills directly related to the aspects of midwifery theory being studied.

The contract is divided into three activities:

* **Identify learning needs**: you should complete this section prior to the commencement of the placement.
* **Learning opportunities**: should be identified by you and your sign-off mentor together at the start of the placement.
* **Preliminary action plan:** should be completed by you and your sign-off mentor together at the start of the placement.

A statement is provided at the beginning of each activity which should help both you and the sign-off mentor to consider your individual learning needs and plan clinical activities accordingly.

###### Performance and skills outcomes

For each year of the programme a series of Performance and Skill Outcomes (PSOs) have been developed under the headings of the NMC Midwifery competencies. Also incorporated under these headings are the relevant Essential Skills Clusters (ESCs) and Professional Behaviours and Conduct (PBC) as described below:

**Midwifery competencies** (MC)

The midwifery competencies are specific standards which a student must achieve to be entered onto the NMC register as a midwife. The competencies relate to professional clinical care and fitness for practice to ensure that on registration a student can assume responsibility and accountability for their practice as a midwife.

**Essential skills clusters** (ESC)

The ESC were developed to clarify the expectations of the public and ensure pre-registration student midwives on registration are fit for practice; capable of safe and effective practice. It should be noted that the NMC continue to review the existing ESC and future additions may be made. The ESC is not a definitive syllabus and they do not encompass all the skills a student may be exposed too in practice. However, they do provide the public with assurance that specific areas of skills are assessed prior to registration.

**Professional Behaviour and Conduct** (PBC)

The Professional Behaviour and conduct elements are based on Standards of Conduct Performance and Ethics**.** The Nursing and Midwifery Council (NMC) require that midwives ensure the highest standards of professional behaviour and conduct (The code for nurses and midwives NMC 2015). Although these standards are for qualified midwives it is good practice for the student and sign-off mentor to review and consider a student’s professional behaviour and conduct during the placement. We would also encourage students and mentors to refer to the NMC (2015) Code for nurses and midwives. The sign-off mentor will assess your professional behaviour whilst on the placement area.

**Any concerns related to a student’s professional behaviour and conduct or clinical progress should be documented (on the Record of experience and feedback sheets) and highlighted to the link lecturer as soon as possible.**

**Practice skills record**

The aim of the practice skills record is to direct and record your learning in relation to the development of clinical skills, which are an essential part of midwifery practice. You must have completed all the skills by the end of the programme.

**Record of Experience and Feedback**

* If you have the opportunity to work with other members of the multi-professional team you are encouraged to ask the member of staff to complete a record of experience and feedback sheet as a testimony to inform the assessment learning process. There is no required number of feedback sheets to complete; however they should reflect your individual experience in practice. This must be used in a placement where the interim or final interview does not take place.

Learning Contract interviews

**Preliminary interview**

During the initial negotiation of your learning contract with your sign-off mentor, you will have identified those midwifery competencies which you should work towards within this practice module.

Once the initial contract has been agreed between you and your mentor, you should email a copy of the preliminary interview to the module leader. This must be received within 3 weeks of the date of the interview, otherwise your personal supervisor will be informed and a note will be made in your file. If you or your sign-off mentor express any concerns or uncertainty about the learning contract your link lecturer should be contacted as soon as possible.

**Interim interview**

For this assessment you are required to organise an interim interview which consists of a tripartite meeting / discussion between you, your sign-off mentor and link lecturer. In the final learning period the link lecturer only needs to be involved if there are any concerns.

At the interim interview you and your sign-off mentor should consider whether satisfactory progress is being made towards the midwifery competencies identified within the **development plan** of the learning contract. On the interim interview page you should document the progress made and the sign-off mentor should indicate whether they are in agreement with your statement. The link lecturer oversees the review process and will document any discussion and comments as appropriate. **It is recommended that the grading practice assessment grid is utilised as a formative assessment to offer feedback on your level of performance at this stage.** This exercise will assist you and your mentor to identify further learning needs.

Following the interview you should consider what aspects of clinical practice you would like to develop and, if appropriate, negotiate a **revised action plan** with your sign-off mentor to facilitate your learning. The link lecturer will offer support or guidance on this process as appropriate.

It is recommended that you and your mentor document achievement of competence on an on-going basis with evidence of achievement recorded by you.

**Final interview**

At the end of each module an assessment of clinical practice is performed, this is termed the final interview. A link lecturer should be present at this interview if there have been any concerns expressed by either the student or sign off mentor. A random sample of final interviews will be attended by a link lecturer for all practice modules. This interview should be completed at the last possible point at the end of the learning period, the placement must be of 4 weeks or more.

**Prior to the meeting** the sign-off mentor should consult with other midwives that you have worked with in order to have a triangulated understanding of how you are performing. The sign-off mentor should read the record of experience and feedback forms. Also prior to the meeting, you and your mentor should review achievement of competence and your mentor should ensure that appropriate Performance and Skills Outcomes have been signed. You **must** undertake a self assessment of your performance using the appropriate grading practice marking grid.

**During the meeting**, the sign-off mentor and you will discuss progress in relation to your evidence of achievement in the learning contract, EC numbers and performance in the identified midwifery competency. This discussion may include questioning on a specific area of clinical practice or elements of theoretical knowledge to further support your evidence of clinical performance. You are encouraged to draw on the full range of clinical experience to support progress in clinical practice. This should include feedback from a woman who you have cared for; your sign off mentor should assist the woman to complete the relevant form. The sign off mentor will then complete the grading of your practice and give feedback on your performance and self evaluation. If you have not achieved a pass mark then an action plan will be developed. You will leave the meeting knowing whether you have passed or failed. In the event of failing the module, the reason will be made explicit (e.g. area of unsafe practice) and clearly documented. The grade will not be given until the examination process has been completed.

## Portfolio submission

You are required to submit your portfolio at the end of every practice module on the published submission date, to enable progress and experience to be collated and your grade processed. Please note that all relevant University regulations for the submission of summative work apply to the submission of portfolios. Further information can be found in the Student Handbook.

## Failure of Practice Module

If you have not achieved competence in the required performance and skills outcomes, and/or not achieved a pass mark, during the practice module, this constitutes a fail. The link lecturer will notify the relevant module leader. An action plan will be agreed by the sign-off mentor, link lecturer and you, which will be commenced at the start of another period of practice the timing and length of which is determined by the sign off mentor, link lecturer and module board. Should you fail to meet a pass standard at a second attempt this will normally result in recommendation for discontinuation from the programme.

This document should be treated like a clients records, and follow NMC guidance on Record Keeping (NMC 2015), therefore the use of corrective fluid is prohibited. It is a student’s responsibility to ensure that your sign off mentors has signed all the relevant areas and you should check that this is done accurately before you hand in the document. **Should completion of the document not meet the NMC guidance for record keeping, for example; the use of corrective fluid or a missed signature, then you will fail the module, regardless of the mark that you have been awarded.**

It is compulsory to complete a self assessment prior to interim and final interviews. If this is not done prior to the final interview then a 10% penalty will be applied. Should this lead to a mark of less than 40% then you will fail the module.

**Special arrangements for the final interview for this module**

As this is the final practice module and therefore the sign off mentors are making decisions about the students ability to go onto the NMC register, two mentors should be present for the final interview, one of whom must be able to comment upon the student’s intrapartum care abilities.

**Prior to the meeting** the sign-off mentors should consult with other midwives that you have worked with in order to have a triangulated understanding of how you are performing. The sign-off mentors should read the record of experience and feedback forms. Also prior to the meeting, you and your mentors should review achievement of competence and your mentors should ensure that appropriate Performance and Skills Outcomes have been signed. You **must** undertake a self assessment of your performance using the appropriate grading practice marking grid.

**During the meeting**, the sign-off mentors and you will discuss progress in relation to your evidence of achievement in the learning contract, EC numbers and performance in the identified midwifery competency. This discussion may include questioning on a specific area of clinical practice or elements of theoretical knowledge to further support your evidence of clinical performance. You are encouraged to draw on the full range of clinical experience to support progress in clinical practice. This should include feedback from a woman who you have cared for; your sign off mentor should assist the woman to complete the relevant form. The sign off mentor will then complete the grading of your practice and give feedback on your performance and self evaluation. If you have not achieved a pass mark then an action plan will be developed. You will leave the meeting knowing whether you have passed or failed. In the event of failing the module, the reason will be made explicit (e.g. area of unsafe practice) and clearly documented. The grade will not be given until the examination process has been completed.

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Sign-off Mentor Information

To meet the NMC (2008) *Standards to support learning and assessment in practice*, every NMC recognised sign-off mentor is required to demonstrate they meet the standards to be a sign-off mentor and mentor.

