**BSc (HONS) MIDWIFERY**

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**Practice Module S2**

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: standards of conduct performance and ethics for nurses and midwives NMC 2008). 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 (2009) guidance on professional conduct for nursing and midwifery students. 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, EU 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.

## 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 client’s records, and follow NMC guidance on Record Keeping, 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.

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)** | **Placement area** | **Date of annual mentor update** | **Date of**  **triennial review** | **Sign-off mentor**  **(Specimen Signature)** |
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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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| **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.

|  |
| --- |
| **Student’s reflection on progress** |
|  |
| **Sign-off mentors reflection on student’s progress** |
|  |
| **Identify areas for development /improvement** |
|  |
| **Revised development plan** |
|  |
| **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 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 | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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) | | | |
| **Comments on grading process**  **only If required in addition to the**  **final interview documentation** | |  |  | |  |  |  | |  |  |  |
| **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 mentor | 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 mentor 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 mentor 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 | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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* | **Sign-off mentor Signature** | *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) | | | |
| **Comments on grading process**  **only If required in addition to the**  **final interview documentation** | |  |  | |  |  |  | |  |  |  |
| **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 | | | | | | | | | | | |
|

#### 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 1**

**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 1**

**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 1**

**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 1**

**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 1**

**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** |
|  |  |
| **Review of 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.

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* 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** |
|  |  |
| **Review of 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.

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* A sign-off mentor can record the ongoing achievements of the student between the tripartite assessments
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* 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** |
|  |  |
| **Review of 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
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* This must be used in a placement where the interim or final interview does not take place.

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

|  |  |
| --- | --- |
| **Date/ time** | **Placement area** |
|  |  |
| **Review of 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** |
|  |  |
| **Review of 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……………… | |
| 1) Communication 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** (MC1) Domain: Effective midwifery practice  **Communicates effectively with women and their families throughout the pre-conception, antenatal, intrapartum and postnatal periods.**  Communication will include: -   * Listening to women, jointly identifying their feelings and anxieties about their pregnancies, the birth and the related changes to themselves and their lives. * Enabling women to think through their feelings. * Enabling women to make informed choices about their health and health care. * Actively encouraging women to think about their own health and the health of their babies and families and how can this be improved. * Communicating with women throughout their pregnancy, labour and the period following birth. | | | |
| **Essential skills cluster** (ESC)  1) Communication:   * Be attentive and share information that is clear, accurate and meaningful at a level which women, their partner and family can understand (No: 1/1) * Provide care that is delivered in a warm, sensitive and compassionate way (no: 1/7) | | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| **1** | Performance and skills outcomes | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  1MC | Establishes a rapport with women and their families throughout the pre-conception, antenatal, intrapartum and postnatal stages. |  |  |
| B)  1MC | Listens to women and their families talk about their experiences and expectations and where necessary seeks appropriate information from other sources to answer questions raised. |  |  |
| C)  1MC  ESC  1/1,1/7 | Uses appropriate verbal, non-verbal and written communication and is familiar with accessing and recording information other than in handwritten form such as texting. |  |  |
| D)  ESC  1/1  1/7 | With women and colleagues/peers consistently demonstrates the ability to use strategies to enhance communication to remove barriers in order to make clear effective communication and can recognise the appropriateness of silence in certain situations, including a range of communication methods and styles in individual and group settings. |  |  |
| E)  ESC  1/1 | Is proactive and creative in enhancing communication and seeks to confirm understanding, responding appropriately to what the woman is communicating and acts to reduce and challenge barriers to effective communication. |  |  |
| **1** | Performance and skills outcomes | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| F)  ESC 1/7 | Cares for women in a sensitive and compassionate manner to maintain a supportive relationship with the woman and her family by; anticipating responses with empathy: providing physical and emotional comfort: responding to emotional discomfort of self and others and using touch appropriately. |  |  |
| G)  ESC  1/1 | Uses appropriate and relevant communication skills to deal with difficult and challenging circumstances in individual and group scenarios. |  |  |
| **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) Diagnosis, monitoring & assessment 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** (2MC) Domain: Effective midwifery practice  **Diagnose pregnancy, assess and monitor women holistically throughout the pre-conception, antenatal, intrapartum and postnatal period through the use of a range of assessment methods and reach valid, reliable and comprehensive conclusions.**  The different assessment methods will include: -   * History Taking * Observation * Physical Examination * Biophysical Tests * Social, Cultural and Emotional Assessments |
| **Essential skills cluster** (ESC)  2) Initial consultation between the woman and the midwife:   * Accurately complete an initial consultation ensuring women are at the centre of care (no: 2/2) * Be the first point of contact when seeking advice and/or information about being pregnant (no: 2/4) |

