## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Explanation of the document</td>
<td>3</td>
</tr>
<tr>
<td>2.0</td>
<td>Assessment of theory</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- 2.1 Formative assessment schedule for the programme</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>- 2.2 Summative assessment schedule for the programme</td>
<td>8</td>
</tr>
<tr>
<td>2.3</td>
<td>Assessment of theory guidelines for Modules 1-6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Module 1</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>- Module 2</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>- Module 3</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>- Module 4</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>- Module 5</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td>- Module 6</td>
<td>26</td>
</tr>
<tr>
<td>3.0</td>
<td>Assessment of practice</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- 3.1 The flowchart for the assessment of practice and Levels of practice assessment diagram</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td>- 3.2 Your support in practice assessment</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>- 3.3 Details of the process of assessment (formative and summative)</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>- 3.4 Components of the practice assessment</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>- 3.5 Practice learning outcomes</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>- 3.6 The Interpersonal Attributes</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>- 3.7 Portfolio requirements for the award of a pass</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>- 3.8 Reflective component for practice</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>- 3.9 Medicines Compulsory Summative Assessment</td>
<td>45</td>
</tr>
<tr>
<td></td>
<td>- 3.10 Attendance</td>
<td>45</td>
</tr>
<tr>
<td>4.0</td>
<td>The Competency Sign-Off Document required for Module 6, Becoming a Competent Practitioner</td>
<td>46</td>
</tr>
<tr>
<td>5.0</td>
<td>Midwifery Link Lecturers</td>
<td>47</td>
</tr>
</tbody>
</table>

- Appendix 1: School of Nursing Sciences marking criteria for coursework 48
- Appendix 2: NMC Standards for Pre-registration Midwifery education 56
- Appendix 3: Grading of practice outcomes 69
- Appendix 4: Medicines Compulsory Summative Assessment 72
1.0 Explanation of the document

How to use this document

Within this document you will find all the guidance specific to your summative practice and theory assessments. This is the assessment which you are required to pass in order to receive the academic credit and professional award for your programme upon its successful completion. Formative assessments help you develop your preparation for summative assessment and enable you to evaluate your progress towards these requirements. Further details on formative assessment can be found in your Programme Handbook in Section 6.

The document is also available for your Mentors to access. It is displayed on the Mentor placement website www.uea.ac.uk/nam/mpe under the midwifery-specific section.

The theory assessment guidelines contain the essential requirements you need to address in your summative assessment. There are summative assessments of theory and practice for each module of your programme. Sections 4 and 6 in your Programme Handbook contain further details on summative assessment of theory and practice plus more detailed guidance about being in practice and how to manage the learning and assessment requirements.

It is important that you consider and use this document along with the following handbooks;

- Programme Handbook – this contains all the essential guidance you need in order to understand the requirements and nature of your student journey. It contains information which is essential to help you manage placement and programme requirements as well as important information to ensure you get the most from your experience as a student midwife; helping you maximise all learning opportunities to enable you to provide the highest standard of care to women and their families. This handbook also contains all the guidance which is essential and helpful to all students in the School of Nursing Sciences undertaking programmes leading to a nursing, midwifery or operating department professional qualification and academic award.
- University Student Handbook- this handbook is for all students studying on undergraduate and postgraduate taught programmes. It aims to give new and continuing students a central reference point for University-wide regulations, processes and guidance to help and support you through your studies.

Theory assessments for Modules 1-6 are set out in Section 2 of this document. They are marked according to the School of Nursing Sciences marking criteria for coursework, which is included in Appendix 1.

You will be provided with a programme assessment schedule during the start of each year of your programme. This will indicate when the summative assessments must be handed in.
Your programme provides you with formative assessments to assist your preparation and understanding of assessment and to help you evaluate your progress on an individual basis in relation to the summative assessments. They prepare you in relevant assessment activities which are later used to formally assess your progress.

The summative assessments are requirements of the programme which you must pass to successfully complete a module and ultimately your programme and achieve the relevant academic credit as indicated in the overview of assessments shown in Table 2. Please refer to your Programme Handbook to understand more about the nature of formative and summative assessments.

Practice assessments - you will receive your assessment of practice document at the outset of each academic year. This will contain the relevant components for each of the two modules in the year. The assessment of practice document for each module will contain the practice learning outcomes you are required to achieve during the module placements and the interview sheets to formally document your progress at all your practice assessment interviews.
2.0 Assessment of theory
### 2.1 Table 1 Formative assessment schedule for the programme

<table>
<thead>
<tr>
<th>Module</th>
<th>Formative Assessment</th>
<th>Summative Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Year 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foundations for Practice</td>
<td>Group presentation on the midwifery role in AN screening for maternal and fetal health.</td>
<td>2.5 hr unseen written examination</td>
</tr>
<tr>
<td></td>
<td>Self assessment and mock exam questions on line. Results discussed with Personal Adviser.</td>
<td>Section 1 Practice</td>
</tr>
<tr>
<td></td>
<td>Critical reflection of placement learning within Module timetable.</td>
<td>Section 2 Safe Medicate</td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement, supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
<td></td>
</tr>
<tr>
<td><strong>Year 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Promoting Healthy Lifestyles</td>
<td>Student-led public health seminars: focus on your chosen assignment areas.</td>
<td>2000 word assignment</td>
</tr>
<tr>
<td></td>
<td>Critical reflection of placement learning within Module timetable.</td>
<td>Group presentation</td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement, supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
<td></td>
</tr>
<tr>
<td><strong>Year 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health and Social Complexities</td>
<td>Group presentations of cases: the determinants of health and outcomes for mother and baby.</td>
<td>4000 word assignment</td>
</tr>
<tr>
<td></td>
<td>Critical reflection of placement learning within Module timetable.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement, supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
<td></td>
</tr>
<tr>
<td><strong>Year 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complex Childbearing</td>
<td>Session for Critical reflection from placement learning within the module timetable.</td>
<td>2.5 hr seen examination</td>
</tr>
<tr>
<td></td>
<td>Small group work related to model answers for practice related questions as per seen style questions for the examination.</td>
<td>Section 1 Practice</td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement, supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
<td>Section 2 Safe Medicate</td>
</tr>
<tr>
<td>Year 3</td>
<td>Leadership Innovation and Care Quality</td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>---------------------------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mock midwifery interviews for preparation for midwifery posts (including completion of an application form) – with specific reference to service effectiveness, innovation and quality.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Scenario based management of clinical events with ‘supervisory review’ of report produced by ‘case-managing’ team of students.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Critical reflection of placement learning within Module timetable.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6000 word Project Report</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 3</th>
<th>Becoming a Competent Practitioner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Professional Debate Series - the changing role of midwifery practice – a series of debates managed across the module, for example; maintaining and developing normality in midwifery practice, measuring the quality of midwifery care and services /provision within the health service, the social role of the midwife, health policy relevant at the time</td>
</tr>
<tr>
<td></td>
<td>Critical reflection of placement learning within Module timetable</td>
</tr>
<tr>
<td></td>
<td>Formative interviews in placement supported with frequent review meetings and students reflective portfolio work, as tripartite model.</td>
</tr>
<tr>
<td></td>
<td>3000 words Oral examination</td>
</tr>
</tbody>
</table>
### 2.2 Table 2 Summative assessment schedule for the programme

<table>
<thead>
<tr>
<th>Module</th>
<th>Assessment task</th>
<th>Allocation of academic credit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Module 1</strong></td>
<td><strong>Foundations for Practice</strong></td>
<td></td>
</tr>
<tr>
<td><strong>60 level 1 academic credit</strong></td>
<td>2.5 hrs unseen written examination Section 1 Practice - Core knowledge and its application to the practice of normality. To include clinical calculations for normal midwifery Section 2 - Safe Medicate (this part sat separately due to need for exam condition IT facilities) (EX) Practice learning outcomes Assessment of Interpersonal Attributes Pass in portfolio requirements (list in production) (PA)</td>
<td></td>
</tr>
<tr>
<td><strong>Module 2</strong></td>
<td><strong>Promoting Healthy Lifestyles</strong></td>
<td></td>
</tr>
<tr>
<td><strong>60 level 1 academic credit</strong></td>
<td>2000 word assignment – Using one continuity case explore the midwife’s public health interventions and their effectiveness (CW) Group presentation: Using a health promotion model propose a strategy for an intervention. (This will be from a given list provided by the Module Organiser) (PR) Practice learning outcomes. Assessment of Interpersonal Attributes Pass in portfolio requirements (list in production) (PA)</td>
<td></td>
</tr>
<tr>
<td><strong>Module 3</strong></td>
<td><strong>Health and Social Complexities</strong></td>
<td></td>
</tr>
<tr>
<td><strong>60 level 2 academic credit</strong></td>
<td>4000 word assignment – Critically examine the care and management of a woman with complex health and social needs. (CW) Practice learning outcomes for placement. Assessment of Interpersonal Attributes Pass in portfolio requirements (list in production) (PA)</td>
<td></td>
</tr>
</tbody>
</table>
| Module 4                                           | 2.5 hr Seen Examination  
Section 1 Practice - 2 long questions linked to the midwives role with a complicated childbirth case. – 2 hrs  
Section 2 Safe Medicate 30 minutes (EX)  
Practice learning outcomes for placement.  
Assessment of Interpersonal Attributes  
Pass in portfolio requirements (list in production) (PA) | ½ |
|--------------------------------------------------|---------------------------------------------------------------------------------|--|
| Module 5                                          | 6000 word Project Report - linked to innovation for quality care in an area of midwifery practice (CW)  
Practice learning for placement  
Assessment of Interpersonal Skills  
Pass in portfolio requirements (list in production) (PA) | ½ |
| Module 6                                          | 3000 words - linked to promoting, assessing and planning in partnership with parents for home/or Midwifery-Led Birth Unit birth. (CW)  
Oral examination (5+20mins) (EX)  
Practice learning for placement  
Assessment of Interpersonal Skills  
Pass in portfolio requirements (list in production) (PA) | ¼ |

All elements of the module assessment must be passed to gain credit.
2.3 Assessment of theory guidelines for modules 1-6
Module 1 Foundations for Practice
Module Assessment 2.5 hour unseen written examination

Preparation of students for summative assessment:

This module develops the students' knowledge and skills to care for women during labour, birth and immediate care for the woman and her baby. The unseen written examination will comprise 2 sections:

Section 1 Practice - Core knowledge and its application to the practice of normality in midwifery practice. To also include clinical calculations for normal midwifery

Section 2 - Safe Medicate (this part will be conducted separately due to the need for exam condition IT facilities)

The examination will take place according to the cohort assessment schedule.