***Please note any sign-off mentor or mentor supporting a student’s learning and assessment in practice is required to complete the following information***: -

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sign-off / mentor (print name)**  **Specimen signature** | **Placement area** | **Date of annual mentor update** | **Date of**  **triennial review** | **Sign-off mentor** |
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Orientation to Practice Area of Learning

Prior to the end of the first shift the sign-off mentor and student should normally complete the orientation to the practice area. To promote health and safety please ensure you are aware of the following policies and procedures. Please note the following list is not exhaustive and there may be individual area specific orientation issues that will be discussed at the discretion of the sign-off mentor.

|  |  |
| --- | --- |
| A. **Introduction to the practice area** | B. **Policies and procedures related to practice area** |
| 1. Introduction to team, outlining roles and responsibilities | 1. Trust policies and procedures |
| 1. Layout of practice environment/locality & lines of communication | 1. Practice specific policies and procedures |
| 1. Fire equipment, exits, alarm points and procedure(s) | 1. Complaints procedures |
| 1. Resuscitation equipment procedure(s) | 1. Moving & handling policy |
| 1. Personal safety including procedure(s) in case of accident and injury | 1. Confidentiality |
| 1. Personal safety whilst in and away from the practice environment | 1. Vulnerable adults/safeguarding children |
| 1. Procedure(s) for student absences or illness | 1. Infection control |
| 1. Emergency contact information and ‘bleep’ system |  |
| 1. Call bell system (if appropriate) | C. Additional issues relevant to practice placement: Please specify |
| 1. Accessed the Yorkshire& Humber SHA practice placement profile   (If applicable) |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Please specify placement. e.g. Community** |  |  |  |  |  |
| **Student**  **Sign name** |  |  |  |  |  |
| **Sign-off mentor**  **Sign name** |  |  |  |  |  |
| **Date** |  |  |  |  |  |

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| **Please specify placement. e.g. Community** |  |  |  |  |  |
| **Student**  **Sign name** |  |  |  |  |  |
| **Sign-off mentor**  **Sign name** |  |  |  |  |  |
| **Date** |  |  |  |  |  |

Preliminary interview

|  |  |  |
| --- | --- | --- |
| **Placement area** | **Date of placement**  From: \_\_\_/\_\_\_/\_\_\_ to: \_\_\_/\_\_\_/\_\_\_ | **Date** |
| Name of assessing sign-off mentor | Name of liaison / link lecturer | **Number of practice hours to achieve during placement (where appropriate)** |

The first section ‘**identify learning needs’** will be completed by the student **prior** to the preliminary interview. The student should consider how they could develop in the placement and what they need to learn in order to progress towards meeting the identified competencies/skills/behaviour/learning outcomes. As these will be underpinned with theoretical knowledge it is important to consider the evidence needed to demonstrate knowledge and understanding. At the preliminary interview, the mentor will discuss the learning opportunities with the student and together they will explore how the learning identified can be achieved and agree a development plan. If there are any areas of concern identified, they should be documented and a plan agreed as to how these will be managed. The liaison/link lecturer may be contacted for support and guidance where relevant.

**Learning agreement / contract**

|  |
| --- |
| **Identify learning needs**  (student reviews the descriptors for each of the competencies within this document, reflects on their current level  of knowledge and skills and identifies their current learning needs) |
|  |
| **Learning opportunities**  (the student and mentor discuss the learning opportunities that are available in the placement area that will provide  the student with the clinical experience to meet their identified learning needs) |
|  |

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| **Development plan**  (the student and mentor agree a plan that will enable the student to match the learning opportunities with their learning  needs, in order to meet the requirements of the programme. Any concerns about meeting learning needs should be  discussed and documented) |
|  |
| **Preliminary action plan**  (to include: nature and frequency of feedback, how they will achieve average of 40% per week or equivalent working  together and planning for times when sign-off mentor may be unavailable due to annual leave or planned study time) |
|  |
| **Provisional date for interim interview:** |

Learning contracts from previous practice modules/placements have seen and discussed (circle relevant answer)

Yes No

Sign-off mentor

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

Student

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

Liaison/Link lecturer (if appropriate)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

Interim interview

|  |  |  |
| --- | --- | --- |
| **Placement area** | **Date of placement**  From: \_\_\_/\_\_\_/\_\_\_ to: \_\_\_/\_\_\_/\_\_\_ | **Date** |
| Name of assessing sign-off mentor | Name of liaison/link lecturer | **Number of practice hours completed to date (where appropriate)** |
| **During the placement have there been any periods of sickness or absences? Yes/No**  If yes please complete the section on student sickness and absence | | |

Prior to the interim interview, the student will reflect on their progress to date by identifying what they have learnt and how they are progressing by revisiting the identified learning outcomes / competencies/essential skills/behaviour and development plan agreed at the preliminary interview. The mentor will identify any competency the student has achieved and/or progress made and discuss the student’s strengths or challenges during the practice experience. Together the mentor and student will evaluate the students learning opportunities to date and identify new targets for the remainder of the placement/module.

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| --- |
| **Student’s reflection on progress** |
|  |
| **Sign-off mentors reflection on student’s progress** |
|  |
| **Identify areas for development /improvement** |
|  |
| **Provisional date for final interview:** |

|  |
| --- |
| **Lecturer comments (if applicable)** |

|  |
| --- |
| **Any difficulties/issues**  Have any difficulties/issues been raised at this point Yes / No  If yes has the liaison/link lecturer been informed Yes / No  Name of liaison/link lecturer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date informed: \_\_\_\_\_\_\_\_\_\_\_\_\_  **Please note:** A liaison/link lecturer should be informed of any difficulties/issues a sign-off mentor, healthcare professional or student might have regarding a practice placement. Once the difficulties/issues have been recognized, explored and an action plan developed they will be comprehensively recorded within the common assessment document.  Give brief details of the difficulties/issues which have been identified: |
| **Provisional date for final interview:** |

Sign-off mentor

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

Student

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

Liaison/Link Lecturer

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_/\_\_/\_\_

(If applicable)

Process for grading and assessing practice

To guide a sign-off mentor with the process of grading a student the following marking grid should be considered and completed. The marking grid consists of **five sections**, with a maximum mark for each section of **20**. Each section is further divided into 3 or 4 sub-sections. When the sign-off mentor is grading the student each sub-section should be considered and a mark awarded out of 20. Three or four marks (out of 20) will be awarded for each sub-section – the total for the section is then divided by 3 or 4, to give an overall mark for the whole section out of 20. Once marks have been awarded to all sections an overall grade will be calculated.

For example: If a sign-off mentor awards marks of 9, 12 and 12 for 1 section the mark would be 11 out of 20 (33 divided by 3). To calculate the final overall grade, all **5** sections should be considered and measured for example 11, 15, 14, 13 and 12 – overall grade 65/100. Marks are not always simply divided but may result in 12.5 etc. In these cases marks that are for example 0.49 and below will be rounded down and those of 0.5 and above will be rounded up.

*\*****Please note if any of the marks awarded are in the 0-7 (Fail/unsafe) category on the marking grid the student fails the placement assessment***

|  |  |  |
| --- | --- | --- |
| **14 - 20** | A student who is judged to have reached an outstanding **exceptional** standard: is able to consistently critique evidence based research and its implementation. Is able to make connections between complex theory. Actively participates in midwifery care with indirect supervision in an organised and efficient manner, planning all activities and leading on most. Is able to prioritize care, evaluate the effectiveness of the care and make changes in care plans if appropriate. Does not require prompting, is organised and efficient. Responds appropriately and confidently in situations requiring urgency. Actively involves women and their families in their care. Works as a dependable team member. Comprehensive and succinct record keeping. | **Excellent pass** |
| **12 - 13** | A student who is judged to have reached a **very high** standard: is able on most occasions to critique evidence based research and its implementation. Is able on most occasions to make connections between complex theory. Actively participates in midwifery care with indirect supervision, mostly in an organised and efficient manner, planning most activities and leading on some. Can prioritize care, evaluate the effectiveness of the care and make changes in care plans if appropriate with minimal prompting, is organised and efficient. Responds appropriately in situations requiring urgency. Actively involves women and their families in their care. Works as a reliable member of the team. Very good standard of record keeping. | **Very good pass** |
| **10 - 11** | A student who is judged to have reached a **capable** standard: is able on some occasions to critique evidence based research and its implementation. Is able on some occasions to make connections between complex theory. Actively participates in midwifery care with indirect supervision, in an organised manner, planning some activities and leading on some with support and prompts. Can prioritize care, evaluate the effectiveness of the care and make changes in care plans if appropriate. Responds suitably in situations requiring urgency. Actively involves women and their families in their care. Works as a team member. A good standard of record keeping. | **Good pass** |
| **8 - 9** | A student who is judged to have reached a **reasonable** standard of performance: is considered safe and meets the minimum standard. The student has been observed to perform with some hesitation. Vaguely explains rationale underpinning practice, makes limited connections between more complex theory. Some degree of questioning and critiquing of evidence based practice and research. With instruction participates in midwifery care with minimal supervision. Sometimes indecisive in familiar situations, requires some instruction when planning and leading on activities. Responds cautiously in situations requiring urgency. With instruction actively involves women and their families in their care and with prompts evaluates the effectiveness of the care. Works within the team. Adequate record keeping. | **Pass** |
| **0 7** | A student who **does not meet one or more** of the competencies, essential skills, learning outcomes, professional behaviour and conduct associated with the placement/module. Weak underpinning knowledge demonstrated and cannot explain rationale underpinning practice; does not consider evidence based practice. Disorganised planning and implementation of care, participates and assists in care only with close supervision, requires prompting. Does not work as part of a team. Inadequate record keeping. Even where all the learning outcomes have been met, a student who demonstrates unsafe practice will result in a fail overall. | **Fail unsafe practice** |