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| **2** | Performance and skills outcomes | **Not Achieved (NA)**  **Progress (P)**  **Achieved (A)** | | **Sign-off mentor**  **Signature**  **& date** |
| A)  2MC/ ESC 2/2 | With indirect supervision takes an accurate history during an initial consultation, recording the information in the appropriate document(s) and ensures women are at the centre of care. | |  |  |
| B)  2MC | Assesses and monitors women and fetus/baby holistically throughout the pre-conception, antenatal, intrapartum and postnatal period through the use of a range of assessment methods and reach valid, reliable and comprehensive conclusions. | |  |  |
| C)  2MC | Actively participates in the appropriate assessment method(s) and is able to identify a woman’s social, cultural and emotional wellbeing. | |  |  |
| D) ESC  2/4 | With indirect supervision is the first point of contact when seeking advice and/or information about being pregnant. Is confident in working in a variety of models of service birth, where available is actively involved in being accessible for women in environments other than traditional NHS setting such as shops, supermarkets, leisure centres | |  |  |

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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) Programmes of care and evaluation of care 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** (3MC) Domain: Effective midwifery practice  **Determine and provide programmes of care and support for women**  Programmes of care and support for women which: -   * Are appropriate to the needs, contexts, culture and choices of the women, babies and their families * Are made in partnership with women * Are ethical * Are based on best evidence and clinical judgement * Involve other practitioners when this will improve health outcomes   This will include consideration of:   * Plans for birth * Place of birth * Plans for feeding their babies * Needs for postnatal support * Preparation for parenthood   **Midwifery competency** (14MC) Domain: Effective midwifery practice  **Monitor and evaluate the effectiveness of programmes of care and modify them to improve the outcomes for women, babies and their families**.  This will include: Consideration of the effectiveness of the above and making the necessary modifications to improve outcomes for women and their families. |
| **Essential skills cluster** (ESC)  1) Communication:   * Work in partnership with women in a manner that is diversity sensitive and is free from discrimination, harassment and exploitation (no: 1/6) * Provide care that is delivered in a warm, sensitive and compassionate manner (no: 1/7)   4) Initiation and continuance of breastfeeding   * Understand and share information that is clear, accurate and meaningful at a level which women, their partners and family can understand (no: 4/1) BFI relates to Baby Friendly Education Standards Learning Outcomes |
| **Conduct, Performance & Ethics** (CPE)  1) Make the care of people your first concern, treating them as individuals and respecting their dignity  7) Work with others to protect and promote the health & wellbeing of those in your care, their families and the wider community  12) Provide a high standard of care at all times 13) use best evidence |