The examination will be worth 30 credits at level 1.

Section 1 - will require the student to answer three compulsory short questions. The questions will examine students emerging understanding of how the midwife uses knowledge of anatomy, physiology and psychology to underpin her practice during 'normal' antenatal, intranatal and postnatal period. Time allocated 90 minutes.

To pass, the student must achieve a minimum of 40% in Section one.

Section 2 - will require the student to respond to questions requiring numerical calculations. Time allocated 60 minutes.

To pass, the student must achieve a minimum of 80% in Section two.

To achieve an overall pass the student must be successful in both sections of the paper. If the student fails, they are only required to repeat the failed section.

Each question will have a designated answer guide and is required to demonstrate the learning outcomes detailed in the marking criteria below:
A good answer will;

For Section one:

1. Describe the psychological and social influences that may impact on the care and management of women during antenatal, labour/birth and during the immediate period following birth (as appropriate to the question).

2. Demonstrate sound knowledge of applied anatomy and physiology to midwifery practice in, as appropriate to the question:
   - Normal Antenatal Care
   - Normal Intranatal Care
   - Normal Postnatal Care
   - Adaptation to extrauterine life.

3. Apply and demonstrate mathematical calculations to scenarios relating to midwifery practice.

For Section two:

4. Demonstrate numerical skills required for safe midwifery practice.

Module learning outcomes assessed by this examination:

A. Expectations of the midwife as a professional
   1. Understand the importance of the statutory framework underpinning midwifery practice.
   2. Begin to show an understanding of the legislation related to medicines management.

B. The application of practice in midwifery
   1. Begin to understand how personal, cultural and religious beliefs, behaviour and attitude can impact on the midwife - woman relationship and multidisciplinary relationships.
   2. Show an understanding, based on evidence, of the importance of partnership approaches to midwifery care.

C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives
   1. Apply knowledge of homeostatic principles and anatomy and physiology to the childbearing process.
   2. Discuss the adaptation to extrauterine life and the normal physiological development of the neonate in the first month of life.
   3. Appreciate the needs of the neonate and show a developing understanding of how these needs can be met.
   4. Using knowledge of anatomy and physiological changes in pregnancy show appreciation of the advice and care a midwife can offer women and their families.
   5. Discuss the fundamental care, comfort, and nutritional needs of women.
6. Apply knowledge of monitoring fetal, maternal and neonatal wellbeing in low risk women during antenatal, labour and postnatal care.
7. Examine the psychological response to the childbearing process and transition to parenthood.

Initial guidance for this exam will be provided by the Module Organiser.
Module 2 Promoting Healthy Lifestyles
Module Assessment 2000 word written assignment

Assignment title
Using one continuity case, explore the midwife’s public health interventions and their effectiveness.

This assignment is worth 15 credits at level 1.

You must choose one of your continuity cases and focus on the health improvement element of the woman’s care. Using this as a vehicle to develop your knowledge of the midwife’s public health role you will illustrate strategies a midwife might adopt to achieve optimum impact on health.

A good answer will;

1. Show understanding of the public health role of the midwife and how effective inter-professional working can maximise health improvement interventions.

2. Identify relevant current health improvement strategies and their relevance to your chosen continuity case.

3. Explore behavioural change/motivational theories that may have affected success of the health improvement intervention.

4. Recognise your resulting learning and how this will impact on your future practice.

5. Show ability to select, consider and underpin your work with appropriate evidence.

Module learning outcomes assessed by this assessment:

A. Expectations of the midwife as a professional
1. Understand the midwife’s role within the public health framework.
2. Recognise the potential and value of working with other professions to introduce health promotion initiatives.
B. The application of practice in midwifery
1. Explore current health improvement strategies and their impact on the health of communities and populations.

C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives
1. Explore the evidence base surrounding strategies for improving health.
2. Develop an understanding of the impact motivational and behavioural change theories have on health improvement programmes.
3. Begin to develop skills in searching for and reading published research with understanding of research design.

Academic advice for this assignment should be sought from your Personal Adviser.

You should refer to Appendix 1 of this book and your Programme Handbook regarding the School marking criteria, and your cohort assessment schedule and the University Student Handbook regarding submission of assignments.
Module 2 Promoting Healthy Lifestyles
Module Assessment Group seminar presentation

Assignment title
Using a health promotion model propose a strategy for an intervention from a given list.

This assignment is worth 15 credits at level 1.

You will work in groups of 6-8 collectively selecting a health promotion model to apply to an intervention from a given list in order to propose a successful strategy. Each student must take part in the presentation and show evidence of their contribution to the preparation. Presentations must be informative and aim to stimulate discussion but must not use role play.

A good presentation will;

1. Explain the rationale for the choice of health promotion model and how the model has been applied to your intervention.

2. Illustrate the impact effective inter-professional working and communication will have on the success of your intervention.

3. Show how current health promotion strategies can be applied to your interventions/health promotion model.

4. Provide relevant and contemporary evidence underpinning your proposed strategy.

Presentations must not exceed 30 minutes, including discussion time. A pass must be achieved in all the following criteria.
Group Seminar Presentation

Using a health promotion model propose a strategy for an intervention from a given list.

MARKING CRITERIA

<table>
<thead>
<tr>
<th></th>
<th>PASS</th>
<th>FAIL</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rationale for model choice &amp; application to intervention</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inter-professional working &amp; communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consideration of current health intervention strategies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of evidence underpinning proposed strategy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evidence of contribution &amp; teamwork</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Names

Date.................................................. Overall PASS/FAIL..................................................

Marker’s name........................................... Moderator’s name...........................................

Marker’s signature................................. Moderator’s signature.................................
Module learning outcomes assessed by this assessment:

A. Expectations of the midwife as a professional
1. Recognise the potential and value of working with other professions to introduce health promotion initiatives.
2. Discuss how effective communication between client groups and inter-professional agencies can influence positive health improvement.

B. The application of practice in midwifery
1. Explore current health improvement strategies and their impact on the health of communities and populations.

C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives
1. Explore the evidence base surrounding strategies for improving health.
2. Develop understanding of the application of health promotion models ensuring a holistic approach to midwifery practice.
3. Consider how health and social policy can be incorporated in health improvement strategies and the development of midwifery practice.
4. Develop an understanding of the impact motivational and behavioural change theories have on health improvement programmes.

Academic advice for this assignment will be provided on a group basis by the Module Organiser.

You should refer to Appendix 1 of this book and your Programme Handbook regarding the School marking criteria, and your cohort assessment schedule and the University Student Handbook regarding submission of assignments.
SUMMATIVE ASSESSMENT GUIDELINES

Module 3
Health and Social Complexities
Module Assessment
4000 word written assignment

Assignment title
Critically examine the care and management for a woman with complex health and social needs.

The assignment will take place according to the cohort assessment schedule.

The assignment will be worth 30 credits at level 2.

You are required to analyse the care and management of a woman who has complex social and health needs. With application to module content, choose a woman whose pregnancy is complicated with complex social and health factors.

This is not a case study, so a specific woman does not have to be identified.

A good answer will;

1. Demonstrate a comprehensive knowledge of complex social and health care needs.
2. Demonstrate how complex social and health factors may have an adverse effect on maternal, fetal and neonatal outcomes.
3. Analyse the necessary care and management, including partnership working between the midwife and other members of the multi-disciplinary and multi-agency team.
4. Evaluation of the evidence base which underpins care management and care delivery and the influence this evidence will have on your future practice.

Depending on the subject chosen the following module learning outcomes MAY be assessed by this assessment:

A. Expectations of the midwife as a professional
1. Demonstrates the ability to participate in multi-professional and multi-agency working, when caring for women with complex social and health care needs, in a range of settings.
2. Identify risk factors associated with medical conditions in childbearing and how the impact on care processes and clinical decision-making.
3. Analyse processes and screening tools for the identification and management of women at risk of perinatal mental health disorders.

B. The application of practice in midwifery
1. Demonstrate how family centred care is promoted.
2. Explore how midwives can provide support and address inequality in health care for women and families who are vulnerable or disadvantaged.
3. Critically discuss the care and management of women with complex health needs.

C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives
1. In partnership with women, undertake a systematic assessment of individual needs, plan, implement and evaluate care, across a range of situations.
2. Show an understanding of the cultural, social, psychological and educational factors which may have an influence upon pregnancy, childbirth and midwifery practice.
3. Demonstrate an understanding of the underlying patho-physiology of medical conditions and the possible impact upon pregnancy, the postnatal period and the neonate.
4. Identify psychological and social risk factors affecting health and initiate care pathways and referral to appropriate agencies/professionals.
5. Demonstrate knowledge of early pregnancy complications.
6. Evaluate how preconception care can reduce the risks to mother and baby associated with existing conditions e.g. haemoglobinopathies, diabetes, asthma, epilepsy and mental illness.

Academic advice for this assignment should be sought from your Personal Adviser.
SUMMATIVE ASSESSMENT GUIDELINES

Module 4 Complex Childbearing
Module Assessment 2.5 hour seen examination

Examination title
2.5 hour seen examination.

The examination will take place according to the cohort assessment schedule.

The examination will be worth 30 credits at level 2.

This module prepares and develops the students’ knowledge and skill to care for women in complicated, high risk areas of childbearing, this may be in the antenatal, intra-partum and postnatal periods.

The seen examination comprises two sections:

Section 1: Two seen questions linked to the midwives role in caring for women with complications of pregnancy, labour and birth.

This section will test the students’ knowledge relating to an area of complexity in relation to childbearing. The questions may be focused on antenatal, intra-partum or postnatal complications.

The questions will be given to the students four weeks before the examination is to be undertaken.

Time allocated two hours.

The student must achieve a minimum 40% pass grade in both questions in order to pass the section.