**Yorkshire and Humber Common Assessment Marking Grid**

Interim – Formative Assessment

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Grading of practice Marking Grid** | | | | | | | | | | |
| **Please note: If a student demonstrates unsafe practice they will fail the module even where competencies/essential skills clusters/professional behaviour and conduct/learning outcomes are achieved.** | | | | | | | | | | |
| **Student's name:** | | **Student identification number:** | | | **Practice area**: | | | | **Date & time of assessment** |  |
| ***\*Please note if any of the marks awarded are in the 0-7 (fail/unsafe practice) category the student will fail the placement assessment*** | | | | | | | | | | |
|  | |  | **Excellent** | **Very Good** | **Good** | **Pass** | | **\*Fail** unsafe practice |  | *Student self-assessment* |
| **Section 1: Team working and communication** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |
| Demonstrates communication skills and ability to build a rapport with women and their family | |  |  |  |  | |  |  |  |
| Demonstrates communication skills within the multidisciplinary team and contributes to working across professional boundaries. | |  |  |  |  | |  |  |
| Demonstrates a professional approach to working as a healthcare student including punctuality and time keeping | |  |  |  |  | |  |  |
| Takes a person centred, personalised approach to care | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 2: Knowledge & application to practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Demonstrates the ability to critically appraise sources of information and to discuss evidence relevant to current practice | |  |  |  |  | |  |  |  |
| Demonstrates underpinning knowledge and applies this theory to practice | |  |  |  |  | |  |  |
| Explores practice and professional issues with colleagues | |  |  |  |  | |  |  |
| **Total of the 3 marks ÷ 3 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 3: Clinical skills & practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Demonstrates ability to perform clinical skills and procedures whilst maintaining an environment that promotes the health, safety and well being of women and others. | |  |  |  |  | |  |  |  |
| Demonstrates knowledge and understanding of the meaning of informed consent and gains informed consent with indirect supervision | |  |  |  |  | |  |  |
| With indirect supervision demonstrates the ability to complete records that are accurate, legible and continuous, containing the necessary information, and adheres to records and record keeping guidelines | |  |  |  |  | |  |  |
| **Total of the 3 marks ÷ 3 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 4: Professional & ethical practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Identifies and relates professional codes, standards, conduct, behaviour, policies and guidelines to practice. | |  |  |  |  | |  |  |  |
| Recognises individual’s preferences, right’s, interests, beliefs and culture | |  |  |  |  | |  |  |
| Recognises the importance of ensuring and maintaining, safety, privacy, dignity, and respect | |  |  |  |  | |  |  |
| Anticipates how people might feel in a given situation and responds with kindness and empathy to provide physical and emotional comfort | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 5: Self development & reflection** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Reflects on practice recognising own strengths and limitations, recognises the needs of others and seeks to improve skills and knowledge as a result of insight. | |  |  |  |  | |  |  |  |
| Is able to critically analyse the effectiveness of care, suggesting realistic alternatives where appropriate | |  |  |  |  | |  |  |
| Seeks help and guidance as appropriate and responds constructively to feedback from the multi-professional team, women and their families | |  |  |  |  | |  |  |
| Through reflection and evaluation demonstrates commitment to personal and professional development and life long learning | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Outcome of practice assessment**: | | | | | | | | | | |
| 1st attempt/2nd attempt  (Please circle) | **Now Add up each of the 5 sections to find the total mark out of 100%**  If the mark is 0.5 or above then round up to the next number.  For example 41.5 = 42 | | | | | | **Overall indicative mark awarded**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Pass / Fail / Resubmission (Please circle) | | | |
| **Signature of student** Print name Date | | | | | | | | | | |
| *I/We authorise that the student has met / not met (please circle) all of the performance outcomes (including competencies, essential skills clusters, professional behaviour and conduct) associated with this placement/module and that in my judgement has performed to the quality indicated.*  Print name    **Signature/s of sign-off mentor/Mentors if Tripartite** Print name Date | | | | | | | | | | |
| I confirm that in my judgement assessment processes have been conducted appropriately  **Signature of link lecturer (If appropriate)** Print name Date | | | | | | | | | | |
| I confirm that the assessment process is comparable to that of other institutions  **Signature of External Examiner (If appropriate)** Print name Date | | | | | | | | | | |
|

Final interview

|  |  |  |
| --- | --- | --- |
| **Placement area** | **Date of placement**  From: \_\_\_/\_\_\_/\_\_\_ to: \_\_\_/\_\_\_/\_\_\_ | **Date:** |
| Name of assessing sign-off mentors | Name of liaison/link lecturer | **Number of practice hours completed (where appropriate)** |
| **During the placement have there been any periods of sickness or absences? Yes/No**  **If yes please complete the section on sickness and absence** | | |

The final interview should be undertaken in accordance with the student’s individual university and assessment processes. Prior to the final interview the student will complete the student’s evaluation identifying what they have learnt. The student and the sign-off mentors should revisit the learning objectives, development plan and intermediate interview to ensure the student has achieved all the learning outcomes for the placement. This should include exploring the sign-off mentor’s and student’s strengths or challenges during the practice experience and identify new targets for future placements.

During the final interview there should be no surprises. If a student is expected to fail the placement then a liaison/link lecturer should be present at this interview. If a student has attempted but been unsuccessful in achieving any of the placement learning outcomes or competencies the student will be deemed to have failed.

|  |
| --- |
| **Student’s evaluation of achievement** |
|  |
| **Sign-off mentors summary of student’s performance** |
|  |
| **Identified areas for development** |
|  |
| **Action plan** |
|  |
| **Liaison/Link lecturer comments (If applicable)** |
|  |
| **Practice mark awarded** |

**Midwifery competencies, essential skills clusters, professional behaviour and conduct**

**Please note: The sign-off mentor signing the final interview is confirming that the student has achieved the requirements for the placement / module.**

**Yorkshire and Humber Common Assessment Marking Grid**

Final – Summative Assessment

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Grading of practice Marking Grid** | | | | | | | | | | |
| **Please note: If a student demonstrates unsafe practice they will fail the module even where competencies/essential skills clusters/professional behaviour and conduct/learning outcomes are achieved.** | | | | | | | | | | |
| **Student's name:** | | **Student identification number:** | | | **Practice area**: | | | | **Date & time of assessment** |  |
| ***\*Please note if any of the marks awarded are in the 0-7 (fail/unsafe practice) category the student will fail the placement assessment*** | | | | | | | | | | |
|  | |  | **Excellent** | **Very Good** | **Good** | **Pass** | | **\*Fail** unsafe practice |  | *Student self-assessment* |
| **Section 1: Team working and communication** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |
| Demonstrates communication skills and ability to build a rapport with women and their family | |  |  |  |  | |  |  |  |
| Demonstrates communication skills within the multidisciplinary team and contributes to working across professional boundaries. | |  |  |  |  | |  |  |
| Demonstrates a professional approach to working as a healthcare student including punctuality and time keeping | |  |  |  |  | |  |  |
| Takes a person centred, personalised approach to care | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 2: Knowledge & application to practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Demonstrates the ability to critically appraise sources of information and to discuss evidence relevant to current practice | |  |  |  |  | |  |  |  |
| Demonstrates underpinning knowledge and applies this theory to practice | |  |  |  |  | |  |  |
| Explores practice and professional issues with colleagues | |  |  |  |  | |  |  |
| **Total of the 3 marks ÷ 3 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 3: Clinical skills & practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Demonstrates ability to perform clinical skills and procedures whilst maintaining an environment that promotes the health, safety and well being of women and others. | |  |  |  |  | |  |  |  |
| Demonstrates knowledge and understanding of the meaning of informed consent and gains informed consent with indirect supervision | |  |  |  |  | |  |  |
| With indirect supervision demonstrates the ability to complete records that are accurate, legible and continuous, containing the necessary information, and adheres to records and record keeping guidelines | |  |  |  |  | |  |  |
| **Total of the 3 marks ÷ 3 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 4: Professional & ethical practice** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Identifies and relates professional codes, standards, conduct, behaviour, policies and guidelines to practice. | |  |  |  |  | |  |  |  |
| Recognises individual’s preferences, right’s, interests, beliefs and culture | |  |  |  |  | |  |  |
| Recognises the importance of ensuring and maintaining, safety, privacy, dignity, and respect | |  |  |  |  | |  |  |
| Anticipates how people might feel in a given situation and responds with kindness and empathy to provide physical and emotional comfort | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Section 5: Self development & reflection** | |  | *14-20* | *12-13* | *10-11* | *8-9* | | *\*0-7* |  | *Student self-assessment* |
| Reflects on practice recognising own strengths and limitations, recognises the needs of others and seeks to improve skills and knowledge as a result of insight. | |  |  |  |  | |  |  |  |
| Is able to critically analyse the effectiveness of care, suggesting realistic alternatives where appropriate | |  |  |  |  | |  |  |
| Seeks help and guidance as appropriate and responds constructively to feedback from the multi-professional team, women and their families | |  |  |  |  | |  |  |
| Through reflection and evaluation demonstrates commitment to personal and professional development and life long learning | |  |  |  |  | |  |  |
| **Total of the 4 marks ÷ 4 =** | | | | | | | | | **Mark awarded** | **Mark Suggested** |
| **Outcome of practice assessment**: | | | | | | | | | | |
| 1st attempt/2nd attempt  (Please circle) | **Now Add up each of the 5 sections to find the total mark out of 100%**  If the mark is 0.5 or above then round up to the next number.  For example 41.5 = 42 | | | | | | **Overall indicative mark awarded**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Pass / Fail / Resubmission (Please circle) | | | |
| **Signature of student** Print name Date | | | | | | | | | | |
| *We authorise that the student has met / not met (please circle) all of the performance outcomes (including competencies, essential skills clusters, professional behaviour and conduct) associated with this placement/module and that in my judgement has performed to the quality indicated.*  Print name      **Signatures of sign-off mentors** Print name Date | | | | | | | | | | |
| I confirm that in my judgement assessment processes have been conducted appropriately  **Signature of link lecturer (If appropriate)** Print name Date | | | | | | | | | | |
| I confirm that the assessment process is comparable to that of other institutions  **Signature of External Examiner (If appropriate)** Print name Date | | | | | | | | | | |
|