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| **3** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Progress (P)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  3MC  CPE  12,13 | With minimal supervision develops programme(s) of support, recognising when modifications are needed and how best evidence care in partnership with women, including preparation for parenthood plans and place for birth, plans for feeding their babies, postnatal support can improve health outcomes. |  |  |
| B)  ESC  1/7  CPE 1&7  3MC | Is knowledgeable about ethical, cultural and social choices and makes the care of people the first concern, treating them as individuals and respects their dignity. Promoting health and wellbeing of those in their care, families and the wider community including practical and emotional support. |  |  |
| **3** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Progress (P)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| C)  ESC  1/6 | Is proactive in promoting care environments that are diversity sensitive and free from exploitation, discrimination and harassment. |  |  |
| D)  ESC 1/6 | Works in partnership with women and is sensitive to age, culture, religion, spiritual beliefs, disability, gender, sexual orientation and respects people’s rights. Speaking out when these are at risk of being compromised and takes into account UK legal frameworks and professional ethics. |  |  |
| E)  ESC  1/7 | Does not allow personal feelings towards a client or others to compromise care. Has insight into own values and how these may impact on interactions with women. |  |  |
| F)  ESC  4/1 | Contributes, with indirect supervision, to a variety of forums where information is shared in respect of the advantages and disadvantages of different infant feeding methods. |  |  |
| G)  14MC | Monitors and evaluates the effectiveness of care provided and contributes to the modification of care plans to meeting the changing needs of women and their babies. |  |  |
| **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) Provision of antenatal care 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** (4MC) Domain: Effective midwifery practice  **Provide seamless care and where appropriate interventions in partnership with women and other care providers during the antenatal period which: -**   * Are appropriate for women’s assessed needs, context and culture * Promote their continuing health and well-being * Are evidence based * Are consistent with the management risk * Draw upon the skills of others to optimise health outcomes and resource use   These include: -   * Acting as lead carer in normal pregnancies * Contributing to providing support to women when their pregnancies are in difficulty (such as women who will need operative or assisted birth) * Providing care for women who have suffered pregnancy loss * Discussion/negotiation with other professionals about further interventions which are appropriate for individual women, considering their wishes, context and culture * Ensuring that current research findings and other evidence are incorporated into practice * Team working in the best interests of individual women   **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)  2) Initial consultation between the woman and the midwife:   * Be confident in sharing information about common antenatal screening (no: 2/1) * Accurately complete an initial consultation ensuring women are at the centre of care (no: 2/2) * Work collaboratively with other practitioners and external agencies (no: 2/3) |

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| **4** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  4MC | Contributes with indirect supervision in the provision of evidence-based care with midwives and other care providers in partnership with women. |  |  |
| B)  4MC | Actively participates in managing risk and the support women require with more complex pregnancies or pregnancy loss. Identifies deviation from the norm, referring if appropriate to other professionals to optimise health outcome. |  |  |
| **4** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| C)  ESC  2/1 | Actively participates in the main NHS-managed antenatal screening programmes that are offered to pregnant women utilising local/national information to assist with making choices including national voluntary agencies and websites and respects the decision of women who decline services or treatments. |  |  |
| E)  ESC  2/1 | Actively participates in sharing information using as appropriate a variety of multi-media channels such as texting and facilitates informed consent with women about common antenatal screening tests including the optimum times for testing, previous bereavement or affected/high risk screening results. |  |  |
| F)  ESC  2/1 | Is able to seek out required information about less common/specialised antenatal screening tests |  |  |
| G)  ESC  2/1 | Interprets data/results accurately and shares this information sensitively with women and their families, including the ability to discuss further actions/consequences as necessary |  |  |
| H)  ESC  2/2 | Participates and consistently shows the ability to assess maternal and fetal wellbeing relevant to the stage of pregnancy, explaining the findings in a sensitive manner and encourages women to ask questions, referring to appropriate individuals where necessary. Empowering women to recognise normal pregnancy development and to seek advice. |  |  |
| I)  ESC  2/2 | Explores effectively the social, religious and cultural factors that inform an individualised antenatal care pathway for women that is diversity sensitive. Recognising and advising women who would benefit from more specialist services. |  |  |
| J)  ESC 2/2 | Is skilled in providing the opportunity to women to disclose domestic abuse and is able to respond appropriately. |  |  |
| L)  ESC  2/3  20MC | Is able to collaborate effectively with the wider healthcare team and agencies as required and be aware of those best placed to provide aspects of maternity care and is competent to refer women who would benefit from more specialist services such as a local substance misuse support unit. |  |  |
| M)  13MC | Demonstrates full compliance with professional records, the confidentiality and security of written or verbal information and the storage of records in accordance with local policies and relevant legislation. |  |  |