Section 2: Safe Medicate. This requires the student to respond to numerical calculations.

The student must achieve an 80% pass grade in this section.
To achieve an overall pass grade the student must be successful in both sections of the paper. If the student fails a section, they will only be required to repeat the failed section.

The questions set will have a designated answer guide and the answers will be required to demonstrate the learning outcomes detailed below:

**A good answer will:**

1. Demonstrate a comprehensive knowledge of the complication and the effect the complication may have during pregnancy/intra-partum/postnatal period on maternal and fetal well being.
2. Analyse the care and management of the complication using a wide range of sources: evidence in the literature, policies and guidelines and discuss how these sources may impact on practice.
3. Discuss and evaluate the role of the midwife in providing holistic care to the woman and her family. Reflect on the care given and apply this to practice.
4. Demonstrate numerical skills required for safe midwifery practice.

**Module learning outcomes assessed by this assessment:**

**A. Expectations of the midwife as a professional**

1. Illustrate understanding if effective multi/inter-disciplinary team working in complex childbirth.
2. Uses appropriate research evidence to facilitate valid informed choice and involve women in the decision making process.

**B. The application of practice in midwifery**

1. Demonstrate knowledge and skills appropriate in dealing with emergency situations.

**C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives**

1. Show how complex childbearing situations can be normalised through the application of the philosophy of normality.
2. Apply a detailed knowledge of physiology and pathophysiology to the care of women with a wide range of high risk conditions associated with pregnancy and labour.
3. Demonstrate the ability to recognise maternal and fetal deterioration through clinical assessment.
4. Demonstrate knowledge of immediate management and referral across a range of care situations.
5. Demonstrate application of effective communication tools.
6. Using appropriate assessment skills to identify deviations from normal fetal well being.
7. Demonstrate an understanding of a range of medicines related to the care of high risk women.
8. Examine the impact complexities in childbearing may have on the emotional well being of parents and evaluate the role of the midwife in these circumstances.

Initial guidance for this examination will be provided by the Module Organiser.
Assignment title
Using a suitable change management model, propose and develop an innovative project plan that aims to enhance quality of care in a chosen area of midwifery practice. The project should have an emphasis on supporting normality and will be presented as a 6000 word report.

This assignment will be worth 30 credits at level 3.

The Project Report will provide an opportunity for students to develop further the knowledge and skills related to quality care provision and leadership.

The topic of the Project Report will be agreed between the student and their Personal Adviser; supervision and advice will be given by the Personal Adviser.

A good answer will;

1. Critically evaluate, using a wide range of literature and resources, current care delivery/care management in the area for which the innovation is proposed.
2. Outline and develop the proposed innovation, referring to an appropriate change management model.
3. Critically examine how the proposed change could be effectively evaluated, giving consideration to measuring its impact on practice and/or women’s experience.
4. Reflect on the process undertaken and articulate how it has contributed to the development of your knowledge and contribution to midwifery practice.

Module learning outcomes assessed by this assignment:

A. Expectations of the midwife as a professional
1. Develop skills in proactive leadership that value the contribution of others including service users in practice innovation and the sharing of best practice.
2. Demonstrate critical understanding of the processes of standard setting and development of guidelines and policies in the context of providing quality midwifery care.
3. Critically analyse the midwife’s role in developing research that contributes to practice.

C. Subject knowledge, understanding and associated skills that underpin the education and training of midwives
1. Critically analyse the effectiveness of clinical audit in maternity care and participate in auditing personal practice.
2. Critically examine frameworks for clinical governance and how effective application can improve the quality of care.
3. Demonstrate understanding of how areas for innovations in midwifery practice can be identified; change initiated and evaluated using metrics and quality indicators.
4. Demonstrate knowledge of the theories of change management and how these can be applied to lead and manage innovation.
5. Critically explore how service users can be involved in decision making about the effective use of resources to ensure quality care.

Academic advice for this assignment should be sought from your Personal Adviser.
Preparation of students for both summative assessments:

This module will prepare the student to be a competent practitioner in normal midwifery care. The module also requires the student to function as an autonomous competent practitioner to respond to complications that arise in childbearing.

1. The written assessment for this module will test understanding of ‘normality’ ensuring the midwife can deliver safe and effective midwifery care to women and their families.
2. The oral examination intends to test the students’ knowledge and management where midwifery and obstetric deviations are encountered.

The 3000 word written assignment will be worth 15 credits at level 3.

The oral examination will be worth 15 credits at level 3.

The oral examination will take place according to the assessment schedule.

Written assignment
The 3000 word written assignment will require the student to review an aspect of normal midwifery care that they have planned, implemented and evaluated during their placement.

This work will test students’ ability to directly plan and deliver appropriate midwifery care and the ability to make adjustments to care when required. Evidence of applied knowledge, ability to utilise appropriate care systems and respond to women’s requests regarding their care will be explored. The student must demonstrate how they attain midwifery care at the level of a competent practitioner.

Module learning outcomes assessed by this assessment:

A: Expectations of the midwife as a professional
1. Critically reflect on experience and developments in maternity care to identify personal developmental needs alongside those of others.
2. Critically analyse the scope of midwifery practice and explore challenges to professional role boundaries.
3. Understand the professional responsibilities surrounding case management and the lead professional’s role in clinical decision making.

B: The application of practice in midwifery
1. Demonstrate competence, dexterity and sensitivity in the full range of skills and procedures as detailed by the statutory regulatory body including the NMC Essential Skills European Union requirements and Breastfeeding Initiative.

C: Subject Knowledge, understanding and associated skills that underpin the education and training of midwives
1. Critically analyse how midwives can be empowered to develop high quality women centred models of care embracing the essence of normality.
2. Draw on a range of multiagency, inter-professional resources to assess, plan, deliver and evaluate care with women and families.

Academic advice for the written assignment will be provided by the Personal Adviser.

Oral examination
Midwifery and obstetric scenarios will be developed to cover the whole childbearing phase and will include newborn care. Scenarios may include obstetric emergencies or require students to take action to ensure they provide safe and effective midwifery care.

One scenario will be selected by the assessors. The student will have five minutes to read the scenario prior to commencing the oral examination. The student can make notes during this period and refer to these during the assessment.

The student will be expected to respond appropriately to the midwifery scenario and a good answer will require the student to:

- Initiate immediate action with a rationale and justification for actions.
- Demonstrate applied anatomy and physiology.
- Demonstrate using assimilation /models appropriate, correct and safe techniques.
- Justification for actions.
- Demonstrates effective communications skills.
- Refers to team working.
- Demonstrates response at competent practitioner level.
- Understands the impact of the scenario in a wider context from a social and psychological perspective.
- Refers to professional, national and local guidelines.
- Refers to the literature for supporting evidence.
Module learning outcomes assessed by this assessment:

A: Expectations of the midwife as a professional
   1. Critically analyse the scope of midwifery practice and explore challenges to 
      professional role boundaries.
   2. Understand the professional responsibilities surrounding case management 
      and the lead professional’s role in clinical decision making.

B: The application of practice in midwifery
   1. Demonstrate competence, dexterity and sensitivity in the full range of skills 
      and procedures as detailed by the statutory regulatory body including the 
      NMC Essential Skills European Union requirements and Breastfeeding 
      Initiative.

C: Subject Knowledge, understanding and associated skills that underpin the 
   education and training of midwives
   1. Draw on a range of multiagency, inter-professional resources to assess, plan, 
      deliver and evaluate care with women and families.
   2. Demonstrate competence in managing the midwives role within care 
      pathways for women with a range of physical, mental and social needs.

Initial preparation for the oral examination will be provided by the Module Organiser.
3.0 Assessment of practice

The following pages outline:

- The flowchart for the assessment of practice and Levels of practice assessment diagram
- Your support in practice assessment
- Details of the process of assessment (formative and summative)
- Components of the practice assessment
- Practice learning outcomes
- The Interpersonal Attributes
- Portfolio requirements for the award of a pass
- Reflective component for practice
- Attendance
### 3.1 Figure 1: Flowchart for the assessment of practice

**Placement orientation:** information relevant to the placement area e.g. fire alarms/extinguishers, emergency numbers, health and safety, medical device alerts, coffee facilities etc. **This must be completed on the first shift.** Welcome Pack and learning opportunities provided to the student.

**Formative planning discussion between student and mentor in first week of module placement to:**

- Identify and discuss the learning outcomes to be achieved in the module and how reflective study time will be accommodated and reviewed.
- Explore the available learning opportunities in relation to learning and assessment requirements and formulate an action plan to meet the learning outcomes.
- Set a date for the formative review discussion and summative interview (student to discuss date options with Link Lecturer).

**Formative review discussion (mid way through the placement) between student, mentor and Link Lecturer:**

- Review learning outcomes and documented evidence to date to inform discussion of grading.
- Discuss students self evaluation of progress and learning priorities and mentor’s evaluation.
- Establish learning priorities for the remainder of the placement.
- Formally record the outcome of the evaluation of progress against the learning outcomes, and other identified planned activities including the Interpersonal Attributes assessment.
- Record the discussion with a clear revised learning plan for the rest of the placement.