#### Sickness and absence record

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sick or**  **absence** | **Date from:** | **Date to:** | **Total**  **number of**  **days** | **Number of**  **hours**  **absent** | **Signature**  **sign-off**  **mentor** | **Placement**  **area** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

The above is a true and accurate record of my sickness/absence. The University has been informed of all episodes of sickness or absence to enable them to record this information on my student file.

Signature of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**RECORD OF PLACMENT ATTENDANCE**

**Year 2 Learning Period 2**

**Student’s Name …..........................................**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student has attended as follows:** | | | | | |
| **Hours** | **Mentor Signature** | | | **Placement** | |
| Week 1  …..........hrs |  | | |  | |
| Week 2  …..........hrs |  | | |  | |
| Week 3  ……… hrs |  | | |  | |
| Week 4  ……… hrs |  | | |  | |
| **The student has not attended the placement on the following occasions:** | | | | | |
| Date(s) not attended | | Number of hours missed | Number of hours made up | | Hours outstanding at end of placement |
|  | |  |  | |  |
| **Total number of hours worked …....................Number of Nights worked (if any)………………**  **Mentor Print name……………………………………………….**  **Mentor’s signature ……………………….................................Date ……………….** | | | | | |
| **I verify that the above student has worked 40% of the time within this placement with a sign off mentor on the mentor register.**  **Mentor’s signature ……………………………………………... Date……………………………**  **Student’s signature………………………………………..…... Date………………………………** | | | | | |

*In the event of sickness it is the student’s responsibility to inform the placement area and the University of Hull – Midwifery Programme Secretary Andrea Randerson, phone (01482) 464583.*

Module Team Verification **Signature ……………………………… Date ……………**

**RECORD OF PLACMENT ATTENDANCE**

**Year 2 Learning Period 2**

**Student’s Name …..........................................**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student has attended as follows:** | | | | | |
| **Hours** | **Mentor Signature** | | | **Placement** | |
| Week 1  …..........hrs |  | | |  | |
| Week 2  …..........hrs |  | | |  | |
| Week 3  ……… hrs |  | | |  | |
| Week 4  ……… hrs |  | | |  | |
| **The student has not attended the placement on the following occasions:** | | | | | |
| Date(s) not attended | | Number of hours missed | Number of hours made up | | Hours outstanding at end of placement |
|  | |  |  | |  |
| **Total number of hours worked …....................Number of Nights worked (if any)………………**  **Mentor Print name……………………………………………….**  **Mentor’s signature ……………………….................................Date ……………….** | | | | | |
| **I verify that the above student has worked 40% of the time within this placement with a sign off mentor on the mentor register.**  **Mentor’s signature ……………………………………………... Date……………………………**  **Student’s signature………………………………………..…... Date………………………………** | | | | | |

*In the event of sickness it is the student’s responsibility to inform the placement area and the University of Hull – Midwifery Programme Secretary Andrea Randerson, phone (01482) 464583.*

Module Team Verification **Signature ……………………………… Date ……………**

**RECORD OF PLACMENT ATTENDANCE**

**Year 2 Learning Period 2**

**Student’s Name …..........................................**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student has attended as follows:** | | | | | |
| **Hours** | **Mentor Signature** | | | **Placement** | |
| Week 1  …..........hrs |  | | |  | |
| Week 2  …..........hrs |  | | |  | |
| Week 3  ……… hrs |  | | |  | |
| Week 4  ……… hrs |  | | |  | |
| **The student has not attended the placement on the following occasions:** | | | | | |
| Date(s) not attended | | Number of hours missed | Number of hours made up | | Hours outstanding at end of placement |
|  | |  |  | |  |
| **Total number of hours worked …....................Number of Nights worked (if any)………………**  **Mentor Print name……………………………………………….**  **Mentor’s signature ……………………….................................Date ……………….** | | | | | |
| **I verify that the above student has worked 40% of the time within this placement with a sign off mentor on the mentor register.**  **Mentor’s signature ……………………………………………... Date……………………………**  **Student’s signature………………………………………..…... Date………………………………** | | | | | |

*In the event of sickness it is the student’s responsibility to inform the placement area and the University of Hull – Midwifery Programme Secretary Andrea Randerson, phone (01482) 464583.*

Module Team Verification **Signature ……………………………… Date ……………**

**RECORD OF PLACMENT ATTENDANCE**

**Year 2 Learning Period 2**

**Student’s Name …..........................................**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student has attended as follows:** | | | | | |
| **Hours** | **Mentor Signature** | | | **Placement** | |
| Week 1  …..........hrs |  | | |  | |
| Week 2  …..........hrs |  | | |  | |
| Week 3  ……… hrs |  | | |  | |
| Week 4  ……… hrs |  | | |  | |
| **The student has not attended the placement on the following occasions:** | | | | | |
| Date(s) not attended | | Number of hours missed | Number of hours made up | | Hours outstanding at end of placement |
|  | |  |  | |  |
| **Total number of hours worked …....................Number of Nights worked (if any)………………**  **Mentor Print name……………………………………………….**  **Mentor’s signature ……………………….................................Date ……………….** | | | | | |
| **I verify that the above student has worked 40% of the time within this placement with a sign off mentor on the mentor register.**  **Mentor’s signature ……………………………………………... Date……………………………**  **Student’s signature………………………………………..…... Date………………………………** | | | | | |

*In the event of sickness it is the student’s responsibility to inform the placement area and the University of Hull – Midwifery Programme Secretary Andrea Randerson, phone (01482) 464583.*

Module Team Verification **Signature ……………………………… Date ……………**

Record of experience & feedback

This section should be used to record the feedback/practice experience(s) outside the normal interview process of a student’s progress during the placement(s) e.g.

* A student may work with another member of the multi-professional team, who can provide feedback to the student
* A sign-off mentor can record the ongoing achievements of the student between the tripartite assessments
* A student/sign-off mentor/healthcare professional may have concerns with the placement and informs the liaison/link lecturer and an action plan would then be negotiated.
* This must be used in a placement where the interim or final interview does not take place.

**If at any time issues are raised requiring further investigation, individual University processes should be adhered to.**

|  |  |
| --- | --- |
| **Date/ time** | **Placement area** |
|  |  |
| **Feedback on student’s progress/experience** | |
|  | |
| **Action plan / review of action plan** | |
| **Outcome of review / comments** | |
| Supervisor/ mentor / sign-off mentor  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Student  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Liaison / link lecturer (If applicable)  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |

Record of experience & feedback

This section should be used to record the feedback/practice experience(s) outside the normal interview process of a student’s progress during the placement(s) e.g.

* A student may work with another member of the multi-professional team, who can provide feedback to the student
* A sign-off mentor can record the ongoing achievements of the student between the tripartite assessments
* A student/sign-off mentor/healthcare professional may have concerns with the placement and informs the liaison/link lecturer and an action plan would then be negotiated.
* This must be used in a placement where the interim or final interview does not take place.