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| **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. |
| 5) Postnatal care 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** (9MC) Domain: Effective midwifery practice  **Work in partnership with women and other care providers during the postnatal period to provide seamless care and interventions which:**   * Are appropriate to the woman’s assessed needs, context and culture * Promote their continuing health and wellbeing * Are evidence based * Are consistent with the management of risk * Are undertaken by the midwife because she is the person best placed to do them and is competent to act * Draw on the skills of others to optimise health outcomes and resource use   These will include:   * Providing support and advice to women as they start to feed and care for the baby * Providing any particular support which is needed to women who have disabilities * Post-operative care for women who have had caesarean and operative births providing pain relief to women * Team working in the best interests of women and their babies * Facilitating discussion about future reproductive choices * Providing care for women who have suffered pregnancy loss, stillbirth or neonatal death |
| **Essential skills cluster** (ESC)  4) Initiation and continuance of breastfeeding   * Understand and share information that is clear, accurate and meaningful at a level which women, their partners and family can understand (no: 4/1) BFI relates to Baby Friendly Education Standards Learning Outcomes * Respect social cultural factors that may influence the decision to breastfeed (no: 4/2) * Effectively support women to breastfeed (no: 4/3) |
| **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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| **5** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  9MC | Actively participates in the assessment and monitoring of women in a range of settings during the postnatal period to promote health and wellbeing. |  |  |
| B)  9MC  ESC 4/2 | Is able to identify ethical, cultural and social choices when developing the programme of postnatal care for women and their families and is sensitive to the issues of diversity when sharing information with women and respect their rights in relation to infant feeding. |  |  |
| C)  9MC | Actively participates in the provision of post-operative care. |  |  |
| D)  9MC | Actively participates in discussion with women regarding contraceptive choices. |  |  |
| E)  9MC  ESC  4/3 | Actively participates and is attentive in providing care, information and support to women as they start to feed and care for their baby including giving advice over the telephone, listening and responding to verbal and non-verbal cues. |  |  |
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| **5** | **Performance and skills outcomes**  **(continued)** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| F)  ESC  4/1 | Participates in communicating sensitively the importance of breastfeeding, in terms of health outcomes (BFI) and contributes to/leads a variety of forums where information is shared about the advantages/limitations of different feeding methods, without regarding breastfeeding and artificial feeding as ‘equal’ choices. |  |  |
| G)  ESC  4/1 | Is able to critically appraise and understand the nature of research evidence and the strength of breastfeeding promotion and support interventions. |  |  |
| H)  ESC  4/2 | Can recognise own thoughts and feelings about infant feeding in order to facilitate information sharing that is ethical and non-judgemental, and explores strategies and attitudes to support breastfeeding initiatives. |  |  |
| I)  ESC  4/3 | Applies in-depth knowledge of the physiology of lactation to practical situations (BFI). |  |  |
| J)  ESC  4/3 | Is confident at exploring with women the potential impact of birth room practices, such as the effect of different pain relief methods, rooming-in, baby holding and the importance of skin-to-skin contact, on the wellbeing of their baby and themselves and on the establishment of breastfeeding (BFI). |  |  |
| K)  ESC  4/1  4/3 | Actively participates in explaining and advising women of the importance of baby-led feeding in relation to the establishment and maintenance of breastfeeding, exclusive breastfeeding and consequences of offering artificial milk to breastfed babies, bed-sharing and the use of dummies (BFI). |  |  |
| L)  ESC  4/3 | Is able to assist in teaching and empowering women to effectively position and attach their baby for breastfeeding. Can recognise effective positioning, attachment, suckling and milk transfer and evaluate the effectiveness of breastfeeding practices to support women to be successful for the first six months of life (BFI) |  |  |
| M)  ESC  4/3 | Identifies common complications of breastfeeding, how these arise and demonstrate how women may be helped to avoid them (BFI). |  |  |
| N)  ESC  4/3 | Actively participates in teaching women how to hand express their breast milk and how to store, freeze and warm it with consideration to aspects of infection control (BFI). |  |  |

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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. |

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| 6) Public health 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 (**15MC) Domain: Effective midwifery practice  **Contribute to enhancing the health and social wellbeing of individuals and their communities.**  This will include:   * Planning and offering midwifery care within the context of public health policies * Contributing midwifery expertise and information to local health strategies * Identifying and targeting care for groups with particular health and maternity needs and maintaining communication with appropriate agencies * Involving users and local communities in service development and improvement * Informing practice with best evidence shown to prevent and reduce maternal and perinatal morbidity and mortality * Utilising a range of effective, appropriate and sensitive programmes to improve sexual and reproductive health. |