**Summative interview between student and mentor (and Link Lecturer if required):**

- Determine evidence of learning and achievement (confirm if learning outcomes are passed or failed, establish any areas outstanding).
- Establish any outstanding areas/activities regarding placement learning.
- Record the discussion on the summative interview page.
- Complete the grading of practice.
Figure 2: Levels of practice assessment

<table>
<thead>
<tr>
<th>Observer → Participant observer → Supervised participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modules 1 and 2 - In Year 1 the learning outcomes are constructed to reflect the students’ assessment at level of supervised participant at the end of the module. This recognises the initial progression from observer to participant observer in the earlier part of the module.</td>
</tr>
<tr>
<td><strong>Participant observer</strong> level is defined as: the student being closely guided by the mentor who will ensure the student is able to firstly observe care delivery before beginning to participate.</td>
</tr>
<tr>
<td><strong>Supervised participant</strong> level is defined as: the student being able to actively participate in the delivery of normal midwifery care under direct supervision with evidence of their knowledge being relevantly applied.</td>
</tr>
<tr>
<td><em>May revert to earlier role behaviour in new situations.</em></td>
</tr>
<tr>
<td><strong>Levels of performance in skill development</strong></td>
</tr>
<tr>
<td>The student has received instruction underpinning the skill, observed the procedure in the practice setting and has participated in the skill under direct supervision.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervised participant → Supervised practitioner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modules 3 and 4 - In Year 2 the learning outcomes are constructed to reflect the level of supervised practitioner. This recognises that students will be building upon midwifery skills and knowledge acquired in Year 1 while accommodating new skills and knowledge in the provision of more complex aspects of midwifery care.</td>
</tr>
<tr>
<td><strong>Supervised practitioner</strong> level is defined as: the student is able to demonstrate active participation in complex care and able to begin to initiate appropriate midwifery care following clinical assessment.</td>
</tr>
<tr>
<td><em>May revert to earlier role behaviour in new situations.</em></td>
</tr>
<tr>
<td><strong>Levels of performance in skill development</strong></td>
</tr>
<tr>
<td>The student has performed the skill on a number of occasions and requires minimal supervision.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervised practitioner → Competent practitioner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modules 5 and 6 - In Year 3 the learning outcomes are constructed to reflect the level of competent practice. This recognises that students will be developing and consolidating practice of holistic midwifery care during pregnancy, labour and the early postnatal weeks, providing the full range of skills and knowledge for normal midwifery practice in order to meet the needs of women and their families. They will also be able to provide care for childbearing women with more complex and health and social needs within a multidisciplinary team. Over the course of this year students will attain proficiency in the full range of NMC (2009) pre-registration education standards, becoming competent practitioners capable of developing an autonomous role.</td>
</tr>
<tr>
<td><strong>Competent practice</strong> level is defined as: the student is able to actively undertake and initiate appropriate midwifery care and support others in the delivery of care while being able to clearly demonstrate that there is consistent evidence to practice safely and effectively without the need for direct supervision (NMC 2009).</td>
</tr>
<tr>
<td><em>May revert to earlier role behaviour in new situations.</em></td>
</tr>
<tr>
<td><strong>Levels of performance in skill development</strong></td>
</tr>
<tr>
<td>The student can perform the skill safely and competently giving the rationale for actions and can identify and manage the impact of this.</td>
</tr>
</tbody>
</table>

Levels of performance in skill development adapted from Hilton (2004).
3.2 Your support in practice assessment - the tripartite relationship

The tripartite relationship relates to a supportive process in which yourself, your Mentor and the Link Lecturer for your area all contribute towards supporting you in your placement so you are able to access the appropriate learning opportunities to meet your assessment requirements for the module. As such, the Link Lecturer will normally be present at the formative placement review interview which will occur midway across the placement.

The midway formative review builds upon the earlier formative interview held at the start of the placement in which your learning plan is established and you are formally introduced to the learning opportunities the placement can offer for a given stage of your programme.

The purpose of this review is to establish the nature of your experience and the progress you have made towards the practice learning outcomes, the nature of your growing professional role as evidenced by the Interpersonal Attributes and your self evaluation of your learning and achievements to date.

In situations where it may not be possible to meet, the discussion between you, your Mentor and Link Lecturer will take a different approach. For example, discussion via telephone, email or a visit to the student and Mentor at a different time. However, the Link Lecturer will visit you during the placement and will record the discussion you have in your practice documentation.

The Link Lecturer involvement at the intermediate stage is essential in establishing your progression. It provides a valuable opportunity for the Mentor, student and lecturer to explore the remaining learning needs and relevant opportunities to formulate an appropriate learning plan for the remainder of the placement. Where your progression is compromised the Link Lecturer will continue to be involved in your progress meetings and will aim to attend subsequent and/or summative interviews.

This tripartite relationship, illustrated on the next page, serves to strengthen the reliability within the assessment process and is a well established model of support with midwifery Pre-registration programmes in the School for placement learning (Fraser et al 2011).

Your Mentor is prepared via a formal nationally recognised programme which meets Nursing and Midwifery Council (NMC) Standards to Support Learning and Assessment in Practice (2008). They attend annual updates and meet requirements to fulfill the Mentorship role via a review every three years as part of the Trust appraisal process. Both these activities are also required in order to meet NMC standards for Mentorship.
A successful tripartite relationship requires effective partnership between academic and Trust colleagues, relying especially on the following:

- effective communication between Link Lecturer, Mentor and student to ensure satisfactory progress towards practice learning outcomes;
- Mentors being proactive in initiating contact with Link Lecturers where there is any cause for concern;
- the Link Lecturer taking appropriate action where there is any cause for concern, playing an active role to implement a learning/action plan.
3.3 Details of the process of assessment (formative and summative)

All six modules contain a placement component which requires summative practice assessment for successful completion of the module and the associated academic credit. The assessment of practice learning outcomes is designed to help you move from foundation knowledge, skills and practice in normal midwifery, public health and health promotion and education relevant to the midwives role, to managing care form vulnerable women, with compromised health and complex childbearing events, in Year 2, while in the final Year 3, successfully combining all these experiences through the skills of critical thinking as these are synthesised into successful professional judgement associated with competent practice for an autonomous role in midwifery practice.

Each year of assessment will be contained within one single document, building up year on year, reflecting the principles of the Ongoing Record of Achievement enabling all practice achievement and progression evidence available to student and Mentor for placement discussions and planning. You must make this available for your Mentor as this is a requirement of the NMC.

The practice for each module attracts a grade for which academic credit at the relevant level is awarded if the practice components are successfully completed. Below are the key elements of the grading of practice used in the summative assessment. Please refer to the Assessment of Practice Documents for the complete documentation. The full assessment of practice documentation for managing the learning and assessment in placement is found in your Practice Assessment Document. Activities to support the process for grading are set out below:

- All components within a learning outcome must be completed, and all learning outcomes for the module must be successfully completed to secure a pass grade.
- The five descriptors for the Interpersonal Attributes must be of a pass standard in order to secure a pass grade.
- Your Mentor will use the practice grading grid to determine your grade for the placement which is based upon your performance at the summative interview.
- The five descriptors for the Interpersonal Attributes will also be used by the Mentor to help inform the decision for the appropriate numerical band for the grade. Hence the grade reflects an overall indication of your performance in placement.
- The placement grade is informed by the achievements and evidence from all formative and supportive placement documentation and progress in relation to the earlier formative review discussion stage.
- Your portfolio is determined as a pass/fail by your Personal Adviser.
- Your Module Organiser will moderate the cohort practice documentation in line with current School processes.
The process for managing placement learning and assessment is detailed below:

- **Placement orientation** - on your first shift the midwife supervising you, or your Mentor, will welcome and introduce you to the placement area. They will complete the formal orientation sheet enclosed with your practice documents and will ensure you have access to the ‘Placement Welcome Pack’ and the learning opportunities available, specifically those relevant to your stage of programme. This will include all relevant health and safety aspects, and details of accessing Trust policy, standards and guidance.

- **Formative planning discussion**- your Mentor will discuss your practice assessment requirements with you and explore the learning opportunities which will support these. You need to prepare for your preliminary meeting and all your formal formative interviews in order that they are used effectively to plan your learning and ensure you are able to access the relevant opportunities to help you progress. From this discussion your Mentor will establish a learning plan for the placement which takes account of the module’s practice requirements, your personal learning needs and goals, past noted strengths and areas for development. This will also include consideration of your European Union Clinical Experience Document, the requirements you need and the nature and volume of your experience at the start of the placement as it could influence the learning plan. At this point, dates are planned for the midway formative review and summative interviews. It is your responsibility to negotiate the date with the Link Lecturer once options have been provided by your Mentor, as the Link Lecturer attends the formative review interview.

- **Formative review discussion**- this is used to formally explore your progress towards the learning outcomes, the Interpersonal Attributes and consider your reflective progress in respect of practice achievement through your portfolio activities. It is important for the discussion to be open and honest with both yourself and your Mentor highlighting areas which need further development and where you are on track for achieving the outcomes. It is about establishing the nature of practice experiences to enable to you to address the learning plan which emerges to structure your remaining weeks in placement.

This experience will relate directly to the learning outcomes and any noted attributes which need improvement for the summative assessment and for the EU and NMC clinical requirements of the programme (e.g. personally managed births, supervised antenatal cases, NMC skills clusters).

You will be expected to contribute in a proactive manner to the discussion through the use of exemplars from your portfolio which reflects your development in line with the placement expectation of activity and level of practice.
It is important to note the following points regarding this formative review:

- There will normally be one midway formative review discussion per module, however where progression issues arise a further formative review is conducted with you, the Link Lecturer and your Mentor.
- Though progress may be good, a learning plan will still be generated to ensure clear focus for the remainder of the placement.
- If there are matters compromising your learning you must discuss these with your Personal Adviser, as detailed in your Programme Handbook. The Course Director/LME will be informed of the situation in order to provide further support as necessary.
- All practice related discussions and actions which fall outside of the structured formative and summative process and will be recorded on the dedicated page/s within the practice documentation. This is a component of the progress record and such must be used by all parties with comments to make on a student’s progress. This can be in addition to ‘Experience when working with others’ document.
- Should there be any change in the anticipated outcome following the formative review discussion, your Mentor will discuss this with you and involve the Link Lecturer immediately, or a deputy in their absence.

**Summative Interview between the student and Mentor (and Link Lecturer as necessary).**

The discussion at this stage is built around your achievement of the practice outcomes and your development of the Interpersonal Attributes for this module. You are expected to discuss your contribution to care in relation to the practice learning outcomes in the context of women whose care you have been involved. Your Mentor will confirm whether all elements of the module practice outcomes have been met. Where relevant the contribution of other midwives who have contributed to your learning will be considered by the Mentor in an open and transparent manner.

As before you will draw from your portfolio, to articulate your progression and highlight key areas of learning linked to your experiences in the placement and the learning opportunities you have engaged with away from the ward, their relevance and application. This serves effectively as critical self evaluation and enables you to be proactive in managing learning across the programme as you consider your strengths to note and areas for development to take forward as confirmed by your Mentor.