**If at any time issues are raised requiring further investigation, individual University processes should be adhered to.**

|  |  |
| --- | --- |
| **Date/ time** | **Placement area** |
|  |  |
| **Feedback on student’s progress/experience** | |
|  | |
| **Action plan / review of action plan** | |
| **Outcome of review / comments** | |
| Supervisor/ mentor / sign-off mentor  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Student  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Liaison / link lecturer (If applicable)  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |

Record of experience & feedback

This section should be used to record the feedback/practice experience(s) outside the normal interview process of a student’s progress during the placement(s) e.g.

* A student may work with another member of the multi-professional team, who can provide feedback to the student
* A sign-off mentor can record the ongoing achievements of the student between the tripartite assessments
* A student/sign-off mentor/healthcare professional may have concerns with the placement and informs the liaison/link lecturer and an action plan would then be negotiated.
* This must be used in a placement where the interim or final interview does not take place.

**If at any time issues are raised requiring further investigation, individual University processes should be adhered to.**

|  |  |
| --- | --- |
| **Date/ time** | **Placement area** |
|  |  |
| **Feedback on student’s progress/experience** | |
|  | |
| **Action plan / review of action plan** | |
| **Outcome of review / comments** | |
| Supervisor/ mentor / sign-off mentor  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Student  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Liaison / link lecturer (If applicable)  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |

Record of experience & feedback

This section should be used to record the feedback/practice experience(s) outside the normal interview process of a student’s progress during the placement(s) e.g.

* A student may work with another member of the multi-professional team, who can provide feedback to the student
* A sign-off mentor can record the ongoing achievements of the student between the tripartite assessments
* A student/sign-off mentor/healthcare professional may have concerns with the placement and informs the liaison/link lecturer and an action plan would then be negotiated.
* This must be used in a placement where the interim or final interview does not take place.

**If at any time issues are raised requiring further investigation, individual University processes should be adhered to.**

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| **Date/ time** | **Placement area** |
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| **Feedback on student’s progress/experience** | |
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| **Action plan / review of action plan** | |
| **Outcome of review / comments** | |
| Supervisor/ mentor / sign-off mentor  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Student  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| Liaison / link lecturer (If applicable)  Signature: …………………………..………………………… Print name…………………………………..Date……………… | |
| 1) Referral To meet the standard the student is required to demonstrate the following competency/skills, drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. | | | |
| **Midwifery competency** (5MC) Domain: Effective midwifery practice  **Refer women who would benefit from the skills and the knowledge of other individuals:**   * To an individual who is likely to have the requisite skills and experience to assist * At the earliest possible time * Support accurate, legible and complete information, which contains the reasoning behind making the referral and describes the woman’s needs and preferences.   Referrals might relate to: - women’s choices, health issues, social issues, financial issues, psychological issues, child protection matters, the Law | | | |

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| **1** | Performance and skills outcomes | **Sign-off mentor**  **Signature**  **& date** |
| A)  5MC | Recognises health and social situations or issues, which may require the referral of women to other professional or agencies with specialist knowledge and skills. |  |
| B)  5MC | Supports accurate, legible and complete information, which contains the reasoning behind making the referral and describes the woman’s needs and preferences. |  |
| **1) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. | | |

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| 2) Intrapartum care and management of the neonate at birth To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (6MC) Domain: Effective midwifery practice  **Care for, monitor and support women during labour and monitor the condition of the fetus and support spontaneous births.**  This will include:   * Communicating with women throughout and supporting them through the experience * Ensuring that the care is sensitive to individual women’s culture and preferences * Using appropriate clinical and technical means to monitor the condition of mother and fetus, providing appropriate pain management * Providing appropriate care to women once they have given birth   **Midwifery competency** (8MC) Domain: Effective midwifery practice  **Examine and care for babies immediately following birth**  This will include: Confirming their vital signs and taking the appropriate action and full assessment and physical examination |
| **Essential skills cluster** (ESC)  3) Normal labour and birth   * Work in partnership with women to facilitate a birth environment that supports their needs (no: 3/1) * Be attentive to the comfort needs of women before, during and after birth (no: 3/2) * Determine the onset of labour (no: 3/3) * Determine the wellbeing of women and their unborn baby (no: 3/4) * Measure, assess and facilitate the progress of normal labour (no: 3/5) * Support women and their partners in the birth of their baby (no: 3/6) * Facilitate the mother and baby to remain together (no: 3/7) * Keep accurate records (no.3/10)   **Essential skills cluster** (ESC) **-** 3) Normal labour and birth **-** Keep accurate records (no: 3/10),  4) Understand and share information that is clear, accurate and meaningful at a level which women, their partners and family can understand (no: 4/1) |
| **Conduct, performance and ethics** (CPE) - 15) Keep clear accurate records |

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| **2** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  ESC  3/3 | Actively participates in the clinical assessment, observation and history taking to determine the onset of labour. Discussing the findings accurately and shares this information and consequences with women. |  |
| B)  ESC  3/1  3/4  3/5 | Actively participates in the incorporation of birth plans or written instructions that identify the wishes and individual needs of women in any care provided. Referring women who would benefit from the skills and knowledge of other individuals. |  |
| C)  ESC  3/1 | Works in partnership with women to facilitate a birth environment that supports their needs such as privacy, silence and acknowledges the roles and relationships in families, dependent upon religious and cultural beliefs, preferences and experiences. |  |
| **2** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| D)  ESC  3/1 | Anticipates and is able to provide intrapartum care appropriate to the needs, context, social factors, culture and choices of women, babies and families including practicing in accordance with relevant legislation. |  |
| E)  ESC  3/1 | Supports the health and safety and wellbeing of women in a variety of birth settings other than the acute hospital environment. |  |
| F)  ESC  3/1 | Actively participates in changing the physical environment to meet the needs of women, such as lighting, furniture, temperature. |  |
| G)  ESC  3/2 | Applies in-depth knowledge of the physiology of labour and birth and uses this and skills of observation and active listening to analyse and evaluate the effectiveness of care being provided. |  |
| H)  ESC  3/5  3/6 | Sensitively and accurately, with informed consent, makes an assessment of the progress of labour including observation, such as behaviour, abdominal examination, vaginal examination where appropriate, informing women of their progress and discussing actions/consequences as necessary. Recognising any deviation from the norm, identifying and appropriately managing the latent and active phase of labour and providing care to women with complications. |  |
| I)  6MC  ESC  3/4 | Is able to assess and monitor fetal and maternal wellbeing during the intrapartum period, including assessment of liquor volume and colour, intermittent auscultation of the fetal heart using a pinnard stethoscope and a normal fetal cardiotocograph tracing. Interprets the findings accurately, and shares this information with women and discusses further action/consequences as necessary. |  |
| J)  ESC  3/2 | Is able to work with women to determine their coping strategies in order to support their preferences for pain management such as; mobilising, different positions, use of water, silence, verbal and non verbal cues. |  |
| K)  ESC  3/5 | Is actively involved in supporting women to use a variety of birthing aids, such as birthing balls |  |
| L)  6MC | Actively participates in the safe administration of a range of non pharmacological analgesic techniques. |  |
| M)  ESC  3/2 | Is able to ensure the comfort needs of women are met, such as:  Bladder care, appropriate hydration, nutritional intake, hygiene requirements, prevention of infection, assessment of skin integrity. |  |
| **2** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| N)  ESC  3/6 | Identifies the importance of offering choices related to the birth phase. Safely caring for woman/baby sensitively and is attentive to the ‘moment of birth’ creating an environment that is responsive to the woman’s needs. |  |
| P)  ESC  3/5 | Is confident in preparing any necessary equipment and monitoring of maternal and fetal wellbeing. |  |
| Q)  ESC  3/5 | Critically appraises and justifies the use of any intervention such as artificial rupture of membranes, continuous electronic fetal monitoring, urinary catheterisation, in order to facilitate a spontaneous birth. |  |
| R)  ESC  3/6 | Initiates emergency measures if required such as episiotomy. |  |
| S)  ESC  3/6 | Assesses and monitors the woman’s condition throughout the third stage of labour facilitating safe birth of the placenta and membranes by physiological and active management. |  |
| T)  8MC | Actively participates in assessing the vital signs of the newborn at birth, including physical examination, adaptation to extra uterine life and in the administration of Vitamin K if required. |  |
| U)  8MC  ESC  3/7 | Actively participates in the provision of care immediately post birth, including early identification and security, initiation of skin to skin, maternal infant attachment, assessing accurately the health and wellbeing of the baby. Support feeding and delay any unnecessary separation, avoiding early routine procedures such as weighing. Initiates emergency measures if required. |  |
| V)  ESC 3/10  4/10  CPE 15 | Actively participates in the recording of information that is accurate, legible and continuous which includes planning, implementation and evaluation of care, interventions and findings |  |