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| **6** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  15MC | Recognises the provision of evidence based midwifery care within the context of international, national and local public health policies and strategies. |  |  |
| B)  15MC | Is able to recognise groups with particular health and maternity needs that may pose challenges to their health. |  |  |
| C)  15MC | Discusses and evaluates effective public health programmes to improve sexual and reproductive health. | . |  |
| D)    15MC | Identifies users and local communities in service development and improvement of health. |  |  |

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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. |
| 7) Confidentiality 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** (19MC) Domain: Professional and Ethical Practice  **Maintain confidentiality of information.**  This will include:   * Ensuring the confidentiality and security of written and verbal information acquired in a professional capacity * Disclosing information about individuals and organisations only to those who have a right and need to know it once proof of identify and the right to disclosure has been obtained. |
| **Essential skills cluster** (ESC) 1) Communication: Protect and treat as confidential all information relating to themselves and their care (no: 1/2). |
| **Conduct, performance and ethics** (CPE) 3) Respect people’s confidentiality |

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| **7** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  19MC  CPE3 | Actively participates in the confidentiality and security of written and verbal information acquired in a professional capacity. Respects confidentiality |  |  |
| B)  19MC  ESC  1/2 | Actively participates and acts professionally in protecting and treating information as confidential except where sharing of information is required for the purposes of safeguarding and/or public protection e.g. child protection, protection from harm. |  |  |
| C)  19MC  ESC  1/2 | Recognises and evaluates the implications of a breach of confidentiality and the significance of information and who does/does not need to know. Distinguishes between that is relevant to care planning and that which is not relevant. |  |  |
| D)  19MC | Is able to identify NMC guidelines for records and record keeping (NMC 2009) |  |  |
| E)  ESC  1/2 | Actively participates in the principles of data protection and applies the principles of confidentiality. Acts appropriately in sharing information to enable and enhance care and works within the legal framework and acts within the law when disclosing information without consent. |  |  |

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| **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) Health and safety 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** (22MC) Domain: Professional and Ethical Practice  **Support the creation and maintenance of environments that promote the health, safety and wellbeing of women, babies and others**  This will include: preventing and controlling infection & promoting health, safety and security in the environment in which the practitioner is working, whether it be at a woman’s home, in the community, a clinic, or hospital. |

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| **8** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| A)  22MC | Actively participates in the creation and maintenance of environments that promote the health, safety and wellbeing of women, babies and others. |  |  |
| B)  22MC | Identifies policies and guidelines that ensure the safety, wellbeing and promotion of health. |  |  |
| C)  22MC | Actively participates in the prevention and control of infection including the safe disposal of domestic/clinical waste and storage of equipment. |  |  |
| D)  22MC | Demonstrates safe moving and handling procedures. |  |  |

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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) Record Keeping**  **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** (13MC) Domain: Effective midwifery practice  **Complete, store and retain records of practice which:**   * Are accurate, legible and continuous * Detail the reasoning behind any actions taken * Contain the information necessary for the record’s purpose.   Records will include:   * Biographical details of women and babies * Assessments made, outcomes of assessments and the action taken as a result * The outcomes of the discussions with women and the advice offered * Any drugs administered * Action plans and commentary on their evaluation | | | |
| **Essential skills cluster (ESC)**  **2) Initial consultation between the woman and the midwife:**   * **Be confident in sharing information about common antenatal screening ( 2/1)** * **Accurately complete an initial consultation ensuring women are at the centre of care ( 2/2)** * **Work collaboratively with other practitioners and external agencies ( 2/3)** | | | |
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| **9** | **Performance and skills outcomes** | **Not Achieved (NA)**  **Achieved (A)** | **Sign-off mentor**  **Signature**  **& date** |
| H)  13MC | Demonstrates full compliance with professional records, confidentiality and security of verbal and written information and the storage of records in accordance with local polices and relevant legislation |  |  |
| I)  13MC  ESC  3/10 | Participates with minimal supervision in the recording of information that is accurate, legible and continuous which includes planning, implementation and evaluation of care, interventions and findings |  |  |
| **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. | | | |

## 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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| **I can confirm that the student has achieved competence in all midwifery competencies (MCs) and essential skills clusters (ESCs) enclosed in this document.** |
| **Comments:**  **Mentor Signature: Date:**  **Print name:** |

**Reference List**