This summative interview occurs between the student and Mentor during the final week of placement. There is one summative attempt only due to the strength afforded to you through the formative processes to ensure effective reviews and learning plans are adapted to reflect formative discussion. Your practice will be graded using the descriptions and grades shown in Appendix 3.
3.4 Components of the practice assessment

The components within the assessment of practice comprise of three sections:

1. **Practice learning outcomes** - these are generated from the 14 practice themes of the programme. They each have knowledge and practice skills of relevance to the outcome. Practice learning outcomes are graded by the Mentor in each placement. These are supported with discussion informed from critical reflection required with each outcome along with the students’ individual portfolio components.

2. **Interpersonal Attributes** - five descriptors are identified by your Mentor which best describe your performance in placement. All these must be in the pass category. The details of these judgements are captured within documentation which records all formative and summative discussions.

3. **Portfolio** - for each module there are required elements you must address during your placement. They must be all present to be awarded a pass for this component.

Details of each are set out on the following pages:

3.5 Practice Learning Outcomes

We have designed the assessment of practice in direct response to mentor and student feedback to create a process which uses one assessment book and shows students’ progression transparently. To this end, we have established 14 practice themes for which, in each year, is a distinct learning outcome. The themes have been chosen to reflect the NMC areas for competency and the areas of practice from the NMC Essential Skills Clusters. Each theme uses an appropriately constructed practice learning outcome which reflects placement and ability across each year. For each module of a year, practice themes are allocated to the relevant module for which theory and placement experience provide suitable learning to prepare the student to meet the practice outcome which is set against that theme for that year. Each module has seven practice learning outcomes.

The practice learning outcome for a theme is designed to capture knowledge, practice and associated practice skills. This is to enable the NMC Essential Skills Clusters to be captured in relevant learning, as well as assessment for a given outcome. The essential Skills Clusters are mapped against these practice learning outcomes for each year of the programme. As such, it ensures the practice component of the programme has learning and assessment which is in line with both the NMC Midwifery Pre-registration competencies and also the NMC Essential Skills Clusters required for eligibility for professional registration as a midwife. This also brings benefits of a streamlined approach to managing progression across the placement for both the mentor and the student.
The practice learning outcomes test your clinical ability and interpersonal skills at the appropriate level in the six modules. Figure 2 on page 30 illustrates your progression in the clinical environment across the programme. The levels at which practice is assessed, detailed in Figure 2 has proven ability in assessing students' progression in the current Pre-registration midwifery programmes. However, it has been adapted to include a level of performance for skill development and practice in each year to support consistency in learning and assessment.

Formal formative points occur at the outset of a placement and midway across to discuss your practice skills, knowledge and progression and how they relate to the level of assessment in Figure 2 and the indicators of knowledge, practice skill and application used in your practice. Informal formative discussions on a more regular basis are summarised on the supplementary record sheet in your practice documentation. It is important for you to understand clearly how you are progressing and for you to know and understand where your strengths and the areas for further development in order for you to address the assessment requirements.

The assessment process draws on the feedback of all those who have worked with you i.e. midwives or other professionals. The process is a transparent but confidential one and is conducted within a supportive framework to enable you to have the opportunities to meet your learning outcomes and assessment requirements.

It is expected you will use elements from your portfolio to assist the formative and summative processes. The practice assessment documentation and practice learning outcomes for each module of the programme can be found in the Assessment of Practice Documentation.

The plan of modules and respective placements within your programme can be found in your Programme Handbook where further details about placements are also set out for you.

The practice learning outcomes and associated components of assessment for each module all contribute towards the NMC (2009) competencies which must be successfully achieved in order for you to be eligible for recommendation for registration on the Midwifery part of the NMC register. These can be found in Appendix 2.

The confirmation that you have achieved these is a formal part of your summative assessment in the last placement of the final module, Towards a Competent Practitioner. As well as assessing the placement learning outcomes and Interpersonal Attributes your Mentor will establish whether the NMC competencies for Pre-registration midwifery have been met. ‘The Competency Sign-Off Document’ (Appendix 2) is used to record this final ‘Sign-Off’ by your Mentor stating you are proficient in fulfilling the NMC (2009) requirements of the midwife which is explicit on the first page of the sheet. The document requires a signature from your named Sign-Off Mentor confirming these have been achieved.
To enable your Mentor to be confident in areas where experience is gained outside of this placement, the competencies have been mapped to the specific module where the relevant outcomes can be found. This enables the midwifery Mentor to relate to direct evidence of achievement from your previous placements, retained in your portfolio, which must be shared. Of equal value and considered by your mentor will be the ‘working with other sheets’ used to record experience valid for learning outcome achievements which occur when you are working with midwives and other professionals hence, it is important to retain all such sheets in your portfolio. Please see section 3.4 in the appendices document for details of these sheets.

All elements of the practice assessment documentation are submitted to the School Learning and Teaching Hub by the date indicated in the students’ assessment schedule, along with any other assessments, at the end of each Module.

### 3.6 Interpersonal Attributes

The Interpersonal Attributes are aimed at assessing your development in communication and team working. Therefore some elements, which are acceptable in Year 1 such as ‘lacks empathy’, will not be acceptable in Year 2 as you will be expected to develop in this area. The interpersonal attribute element is summatively assessed within the practice assessment. **An award of a Fail in any element of the Interpersonal Attributes will constitute a fail in the assessment of practice.** These details are included to clarify the process for you.

Interpersonal Attributes should be discussed between Mentor and student at the formative planning discussion. Opportunities to develop particular communication and interpersonal skills should be identified during the placement. It is important that any areas for concern over Interpersonal Attributes should be discussed in the tripartite process at the formative review discussion. Any plan for further development can then be agreed between Mentor, student and Link Lecturer. At the formative review discussion and summative interview the Mentor should choose the five statements from the Interpersonal Attributes which best describe the student’s performance during the placement.

The grade you are awarded for your assessment of practice comprises judgements made upon your knowledge, skills and ability in achieving your practice learning outcomes for each module of the programme and the manner in which you conduct yourself in terms of the interpersonal skills you display when engaging in practice. This is related to how you relate with women and their families, other professionals, and other agencies as well as your Mentor, other midwives and your fellow students in placement. Naturally, on a health-related programme such attributes are essential in professional practice.

Your performance in the way in which you conduct yourself in practice and placement areas generally, as well as the way you engage with others, will also be captured by the grading process.
This is a component of your assessment of practice documentation for each module. The list of descriptors used enable Mentors to apply judgements concerning your interpersonal skills to the assessment of your practice. These can be found after the last learning outcome of the module’s assessment. There are a small number of judgement statements which show a fail and the rest which show a pass. You must achieve a pass in all statements which are deemed to best reflect your attributes to be considered for the grading of the summative assessment.

In order to do this your Mentor in each placement will select five of the most appropriate descriptors from the list which best describe the manner of your Interpersonal Attributes at the summative assessment. This will have been explored with you on a frequent and regular basis across the placement as part of your formal and informal formative discussions on your progress in practice. The comments relating to your practice of the Interpersonal Attributes will also be recorded in a constructive manner on your formative and summative interview record pages along with the comments regarding your practice learning outcomes for the module. This includes your own evaluation too. All five statements must be of the pass category. The placement is passed only if the Interpersonal Attributes and the Practice Learning Outcomes are all achieved for the module practice assessment.

3.7 Portfolio requirements for the award of a Pass

The following are required elements to secure a pass for your portfolio for each module’s assessment of practice. Please refer to the relevant sections of guidance for completing these elements which are found elsewhere in this document.

Module 1 - Foundation for Practice
- Evidence of completion of the online learning workshops for the UK National Screening for midwives.
- Evidence of your records/professional signatures supporting your involvement for the relevant aspects of care for the three continuity cases during your module.
- Structured reflection for Foundation for Practice.
- Record of meetings with your Personal Adviser.
- NHS Infection Control e-Learning package- evidence of completion.
- User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received.

Module 2 - Promoting Healthy Lifestyles
- Evidence of continued involvement for the relevant aspects of care for the three continuity cases during your module.
- Placement reflection for Promoting Healthy Lifestyles.
- IPL activity for Year 1.
- Record of meetings with your Personal Adviser.
- Record of annual review meeting.
- Learning plan for independent learning weeks/option of elective.
- Summary of EU Clinical learning requirements.
• User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received

Module 3 - Health and Social Complexities
• Structured reflection for Health and Social Complexities.
• Evidence of involvement in continuity cases linked to complex care. The first point of contact will be made during the antenatal placement.
• Visits across Year 2 e.g. Gynaecology Outpatients Department, Early Pregnancy Assessment Unit, gynaecology theatres.
• Record of meetings with your Personal Adviser.
• User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received

Module 4 - Complex Childbearing
• Structured reflection for Complex Childbearing.
• Evidence of continued involvement in continuity cases which link with complex care which commence later than first point of contact due to being commenced in AN/PN services placement.
• Completion of K2 Cardiotocograph Interpretation on-line learning package.
• Evidence in relation to visits which occur across the year e.g. chaplaincy, mortuary, pathology, phlebotomy, diabetic clinic.
• IPL activity for Year 2.
• Record of meetings with your Personal Adviser.
• Record of annual review meeting with your Personal Adviser.
• Learning plan for independent learning weeks/option of elective.
• Summary of EU Clinical learning requirements.
• User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received

Module 5 - Leadership, Innovation and Care Quality
• Structured reflection for Leadership, Innovation and Care Quality.
• Evidence involvement in continuity cases with normal birth in which the student plays a key role in contributing/managing with supervision.
• Journey of a clinical incident report, critical analysis of incident, processes and actions which followed.
• Self evaluation of mock interview outlining areas for preparation for midwifery post interview.
• Record of meetings with your Personal Adviser.
• User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received

Module 6 - Becoming a Competent Practitioner
• Placement reflection for Becoming a Competent Practitioner.
• Evidence continued involvement in continuity cases with normal birth in which the student plays a key role in contributing/managing with supervision.
• IPL activity for Year 3.
• Record of meetings with your Personal Adviser.
• Learning plan for independent learning weeks.
• Summary of EU Clinical learning requirements.
• User perspective feedback sheet – two per placement capturing the woman’s experience of care she and her family have received
3.8 Reflective component for practice

You will be required to complete a piece of reflective writing of 1000-1500 words for one designated practice theme for each module. The table below denotes the selected themes for each module over the three years.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Module 1</th>
<th>Module 2</th>
<th>Module 3</th>
<th>Module 4</th>
<th>Module 5</th>
<th>Module 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>√</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>F</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>G</td>
<td></td>
<td></td>
<td>√</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>K</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>O</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>√</td>
</tr>
</tbody>
</table>

Selected Practice Themes

A. Written and oral communication
F. Population health- creating healthy communities
G. Professional attributes for midwifery practice
J. Practising infection control standards within midwifery care
K. Safe medicine management in midwifery practice
N. Inter-professional/interagency practice within maternity services

Level

The level of reflection will progress each year.