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| **2) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 3) Emergency procedures To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (7MC) Domain: Effective midwifery practice  **Undertake appropriate emergency procedures to meet the health needs of women and babies**  Emergency procedures will include: Manual removal of the placenta, Manual examination of the uterus, Managing post-partum haemorrhage, Resuscitation of mother/or baby |
| **Essential skills cluster** (ESC)  3) Normal labour and birth   * Identify and safely manage appropriate emergency procedures (no: 3/8) |

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| **3** | Performance and skills outcomes | **Sign-off mentor**  **Signature**  **& date** |
| A)  7MC  ESC  3/8 | Initiates and demonstrates confidence in the procedure(s) relevant to local policy for summoning assistance in an emergency in both primary and secondary care settings. |  |
| B)  7MC | Identifies and locates where emergency equipment can be accessed. |  |
| C)  7MC | Demonstrates basic life support or simulation using Resuscitation Council Gold standards for adults, pregnant women and babies or relevant local policy. |  |
| D)  ESC  3/8 | Participates and contributes to ‘skills and drills’ procedures related to adult and neonatal resuscitation and sustains emergency measures until help arrives. |  |

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| **3) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 4) Postnatal health & transition to motherhood To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (11MC) Domain: Effective midwifery practice  **Care for and monitor women during the puerperium, offering the necessary evidence-based advice and support regarding the baby and self-care**  These will include:   * Providing advice and support on feeding babies and teaching women about the importance of nutrition in child development * Providing advice and support on hygiene, safety, protection, security and child development * Enabling women to address issues about their own, their babies’ and their families health and social well being * Monitoring and supporting women who have postnatal depression or other mental illnesses * Advice on bladder control * Advising women on recuperation * Supporting women to care for ill/pre-term babies or those with disabilities |
| **Essential skills cluster** (ESC)  4) Initiation and continuance of breastfeeding   * Recognise appropriate infant growth and development, including where referral for further advice/action is required (no: 4/4) * Work in collaboratively with other practitioners and external agencies (no: 4/5) * Support women to breastfeed in challenging circumstances (no: 4/6) |
| **Baby Friendly Standards**  (BFI)  Themes:   1. Understanding breastfeeding 2. Enabling mothers to breastfeed 3. Close and loving relationships 4. Managing Challenges 5. Communication |

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| **4** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  11MC | Actively participates in the facilitation of infant feeding and nutrition in child development. |  |
| B)  11MC  ESC 4/4 | Actively participates in, under indirect supervision, the examination of the newborn for growth and development, and including appropriate screening tests to ensure health and normal progress. Informing women of the findings in a manner that is understood and referring where there is deviation from appropriate infant growth or concerns. |  |
| C)  11MC | Actively participates in the provision of evidence based advice and support to promote health and social wellbeing for women, their babies’ and families. |  |
| D)  11MC | Recognises the need to monitor and support women who have postnatal depression or mental health illnesses. |  |
| E)  ESC  4/5 | Is able to discuss with women the introduction of complementary foods and continuing breastfeeding during the weaning period, into the second year of life |  |

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| **4** | **Performance and skills outcomes**  **(continued)** | **Sign-off mentor**  **Signature**  **& date** |
| F)  ESC  4/5 | Works actively with other healthcare professionals and external agencies. Shares information about National and Local agencies and networks available to support women in the continuation of breastfeeding such as NCT, La Leche League and Lactation Consultant breastfeeding co-ordinators and understands community support to women who breastfeed and as a resource for healthcare professionals. |  |
| G)  ESC  4/5  4/6 | Works confidently and collaboratively and in partnership with women to identify the limited situations in which exclusive breastfeeding is not possible. Participates in supporting women to partially breastfeed or artificially feed (BFI) and is sensitive to the needs of women and their partners. |  |
| H)  ESC  4/3 | Recognise and manage common complications of breastfeeding, how these arise and demonstrate how women may be helped to avoid them (BFI) |  |
| I)  T5 | Engages with the multi disciplinary team to support infant feeding |  |
| J)  ESC  4/1  T1 | Confidently and sensitively communicates the importance of breastfeeding, in terms of health outcomes (BFI) |  |
| K)  ESC  4/2 | Reflects on own thoughts and feelings about infant feeding in order to facilitate information sharing to be ethical and non-judgemental |  |
| L)  ESC  4/3 | Confidently explains to women the importance of baby-led feeding in relation to the establishment and maintenance of breastfeeding (BFI) |  |
| M)  ESC  4/3 | Can recognise and apply appropriate knowledge to assist effective positioning, attachment, suckling and milk transfer during breastfeeding |  |
| N)  ESC  4/3 | Teaches mothers the necessary skills to enable them to effectively position and attach their baby for breastfeeding (BFI) |  |
| O)  ES  C  4/3 | Explains the importance of their baby rooming-in with them and baby holding in the postnatal period as a means to facilitate breastfeeding (BFI) |  |
| P)  ESC  4/3 | Teaches women how to hand express their breast milk and how to store, freeze and warm it with consideration to aspects of infection control (BFI) |  |
| Q)  T2 | Assist mothers to breastfeed for as long as they want to |  |
| **4** | **Performance and skills outcomes**  **(continued)** | **Sign-off mentor**  **Signature**  **& date** |
| R)  T5 | Effectively communicates in a sensitive way and initiate mother centred conversations around infant feeding choices |  |
| S)  T3 | Supports women who are formula feeding |  |
| T)  T3 | Educates women on the sterilisation of equipment and safe preparation of formula milk |  |
| U)  T3 | Apply knowledge of attachment theory to promote and encourage close and loving relationships between mother and babies |  |
| V)  T5 | Evaluate and apply relevant evidence linked to infant feeding practice |  |
| **4) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. | | |
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| 5) Safe and accountable drug administration To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (12MC)Domain: Effective midwifery practice  **Select, acquire and administer safely, a range of permitted drugs consistent with legislation, applying knowledge and skills to the situation which pertains at the time**  Methods of administration will include: Oral, Intravenous, Intramuscular, Topical, Inhalation |
| **Essential Skills Clusters** (ESC)  5) Medicines Management:   * Within the parameters of normal childbirth, ensure safe and effective practice through comprehensive knowledge of medicinal products, their actions, risks and benefits including the ability to recognise and respond safely to adverse drug reactions and adverse drug events (no: 5/1) * Correctly and safely undertake medicinal products calculations (no: 5/2) * In the course of their professional midwifery practice, supply and administer medicinal products safely in a timely manner, including controlled drugs (no: 5/3) * Keep and maintain accurate records, which includes when working within a multi-disciplinary framework and as part of a team * Work within the legal and ethical framework that underpins safe and effective medicinal products management as well as in conjunction with national guidelines and local policies (no: 5/5) * Work in partnership with women to share information in assisting them to make informed choices about medical products related to herself, her unborn child or her baby (no: 5/6) * Work in partnership with women to share information about alternative approaches to using medication, where appropriate (no: 5/7) * Order, receive, store, transport and dispose of medicinal product safely and in accordance with relevant legislation, in midwifery settings including controlled drugs (no: 5/8) * Use and evaluate up-to-date information on medicinal products management and work within national and local policies and guidelines using appropriate reference (no: 5/9) * Recognise and correctly respond to obstetric emergencies in context of medicines management (5/10) |

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| **5** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  12MC  ESC  5/1,5/3, 5/9 | Actively participates and manages the safe administration of medication/drugs by prescribed routes in accordance with local, national and professional gold standards/policies and monitors their effect. |  |
| B)  ESC  5/1  5/10 | Applies an understanding of pharmacology, how medical products act and interact in the systems of the body as well as their therapeutic action in all aspects related to midwifery practice. Recognises and acts accordingly with regard to medicines management when confronted with obstetric emergencies in both primary and secondary care. |  |
| C)  ESC  5/1 | Uses knowledge and understanding of commonly supplied or administered medicinal products to the women or baby in order to act promptly in cases where side effects and adverse reactions occur such as management of anaphylaxis. Reporting adverse events. |  |
| D)  12MC  ESC  5/4, 5/5, 5/8 | Applies knowledge of legislation, policies and procedures to support midwifery practice and for the safe, ordering, storage of medicines including controlled drugs in the primary and secondary care settings. |  |

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| **5** | **Performance and skills outcomes**  **(continued)** | **Sign-off mentor**  **Signature**  **& date** |
| E)  12MC  ESC  5/3  5/4 | Contributes to the completion of records that are accurate, legible and continuous pertaining to drug administration including controlled drugs, omitted medication, information of the benefits and risks and the use of prescription charts. Understands the professional responsibility in maintaining accurate records including regulation, national and local policy guidelines. |  |
| F)  ESC  5/2 | Competently and accurately calculates medicinal products frequently encountered within the field of practice**.** |  |
| G)  ESC  5/3 | Utilises, safely handles, transports and disposes of medicinal products and the equipment needed to prepare/administer medication (e.g. needles, syringes, gloves). |  |
| H)  ESC  5/3, 5/5 | Utilises and interprets medicine legislation related to midwives exemptions accurately and is conversant with legislation related to pharmacy only and General Sales Lists medicinal products, midwives supply orders, destruction of controlled drugs and patient group directions. |  |
| I)  ESC  5/4 | Demonstrates an understanding of roles and responsibilities within the multi-disciplinary team for medicinal products management, including how and in what ways information is shared. |  |
| J)  ESC  5/4 | Under indirect supervision is able to take a medicine history. |  |
| K)  ESC  5/5 | Is able to recognise and demonstrate understanding of the legal and ethical frameworks relating to safe administration of medicinal products including personal accountability in respect of supplying and administering unlicensed products. |  |
| L)  ESC  5/6 | Participates and involves women in administration and/or self administration of medicinal products including clear and accurate information, informed choices, and assesses women’s ability to self administer, giving clear instructions and clarifies understanding. |  |
| M)  ESC  5/9 | Is able and confident to critically evaluate and access commonly used evidence based sources of information relating to the safe and effective management of medicinal products such as: Pharmacy, British National Formulary and National/local policies. |  |

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| **5) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

## Medicines Management

The NMC Essential Skills Clusters (NMC circular 23/2007) state that numerical assessments are required to test skills that encompass calculations associated with medicines. The assessment must take place in the practice setting and a 100% pass mark is required by the end of the third year.