In Year 1 you will be required to draw from observational activities by using a reflective model such as Gibbs Reflective Cycle (1988). Your reflective writing will focus on your personal development and will include behavioural and skills development.

Year 2 will require you to reflect and comment on developing your midwifery practice as well as personal and professional development. You should use a different reflective model other than Gibbs (1988).

In Year 3 you will focus on being the competent practitioner, whereby your reflective writing will incorporate evidence and recommendations to improve your midwifery practice and how this will impact on maternity services.
How and when

You will discuss your ideas for your reflective writing with your mentor during the placement. The development of the reflective writing will be incorporated in your portfolio and will form part of ongoing discussion between yourself and your Personal Adviser at the ‘End of Year’ interview. Your work must include supporting evidence and be referenced in order to constitute a ‘pass’.

Year 1, Module 1: Theme A Written and verbal communication

Select an episode of verbal communication you have observed in practice, for example between the midwife and childbearing woman, or between the midwife and her peers and/or other professionals.

You should use a reflective model such as Gibbs (1988) to highlight your learning using reflective thought.

Year 1, Module 2: Theme F Population health - creating healthy communities

You will select an example from practice where you have witnessed an episode of care where the promotion of healthy living is shared between the midwife and the childbearing woman, or between yourself and childbearing woman.

You should use a reflective module other than Gibbs (1988), to highlight your learning using reflective thought.

Year 2, Module 3: Theme K Safe medicine management in midwifery practice

Identify an episode of care where you have participated in the selection and administration of a medicine to a childbearing woman.

You should select a reflective model other than Gibbs (1988).

The reflective writing will focus on your personal and professional development in medicines management.

Year 2, Module 4: Theme G Professional attributes for midwifery practice

You should reflect on one event where you have received constructive feedback from your mentor which has improved your performance.

You should select a reflective model other than Gibbs (1988).

The reflective writing will focus on the your personal and professional response to constructive feedback.
Year 3, Module 5: Theme J Practising infection control standards within midwifery care

Reflect on an episode of care where you have practised infection control measures in the care setting.

You will select a reflective model of your choice and incorporate evidence to improve cross infection rates and how this impacts on maternity services.

Year 3, Module 6: Theme N Inter-professional/interagency practice within maternity services

You are required to reflect on your interpersonal skills when engaging with either women and their families, or colleagues or other health professionals.

Select a reflective model of your choice and incorporate evidence which supports effective use of your interpersonal skills that will deem you to be a competent practitioner.

3.9 Medicines Compulsory Summative Assessment – Year 3, Module 5

The NMC require midwifery students to achieve the Essential Skills Clusters for pre-registration midwifery education as detailed in the NMC (2009) Standards for pre-registration midwifery education. For entry to the register students must achieve 100% pass mark in summative health related numerical assessment which must be undertaken in the practice setting.

This assessment is placed within the module 5 assessment of practice. The process and required documentation can be found in appendix 4.

3.10 Attendance

1. You must maintain an accurate and precise record of attendance whilst on the placement. This should identify the date and reason for any non-attendance using the School form located on your cohort-specific Blackboard site.

2. The form, which is used to confirm absences in the practice assessment documentation, must be signed by both you and your Mentor and submitted to the Placement Office in the School at the end of the placement.

For further details, please refer to your Programme Handbook.
4.0 The Competency Sign-Off document required for Module 6, Becoming a Competent Practitioner

The final responsibility of the midwifery Sign-Off Mentor’s role in the last placement of the programme is to establish whether the NMC competencies for Pre-registration midwifery have been met. ‘The Competency Sign-Off document’ contains a list of the NMC competencies required to achieve the NMC Standards for entry to the NMC register as a midwife. Its purpose is the final Sign-Off, by the Sign-Off Mentor, stating you are fit for practice and fit for purpose in terms of fulfilling the requirements for registration as a midwife with the NMC, this is explicit on the first and last page in Appendix 2.

The assessment of practice strategy enables the Sign-Off Mentor to make this judgement based upon your progress and performance in the last placement alongside that of the earlier placements in Year 3. Since 2007 all midwifery Mentors have been required to be Sign-Off Mentors (NMC 2006). This is because:

- The Placement learning outcomes have been mapped into the NMC competencies across the programme.
- The placement outcomes are assessed progressively across the programme increasing your role in a given area of midwifery practice which relate to the proficiencies.
- During Year 3 you are assessed in practice at the level of competence where you demonstrate you provide safe practice consistently without the need for direct supervision.
- The placements across Year 3 embrace the full spectrum of the midwifery role and enable you to experience all elements related to the NMC competencies, demonstrating them at the level of competence practice.

The Proficiency Sign-Off document requires a signature from your Sign-Off Mentor confirming these have been achieved. To enable your Mentor to be confident in areas where experience is gained outside of this placement but within the same year the competencies are mapped to the specific module where the relevant outcomes can be found. This enables the midwifery Mentor to relate to direct evidence of achievement.

The Module Organiser will moderate the assessment of practice documents as part of the existing process for moderation and the Course Director will be notified. This will be a requirement prior to students proceeding at a final examination board.
5.0 Midwifery Link Lecturers

Current cover across each of the Trusts

**Queen Elizabeth Hospital – All areas Karen Bates/Deborah Caine**

Hospital areas:
- Central Delivery Suite
- Castleacre Ward for Antenatal and Postnatal services to include Antenatal Clinic, day Assessment Unit and Wisbech midwifery led clinic.
- Neonatal Unit

Community Midwifery Teams:
- Blue Team
- Yellow Team
- Green Team
- Red Team

**James Paget University Hospital – All areas Dianne Steele**

Hospital areas:
- Central Delivery Suite
- Ward 11 Ante/Postnatal care
- Neonatal Unit

Community Midwifery Teams:
- North Community Midwifery Team
- South Community Midwifery Team

**Norfolk & Norwich University Hospital**

Hospital areas:
- Labour Ward D Steele/A Harris
- Blakeney Ward Postnatal Services J Lindsay
- Cley Ward and Antenatal Services J Lindsay
- (ANC/Pregnancy and Wellbeing Suite)
- Neonatal Intensive care Unit N Hadlett

Community Midwifery Teams:
- Marriott N Hadlett
- Walsingham N Hadlett
- Broadland K Crozier
- Wensum K Crozier
- Castle J Randall
- Riverside J Randall
- Breckland N Young
- Waveney N Young
- Peddars J Randall
Appendix 1: School of Nursing Sciences marking criteria for coursework- based on 40% pass mark

The following criteria have been developed for the guidance of students and for use by markers. It is to be noted that these are generic criteria; where modules of study have specific marking criteria, then it is the latter which will be used as the basis for grading the work and providing feedback to students.

<table>
<thead>
<tr>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>80-100%</strong></td>
<td>An exceptional standard of work. The learning outcomes have been met to a very high standard. The work has a clear, appropriate and well-focussed aim. It is well planned, and has a logical structure. Written expression is always clear and precise. There are few, if any, problems with grammar, spelling and punctuation. There is evidence of an accurate and relevant knowledge base. Unusually effective use is made of a comprehensive range of relevant literature and other evidence. Some reflection, analysis and/or evaluation are evident using given classifications or principles. Practical applications are identified and discussed where appropriate. There is evidence of sound understanding of a range of relevant professional issues. There are no significant areas of weakness.</td>
<td>An exceptional standard of work. The learning outcomes have been met to a very high standard. The work has a clear, appropriate and well-focussed aim. It is well planned, and has a logical structure. Written expression is always clear and precise. There are few, if any, problems with grammar, spelling and punctuation. There is evidence of a detailed, accurate and relevant knowledge base. There is an unusually high level of analysis of a comprehensive range of relevant literature and other evidence. There is coherent discussion, with good use of the major theories and conceptual frameworks. The student shows ability to compare and contrast different points of view. There is reflection on, and/or application to practice. Professional issues are discussed from a variety of perspectives. There are no significant areas of weakness.</td>
</tr>
</tbody>
</table>