During the third year your midwifery mentor should set you some drug calculations to determine you can accurately calculate medicinal products frequently encountered within field of practice. You also need to briefly describe the effect of the drug.

These calculations can apply to oral, subcutaneous or intramuscular administration.

In the spaces below you should demonstrate the method of calculation to specific examples given by your mentor. The mentor should sign each entry to confirm your ability to calculate correctly. By the end of the third year you should supply five examples, at least one should be an intravenous drug calculation.

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| **Example**: a woman is prescribed a dose of 500 micrograms of Drug A. What volume of a 10mg/ml injection contains the required dose?  *Drug A available 10mg/ml but need 500 micrograms.*  *Convert 500 micrograms to mg (divide by 1000) = 0.5mg*  *What volume of injection contains 0.5mg?*  *10mg = 10000mcg*  *0.5mg/10mg x 1ml = 0.05ml*  *0.05ml of Drug A is required to make up the dose*  The effect was excellent, client peaceful and calm. Vital signs within normal range.  Mentor Signature: S Brown | **1.**  **Mentor Signature** | |
| **2.**  **Mentor Signature** | **3.**  **Mentor Signature** | |
| **4.**  **Mentor Signature** | **5.**  **Mentor Signature** | |
| 6) Professional accountability To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. | |
| **Midwifery competency** (MC16) Domain: Professional and Ethical Practice  **Practice in accordance with The Code for nurses and midwives (NMC 2015), within the limitations of the individual’s own competence, knowledge and sphere of professional practice, consistent with the legislation relating to midwifery practice.** This will include:   * Using professional standards of practice to self-assess performance * Consulting with the most appropriate professional colleagues when care requires expertise beyond the midwife’s current competence * Consulting other health care professionals when the woman’s and baby’s needs fall outside the scope of midwifery practice * Identifying unsafe practice and responding appropriately | |
| **Conduct, performance and ethics** (CPE)  6) Maintain clear professional Boundaries, 11) Manage risk, 16) Be open and honest, act with integrity and uphold the reputation of the profession, 17) Act with integrity, 19) Be impartial, 20) Uphold the reputation of the profession | |

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| **6** | **Year 3**  **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  16MC | Recognises the role of the NMC and other legislation acts relating to midwifery practice and can identify NMC professional publications relating to midwifery and professional practice. |  |
| B)  16MC | Confidently identifies situations that are outside the sphere of practice and consults with the most appropriate health care professionals. |  |
| C)  CPE  11 | Contributes to managing risk and identifies procedures for reporting to colleagues when the environment of care is putting people at risk. |  |
| D)  CPE  6  16  17  19  20 | Demonstrates a personal and professional commitment, is open and honest, acts with integrity, upholds the reputation of the profession, maintains clear professional boundaries and remains impartial. Adheres to the laws of the country. |  |

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| **6) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 7) Accountability to individual To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (17MC) Domain: Professional and Ethical Practice  **Practice in a way, which respects, promotes and supports individuals’ rights, interests, preferences, beliefs and cultures.**  This will include:   * Offering culturally-sensitive family advice * Ensuring that women’s labour is consistent with their religious and cultural beliefs and preferences * Acknowledgement of the roles and relationships in families, dependent upon religious and cultural beliefs, preferences and experiences |
| **Essential skills cluster** (ESC)  1) Communication:   * Enable women to make choices about their care by informing women of the choices available to them and providing them with evidence-based information about the benefits and risks of options so that women can make fully informed decisions (no: 1/3). * Ensure that consent will be sought from the woman prior to care being given and that the rights of women are respected (no: 1/4). * Treat women with dignity and respect them as individuals (no: 1/5) |
| **Conduct, Performance and Ethics** (CPE) - 5) Ensure consent is gained |

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| **7** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  17MC | Actively participates in a woman-centred approach to care demonstrating respect for diversity and individual preferences and acts in a manner that respects others and that promotes, recognises and values differences. |  |
| B)  17MC  ESC  1/5 | Acts professionally to ensure and maintain privacy and dignity when undertaking midwifery care and procedures. Identifies factors which maintain the dignity of women and challenging situations/others where the dignity of the woman may be compromised. |  |
| C)  17MC | Recognises the roles and relationships in families, dependent upon religious and cultural beliefs, preferences and experiences. |  |
| D)  17MC  CPE5  ESC 4 | Actively participates in the process of obtaining informed consent prior to undertaking clinical activity and assists in determining choices to maximise an individual approach to care. Ensures that the meaning of informed consent is understood and gain consent to share confidential information outside the professional team. |  |
| E)  ESC  1/3 | Actively participates in sharing evidence-based information with women in order for them to make an informed decision about their care. Even where a particular choice may result in harm to themselves or their unborn child, unless a court of law orders contrary. |  |
| **7** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| F)  ESC  1/3 | Respects women’s autonomy when making decisions and the role as partners in their care and contributions they can make. Includes using appropriate strategies such as national, voluntary agencies and websites to encourage and promote choice for all women and provide accurate, truthful and balanced information which is easily understood. |  |
| G)  ESC  1/4 | Works within the legal frameworks when seeking consent and applies the principles of consent in accordance with the NMC Code (NMC 2015). Respects client’s autonomy and rights to withhold consent in relation to care and treatment. |  |
| H)  ESC  1/4 | Shares information confidently with women who have physical, cognitive or sensory disabilities and those who do not speak or read English. Acts professionally to ensure personal judgements, prejudices, values, attitudes and beliefs do not compromise the care provided. |  |
| **7) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. | | |

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| 8) Accountability to society To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (18MC) Domain: Professional and Ethical Practice  **Practice in accordance with relevant legislation.**  This will include:   * Practising within the contemporary legal framework of midwifery * Demonstrating knowledge of legislation relating to human rights, equal opportunities and access to patient records * Demonstrating knowledge of legislation relating to health and social policy relevant to midwifery practice * Demonstrating knowledge of contemporary ethical issues and their impact upon midwifery practice * Managing the complexities arising from ethical and legal dilemmas   **Safeguard children and adults from vulnerable situations and support and protect them from harm**  Domain: Effective Midwifery Practice  Provide seamless care and where appropriate, interventions in partnership with women and other care providers  This will include;   * Refer women who would benefit from the skills and knowledge of other individuals   Domain: Professional and ethical practice  Work collaboratively with the wider health care team and agencies |

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| **8** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  18MC | Is able to identify legislation relating to health and social policy relevant to midwifery practice, for example Data Protection Act (1998), Freedom of Information (2000), Births & Deaths Registration Acts and Civil Liabilities Act (1976). |  |
| B)  18MC | Is able to outline the role(s) of the midwife in recognising and managing ethical dilemmas, and the impact they may have on midwifery practice. |  |
| C)  18MC | Is able to identify ethical and legal dilemmas faced by women and midwives throughout the childbirth continuum. |  |
| D)  MC | Acts within legal frameworks and local policies in relation to safeguarding adults and children who are in vulnerable situations |  |
| E)  MC | Documents concerns and information when people who are in vulnerable situations |  |
| F)  MC | Recognises and responds when people are in vulnerable situations and at risk or in need of support and protection |  |
| G)  MC | Supports people in asserting their human rights |  |
| H)  MC | Challenges practice which do not safeguard those in need of support and protection |  |

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| **8) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 9) Managing self and others To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (21MC)Domain: Professional and Ethical Practice  **Manage and prioritise competing demands.**  This will include: Deciding who is best placed and able to provide particular interventions to women, babies and their families & Alerting managers to difficulties and issues in service birth |
| **Essential skills cluster** (ESC)3) Normal labour and birth - Works collaboratively with other practitioners (no: 3/9) |
| **Conduct, performance and ethics** (CPE) - 10) Delegate effectively, 18) Deal with problems |