48
<table>
<thead>
<tr>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>70-79%</td>
<td>An excellent standard of work. The learning outcomes have been met to a very high standard. The work has a clear, appropriate and well-focused aim. It is well planned, and has a logical structure. Written expression is nearly always clear and precise. There are few, if any, problems with grammar, spelling and punctuation. There is evidence of an accurate and relevant knowledge base. Effective use is made of literature and other evidence. Some reflection, analysis and/or evaluation are evident using given classifications or principles. Practical applications are identified and discussed where appropriate. There is evidence of sound understanding of a range of relevant professional issues. There are no significant areas of weakness.</td>
<td>An excellent standard of work. The learning outcomes have been met to a very high standard. The work has a clear, appropriate and well-focused aim. It is well planned, and has a logical structure. Written expression is nearly always clear and precise. There are few, if any, problems with grammar, spelling and punctuation. There is evidence of a detailed, accurate and relevant knowledge base. There is a high level of analysis of relevant literature and other evidence. There is coherent discussion, with good use of the major theories and conceptual frameworks. The student shows ability to compare and contrast different points of view. There is reflection on, and/or application to practice. Professional issues are discussed from a variety of perspectives. There are no significant areas of weakness.</td>
</tr>
<tr>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>60-69%</td>
<td>A very good standard of work. The learning outcomes have been met to a high standard. The work has a clear and appropriate aim. It is well planned, and has a logical structure. Written expression is usually clear and precise. There may be occasional problems with grammar, spelling and punctuation. The knowledge base is generally accurate and relevant. Effective use is made of literature and other evidence. Some reflection or evaluation is evident using given classifications or principles. Practical applications are identified where appropriate. There is evidence of understanding of relevant professional issues. The work has only minor weaknesses of structure, content or expression.</td>
<td>A very good standard of work. The learning outcomes have been met to a high standard. The work has a clear and appropriate aim. It is well planned, and has a logical structure. Written expression is usually clear and precise. There may be occasional problems with grammar, spelling and punctuation. The knowledge base is generally accurate and relevant. Effective use is made of literature and other evidence. There is coherent discussion, with good use of the major theories and conceptual frameworks. The work may occasionally be over-descriptive, but maintains a generally consistent level of analysis. The student shows ability to compare and contrast different points of view. There is reflection on, and/or application to practice. Professional issues are examined from more than one perspective. The work has only minor weaknesses of structure, content or expression.</td>
</tr>
<tr>
<td><strong>Level 1</strong></td>
<td><strong>Level 2</strong></td>
<td><strong>Level 3</strong></td>
</tr>
<tr>
<td>-----------</td>
<td>------------</td>
<td>------------</td>
</tr>
<tr>
<td>50-59%</td>
<td>A good standard of work. The learning outcomes have been met to an acceptable standard. The work has an appropriate aim. The plan and structure are adequate, although there may be some redundant material. Written expression is usually clear and precise. There may be occasional problems with grammar, spelling and punctuation. There is evidence of an accurate and relevant knowledge base, although this may require greater breadth or detail in places. Literature and other evidence have been used appropriately. Some reflection or evaluation is evident using given classifications or principles. Practical applications are identified where appropriate. There is evidence of awareness of relevant professional issues. The work may have some inaccuracies, weaknesses or areas for improvement, <strong>none of which are inconsistent with safe practice</strong>.</td>
<td>A good standard of work. The learning outcomes have been met to an acceptable standard. The work has a clear and appropriate aim. The plan and structure are adequate, although there may be some redundant material. Written expression is usually clear and precise. There may be occasional problems with grammar, spelling and punctuation. There is evidence of an accurate and relevant knowledge base, although this may require greater depth or breadth in places. Literature and other evidence have been used appropriately. In the discussion there is evidence of overall argumentation, although there may be some weaknesses in the development of this. There is effective use of theoretical and conceptual frameworks. There is evidence of critical analysis, although some parts of the work may be over-descriptive. There may be limited consideration of alternative viewpoints and counter-arguments. There is reflection on, and/or application to practice. There is some discussion of relevant professional issues. The work may have some inaccuracies, weaknesses or areas for improvement, <strong>none of which are inconsistent with safe practice</strong>.</td>
</tr>
<tr>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
</tr>
<tr>
<td>--------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>45-49%</td>
<td>A satisfactory standard of work. The <em>learning outcomes</em> have been met at a baseline level. The work has an appropriate <em>aim</em>. There is a basically sound <em>structure</em>, although there may be a lack of clarity and focus. <em>Written expression</em> may sometimes lack clarity or precision. There is evidence of an adequate <em>knowledge base</em>, although there may be lack of breadth and detail, and some of the material may be anecdotal. There is appropriate use of <em>literature</em> and other evidence, although the range might be rather limited. Some practical applications are identified where appropriate. Some relevant professional issues are acknowledged. There may some inaccuracies, weaknesses or omissions, <strong>none of which are inconsistent with safe practice</strong>.</td>
<td>A satisfactory standard of work. The <em>learning outcomes</em> have been met at a baseline level. The work has an appropriate <em>aim</em>. There is a basically sound <em>structure</em>, although there may be a lack of clarity and focus. <em>Written expression</em> may sometimes lack clarity or precision. There is evidence of an adequate <em>knowledge base</em>, although there may be limited breadth and depth. There is appropriate use of <em>literature</em> and other evidence, although the range might be rather limited. Although in the <em>discussion</em> there is some evidence of analysis, parts of the work may be over-descriptive. There is <em>reflection</em> on, and/or <em>application</em> to practice. Some relevant professional issues are identified and discussed. There may some inaccuracies, weaknesses or omissions, <strong>none of which are inconsistent with safe practice</strong>.</td>
</tr>
<tr>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>40-44%</td>
<td><strong>A borderline standard of work.</strong> The <strong>learning outcomes</strong> have been met at a borderline level. Although the work has an appropriate <strong>aim</strong>, this may sometimes be lost sight of. There are elements of a sound structure. <strong>Written expression may be faulty.</strong> There is evidence of an adequate <strong>knowledge base</strong>, although some of the material may be irrelevant or anecdotal. The use of literature and other evidence is adequate, but limited. Some relevant <strong>professional issues</strong> are acknowledged. Some practical applications are identified where appropriate. There may be a number of inaccuracies, weaknesses or omissions, <strong>none of which are inconsistent with safe practice.</strong></td>
<td><strong>A borderline standard of work.</strong> The <strong>learning outcomes</strong> have been met at a borderline level. Although the work has an appropriate <strong>aim</strong>, this may sometimes be lost sight of. There are elements of a sound structure. <strong>Written expression may be faulty.</strong> There is evidence of an adequate <strong>knowledge base</strong>, although some of the material may be irrelevant or anecdotal. The use of literature and other evidence is adequate, but limited. Although in the <strong>discussion</strong> there is evidence of critical analysis, some parts of the work may be over-descriptive. There is some <strong>reflection</strong> on, and/or <strong>application</strong> to practice. A limited number of relevant <strong>professional issues</strong> are identified and discussed. There may be a number of inaccuracies, weaknesses or areas for improvement, <strong>none of which are inconsistent with safe practice.</strong></td>
</tr>
<tr>
<td><strong>Level 1</strong></td>
<td><strong>Level 2</strong></td>
<td><strong>Level 3</strong></td>
</tr>
<tr>
<td>------------</td>
<td>------------</td>
<td>------------</td>
</tr>
<tr>
<td>25-39% An unsatisfactory standard of work The learning outcomes have not been met. The work may lack a clear or relevant aim. The structure may be weak. The written expression may be faulty. The knowledge base may be superficial or inaccurate, and there may be considerable amounts of irrelevant material. Opportunities may be missed for application of knowledge to practice. The work may demonstrate a lack of awareness of relevant professional issues. There are likely to be major weaknesses or inaccuracies. The work, however, is not without merit and may be redeemable with tutorial support. Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidence.</td>
<td>An unsatisfactory standard of work The learning outcomes have not been met. The work may lack a clear or relevant aim. The structure may be weak. The written expression may be faulty. The knowledge base may be superficial or inaccurate, and there may be considerable amounts of irrelevant material. The use of literature and other evidence may be inadequate, or this may be used uncritically. Reflection on, and/or application to practice may be dealt with rather superficially. Professional issues, although identified, may be inadequately addressed. There are likely to be major weaknesses or inaccuracies. The work, however, is not without merit and may be redeemable with tutorial support. Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidence.</td>
<td>An unsatisfactory standard of work The learning outcomes have not been met. The work may lack a clear or relevant aim. The structure may be weak. The written expression may be faulty. The knowledge base may lack breadth and/or depth; it may be superficial or inaccurate, and there may be considerable amounts of irrelevant material. The use of literature and other evidence may be inadequate, or this may be used uncritically. Reflection on, and/or application to practice may be dealt with rather superficially. Professional issues, although identified, may be inadequately addressed. There are likely to be major weaknesses or inaccuracies. The work, however, is not without merit and may be redeemable with tutorial support. Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidence.</td>
</tr>
<tr>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
</tr>
<tr>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td><strong>1-24%</strong>&lt;br&gt;A very poor standard of work&lt;br&gt;The <strong>learning outcomes</strong> have not been met.&lt;br&gt;The work may lack a clear or relevant aim. The structure may be weak.&lt;br&gt;Written expression may be faulty.&lt;br&gt;The knowledge base may be superficial or inaccurate, and the work may contain much irrelevant or inaccurate material. Opportunities may be missed for <strong>application</strong> of knowledge to practice.&lt;br&gt;The work may demonstrate a lack of awareness of relevant <strong>professional issues</strong>.&lt;br&gt;Although the work may have some positive qualities, a substantial re-write will be necessary in case of any re-submission. <strong>Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidentiality.</strong></td>
<td><strong>A very poor standard of work</strong>&lt;br&gt;The <strong>learning outcomes</strong> have not been met.&lt;br&gt;The work may lack a clear or relevant aim. The structure may be weak.&lt;br&gt;Written expression may be faulty.&lt;br&gt;The knowledge base may be superficial or inaccurate, and the work may contain much irrelevant or inaccurate material. There may be inadequate analysis of literature and other evidence. <strong>Reflection</strong> on, and/or <strong>application</strong> to practice may be dealt with rather superficially. <strong>Professional issues</strong>, although identified, may be inadequately addressed. Although the work may have some positive qualities, a substantial re-write will be necessary in case of any re-submission. <strong>Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidentiality.</strong></td>
<td><strong>A very poor standard of work</strong>&lt;br&gt;The <strong>learning outcomes</strong> have not been met.&lt;br&gt;The work may lack a clear or relevant aim. The structure may be weak.&lt;br&gt;Written expression may be faulty.&lt;br&gt;The knowledge base may lack breadth and/or depth; it may be superficial or inaccurate, and the work may contain much irrelevant or inaccurate material. There may be inadequate critical analysis of literature and other evidence. <strong>Reflection</strong> on, and/or <strong>application</strong> to practice may be dealt with rather superficially. <strong>Professional issues</strong>, although identified, may be inadequately addressed. Although the work may have some positive qualities, a substantial re-write will be necessary in case of any re-submission. <strong>Although satisfactory in some other respects, the work may represent unsafe practice or contain plagiarism or a breach of confidentiality.</strong></td>
</tr>
<tr>
<td><strong>0%</strong>&lt;br&gt;The work was not submitted or was not deemed worthy of assessment.</td>
<td>The work was not submitted or was not deemed worthy of assessment.</td>
<td>The work was not submitted or was not deemed worthy of assessment.</td>
</tr>
</tbody>
</table>
Appendix 2: NMC Standards for Pre-registration Midwifery education

These standards are numbered (in our programme documents) to help you identify them in profile records and for you to relate to them specifically as required during your programme. Please share these with your Mentor so you may discuss them during placement learning.