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| **9** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  21MC  ESC 3/9  CPE  10 | Identifies ways in which the midwife utilises strategies to deal with and prioritise competing demands and the standards for delegating tasks effectively. Negotiates with others in relation to balancing competing/conflicting priorities |  |
| B)  21MC  ESC  3/9 | Demonstrates self and professional awareness of strengths and limitations and takes appropriate action if required. Is able to effectively manage self in relation to competing demands of developing midwifery skills and achieving academic credibility. |  |
| D)  CPE  18 | Identifies procedures for managing with complaints including internal and external investigations. |  |

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| **9) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |
| 10) Lifelong learning To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (24MC) Domain: Developing the individual midwife and others  **Review, develop and enhance the midwife’s own knowledge, skills and fitness to practice.**  This will include:   * Making effective use of the framework for the statutory supervision of midwives * Meeting NMC’s continuing professional development and practice standards * Reflecting on the midwife’s own practice and making the necessary changes as a result * Attending conferences, presentations and other learning events |
| **Conduct, performance and ethics** (CPE) - 14) Keep skills and knowledge up to date |

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| **10** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  24MC  CPE  14 | Identifies personal learning outcomes and demonstrates motivation to develop up to date skills and knowledge. Seeks information and opportunities to attend learning events, and asks questions, to meet NMC professional and practice standards. |  |
| B)  24MC | Demonstrates knowledge of the aspects of care and is able to explore theory and practice. |  |
| C)  24MC | Recognises the framework for midwifery supervision. |  |

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| **10) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 11) Multi-professional working and Inter-agency collaboration To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (25MC) Domain: Developing the individual midwife and others  **Demonstrate effective working across professional boundaries and develop professional networks**  This will include: effective collaboration and communication, sharing skills, multi-professional standard setting and audit  **Midwifery competency** (20MC) Domain: Professional and Ethical Practice  **Work collaboratively with other practitioners and agencies in ways which:**   * Value their contribution to health and care * Enable them to participate effectively in the care of women, babies and their families * Acknowledge the nature of their work and the content in which it is placed   Practitioners and agencies will include those who work in:   * Health care * Social care * Social security, benefits and housing * Advice and guidance and counselling * Child protection   The Law |
| **Essential skills cluster** (ESC)  1) Communication: Be confident in their own role within a multi-disciplinary/multi-agency team (no: 1/8)  3) Normal labour and birth - Works collaboratively with other practitioners (no: 3/9) |
| **Conduct, performance and ethics** (CPE) - 8) Share information with colleagues, 9) Work effectively as part of a team |

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| **11** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  25MC  ESC  1/8  3/9 | Actively participates in effective working across professional boundaries and developing professional networks and acting within The Code: (NMC 2015) |  |
| B)  25MC  CPE  8&9 | Actively participates in communication and works in collaboration with other midwives and professionals as part of an effective team. Sharing information to maintain safety of care. |  |
| C)  ESC  1/8 | Actively participates in working within a multi-professional team as an active member, supporting others, valuing others roles and responsibilities within the team and interacts appropriately. Explores ideas and solutions to enhance care and working inter-professionally as a means of achieving optimum care. |  |
| D)  ESC  1/8 | Demonstrates confidence in own role within a multi-disciplinary/multi-agency team, including reflecting on practice and discusses issues with other members of the team to enhance learning, including challenging the practice of self and others across the multi-professional team |  |
| **11** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| E)  ESC  3/9 | Is confident to call appropriate professionals regardless of hierarchy, when care requires expertise beyond the midwife’s current practice or needs of the women or baby fall outside the scope of midwifery practice. Acts an advocate for women. |  |
| F)  ESC  1/8 | Acts as an effective role model in decision making processes, including taking action and supporting junior staff. |  |
| G)  20MC | Is able to identify the role(s) and responsibility of practitioners and agencies in contributing to health and care. Identifies who may be best placed to provide aspects of maternity care and works collaboratively to ensure effective care for women and their families. |  |
| **11) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. | | |

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| 12) Evidence Based Practice and Evaluation of practice To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (23MC) Domain: Professional and Ethical Practice  **Contribute to the development and evaluation of guidelines and policies and make recommendations for change in the interests of women, babies and their families**  Evaluating policies will include:   * Consideration of best available evidence * Providing feedback to managers on service policies * Representing the midwife’s own considered views and experience within the context of broader health and social care policies in the interests of women, babies and their families   **Midwifery competency** (26MC) Domain: Achieving quality care through evaluation and research  **Apply relevant knowledge to midwife’s own practice in structured ways which are capable of evaluation**  This will include:   * Critical appraisal of knowledge and research evidence * Critical appraisal of the midwife’s own practice * Gaining feedback from women and their families and appropriately * Applying this to practice * Disseminating critically-appraised good practice   **Midwifery competency** (27MC) Domain: Achieving quality care through evaluation and research  **Inform and develop the midwife’s own practice and the practice of others through using the best available evidence and reflecting on practice**  This will include:   * Keeping up-to-date * Applying evidence to practice * Alerting others to new evidence for them to apply to their own practice |

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| **12** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  26MC  23MC | Discusses and evaluates the best available evidence from a range of sources, in the context of health and social care including relevant policies and guidelines for aspects of antenatal, intrapartum and postnatal care. Is able to identify how relevant knowledge and evidence informs good practice. |  |
| B)  26MC | Seeks appropriate feedback from mentor, women and their families. |  |
| C)  26MC | Reflects on midwifery practice identifying strengths and weaknesses. |  |
| D)  27MC | Explores methods to keep up to date with midwifery care to inform own practice. Recognises the practice of others through the use of best available evidence and reflection. |  |

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| **12) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

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| 13) Information technology skills To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (28MC) Domain: Achieving quality care through evaluation and research  **Manage and develop care utilising the most appropriate information technology (IT) systems.**  This will include:   * Recording practice in consistent formats on IT systems for wider scale analysis * Using analysis of data from IT systems to apply to practice * Evaluating practice from data analysis |

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| **13** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  28MC | Actively participates in the entry of data onto healthcare computer systems and in the retrieval of information pertaining to women to inform the provision of care. |  |
| B)  28MC | Identifies and evaluates how data analysis from IT healthcare systems can be utilised to enhance and evaluate the effectiveness of midwifery practice. |  |
| **13) Student’s evidence and experience to achieve outcomes** | | |

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| 14) Audit To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (29MC) Domain: Achieving quality care through evaluation and research  **Contribute to the audit of practice to review and optimise the care of women, babies and their families**  This will include:   * Auditing the individual’s own practice * Contributing to the audit of team practice |

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| **14** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  29MC | Recognises and evaluates the value of audit to enhance and optimise the care of women, babies and their families. |  |
| B)  29MC | Contributes to the auditing and review of standard setting in midwifery practice. |  |
| **14) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. | | |

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| 15) Neonates with special needs To meet the standard the student is required to demonstrate the following competency/skills drawing on practice experience(s) and underpinned by theoretical learning appropriate to their level. By the end of an NMC approved midwifery programme the student will have achieved all the competencies and skills. |
| **Midwifery competency** (10MC) Domain: Effective midwifery practice  **Examine and care for babies with specific health or social needs and refer to other professionals or agencies as appropriate**  This will include: child protection, congenital disorders, birth defects, low birth weight, pathological conditions (such as babies with vertical transmission of HIV, drug-affected babies) |
| **Essential skills cluster** (ESC)  4) Initiation and continuance of breastfeeding   * Support women to breastfeed in challenging circumstances (no: 4/6) |

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| **15** | **Performance and skills outcomes** | **Sign-off mentor**  **Signature**  **& date** |
| A)  10MC | Examines and cares for babies with specific health or social needs and refers to other professionals or agencies as appropriate. |  |
| B)  ESC  4/6 | Supports women who are separated from their babies (e.g. admission to a special care baby unit, and/or women receiving high dependency care in a separate environment) to initiate and maintain their lactation and feed their babies optimally (BFI). |  |
| C)  ESC  4/6 | Feeds expressed breast milk to a baby using a cup/ or syringe as appropriate (BFI). |  |

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| **15) Student’s evidence and experience to achieve outcomes**  This should be linked to specific examples from practice, and how this case links to the outcome. |

## CONFIRMATION OF PROFICIENCY

In accordance with the *NMC Standards to support learning and assessment in practice* (NMC, 2008) the sign-off mentor must confirm that the student has successfully completed all practice requirements. This should be completed by the last sign-off midwife mentor that the student has worked with.

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| **We can confirm that the student has achieved competence in all midwifery competencies (MCs) and essential skills clusters (ESCs) enclosed in this document and is ready to take on the roles and responsibilities of the midwife.** |
| **Comments:**  **Mentor Signature: Date:**  **Print name:**  **Mentor Signature: Date:**  **Print name:** |

**Reference List**