The Module 6 Placement Mentor should Sign-Off the NMC standards and sign the final page after reviewing the progress the student has made throughout the Year 3 placements. This confirms that the student has achieved the NMC Midwifery Standards and is ready to assume the role of the midwife.

PRE-REGISTRATION MIDWIFERY STANDARDS (NMC 2009)

1. Communicate effectively with women and their families* throughout the preconception, antenatal, intrapartum and postnatal stages.
   Placement outcomes, Module 7, 8, 9
   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 this can be improved
   □ Communicating with women throughout their pregnancy, labour and the period following birth

Effective midwifery practice

* The use of the word families in this Document may refer to significant others, as identified by the women
2. Diagnose pregnancy, assess and monitor women holistically throughout the preconception, antenatal, intrapartum and postnatal stages through the use of a range of assessment methods and reach valid, reliable and comprehensive conclusions.
Placement outcomes, Modules 8, 9

The different assessment methods will include:
- History taking
- Observation
- Physical examination
- Biophysical tests
- Social, cultural and emotional assessments

3. Determine and provide programmes of care and support for women which:
Placement outcomes Modules 7, 8, 9
- 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 needs
Effective midwifery practice

4. Provide seamless care and interventions in partnership with women and other care providers during the antenatal period which:
Placement outcomes Modules 7, 8, 9
☐ 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 of risk
☐ draw on the skills of others to optimise health outcomes and resource use

These will include:
☐ acting as lead carer in normal pregnancies
☐ contributing to providing support to women when their pregnancies are in difficulty (eg those women who will need operative or assisted delivery)
☐ 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 current research findings and other evidence are incorporated into practice
☐ team working in the best interests of individual women
5. Refer women who would benefit from the skills and knowledge of other individuals:
Placement outcomes Module 8, 9
- to an individual who is likely to have the requisite skills and experience to assist
- at the earliest possible time
- supported by accurate, legible and complete information which contains the reasoning behind making the referral and describes their needs and preferences

Referrals might relate to:
- women’s choices
- health issues
- social issues
- financial issues
- psychological issues
- child protection matters
- the law

6. Care for, monitor and support women during labour and monitor the condition of the fetus and conduct spontaneous deliveries.
Placement outcomes Modules 8, 9
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
- giving appropriate care for women once they have given birth

7. Undertake appropriate emergency procedures to meet the health needs of women and babies.
Placement outcomes Modules 7, 8, 9
Emergency procedures will include:
- manually removing the placenta
- manually examining the uterus
- managing post-partum haemorrhage
- resuscitation of mother and/or baby
Effective midwifery practice

8. Examine and care for babies immediately following birth
Placement outcomes Modules 7, 8
This will include:
- confirming their vital signs and taking the appropriate actions
- full assessment and physical examination

9. Work in partnership with women and other care providers during the postnatal period to provide seamless care and interventions which:
Placement outcomes Modules 7, 8, 9
- are appropriate to the woman’s assessed needs, context and culture
- promote their continuing health and well-being
- are evidence-based
- are consistent with the management of risk
- when undertaken by the midwife, she/he is the person best placed to do them and she/he 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 babies
- providing any particular support which is needed to women who have disabilities
- post-operative care for women who have had caesarean and operative deliveries
- providing pain relief to women
- team working in the best interests of the women and their babies
- facilitating discussion about future reproductive choices
- providing care for women who have suffered pregnancy loss, stillbirth or neonatal death
10. Examine and care for babies with specific health or social needs and refer to other professionals or agencies as appropriate.
Placement outcomes Modules 7, 8
This will include those with:
- congenital disorders
- birth defects
- low birth weight
- pathological conditions (such as babies with vertical transmission of HIV, drug affected babies)

11. Care for and monitor women during the puerperium offering the necessary evidence-based advice and support on baby and self care.
Placement outcomes Modules 7, 9
This will include:
- providing advice and support on feeding babies and teaching 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 and other mental illnesses
- advice on bladder control
- advising women on recuperation
- supporting women to care for ill/pre-term babies or those with disabilities
12. Select, acquire and safely administer a range of permitted drugs consistent with legislation, applying knowledge and skills to the situation that pertains at the time. Placement outcomes Modules 7, 8, 9
*Methods of administration will include:*
- [ ] oral
- [ ] intravenous
- [ ] intramuscular
- [ ] topical
- [ ] inhalation

13. Complete, store and retain records of practice which:
Placement outcomes Modules 7, 8, 9
- [ ] are accurate and legible
- [ ] 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 actions taken as a result
- [ ] the outcomes of discussions with women and the advice offered
- [ ] any drugs administered
- [ ] action plans and commentary on their evaluation

14. Actively monitor and evaluate the effectiveness of programmes of care and modify them to improve the outcomes of women, babies and their families. Placement outcomes Modules 7, 8, 9
*This will include:*
- [ ] consideration of the effectiveness of the above and making the necessary modifications to improve outcomes for women and their families
15. **Contribute to enhancing the health and social well-being of individuals and their communities.**
Placement outcomes Modules 8, 9
*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 the 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

16. **Practice in accordance with the NMC Code of Professional Conduct, within the limitations of one’s own competence, knowledge and sphere of professional practice, consistent with the legislation relating to midwifery practice.**
Placement outcomes Modules 7, 8, 9
*This will include:*
- using professional standards of practice to self-assess performance
- consulting with the most appropriate professional colleagues when care requires expertise beyond one’s own current competence
- consulting other health care professionals when needs fall outside the scope of midwifery practice
- identifying unsafe practice and responding appropriately
<table>
<thead>
<tr>
<th>Professional and ethical practice</th>
<th>17. Practice in a way which respects and promotes individuals’ rights, interests, preferences, beliefs, and cultures.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Placement outcomes Modules 7, 8, 9 This will include:</td>
</tr>
<tr>
<td></td>
<td>□ offering culturally sensitive family planning advice</td>
</tr>
<tr>
<td></td>
<td>□ ensuring that women’s labour is consistent with their religious and cultural beliefs and preferences</td>
</tr>
<tr>
<td></td>
<td>□ acknowledging the roles and relationships in families dependent on religious and cultural beliefs, preferences and experiences</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional and ethical practice</th>
<th>18. Practice in accordance with relevant legislation.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Placement outcomes Modules 7, 8, 9 This will include:</td>
</tr>
<tr>
<td></td>
<td>□ demonstrating knowledge of legislation relating to human rights, equal opportunities, and access to patient records</td>
</tr>
<tr>
<td></td>
<td>□ demonstrating knowledge of legislation relating to health and social policy relevant to midwifery practice</td>
</tr>
<tr>
<td></td>
<td>□ demonstrating knowledge of contemporary ethical issues and their impact on midwifery practice</td>
</tr>
<tr>
<td></td>
<td>□ managing the complexities arising from ethical and legal dilemmas</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional and ethical practice</th>
<th>19. Maintain the confidentiality of information.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Placement outcomes Modules 7, 8, 9 This will include:</td>
</tr>
<tr>
<td></td>
<td>□ ensuring the confidentiality and security of written and verbal information acquired in a professional capacity</td>
</tr>
<tr>
<td></td>
<td>□ disclosing information about individuals and organisations only to those who have a right and need to know it once proof of identity and right to disclosure has been obtained</td>
</tr>
</tbody>
</table>
20. Work collaboratively with other practitioners and agencies in ways which:
Placement outcomes Modules 7, 8, 9
- 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 context in which it is placed

Practitioners and agencies will include those who work in:
- social care
- social security, benefits and housing
- advice, guidance and counselling
- child protection
- the law

21. Manage and prioritise competing demands.
Placement outcomes Modules 7, 8, 9
This will include:
- working out who is best placed and able to provide particular interventions to women, babies and their families
- alerting managers to difficulties and issues in service delivery

22. Support the creation and maintenance of environments which promote the health, safety and well-being of women, babies and others.
Placement outcomes Modules 7, 8, 9
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 a hospital
23. Contribute to the development and evaluation of guidelines and policies and make recommendations for change in the interest of women, babies and their families.
Placement outcomes Modules 7, 8, 9

Evaluating policies will include:
☐ providing feedback to managers on service policies
☐ representing own considered views and experiences into broader health and social care policies in the interests of women, babies and their families

24. Review, develop and enhance one’s own knowledge, skills and fitness to practice.
Placement outcomes Modules 8, 9

This will include:
☐ making effective use of the framework for the statutory supervision of midwives
☐ meeting continuing professional development and practice standards
☐ reflecting on one’s own practice and making the necessary changes as a result
☐ attending conferences, presentations, learning events, etc.

25. Demonstrate effective working across professional boundaries and develop professional networks.
Placement outcomes Modules 7, 8, 9

This will include:
☐ effective collaboration and communication skills sharing
☐ multiprofessional standard setting and audit
26. Apply relevant knowledge to one’s own practice in structured ways which are capable of evaluation.
Placement outcomes Modules 7, 8, 9
This will include:
- critical appraisal of knowledge and research evidence
- critical appraisal of own practice
- gaining feedback from women and their families and appropriately applying this to own practice
- disseminating critically appraised good practices

27. Inform and develop own practice and the practice of others through using best available evidence and reflecting on own practice
Placement outcomes Modules 7, 8, 9
This will include:
- keeping up to date with evidence
- applying evidence to one’s own practice
- alerting others to new evidence for them to apply to their own practice

28. Manage and develop care utilising the most appropriate information technology (IT) systems.
Placement outcomes Modules 7, 8, 9
This will include:
- recording own practice in consistent formats on IT systems for wider scale analysis
- using analysis of data from IT systems to apply own practice
- evaluating practice from data analysis

29. Contribute to the audit of practice to review and optimise the care of women, babies and their families.
Placement outcomes Modules 7, 8, 9
This will include:
- auditing own practice
- contributing to the audit of team practice
Competency Sign-Off Document

This must be completed and signed by the Sign-Off Mentor and student.

SIGN-OFF STATEMENT

I (Mentor name)……………………………………………..confirm that the student (name)……………………………………………………….has achieved all of the above NMC Competencies for entry to the register, throughout the final year of the programme

Student’s signature: ................................................. Print Name: ................................................

Sign-Off Mentors’ signature: ................................................ Print Name: ................................................

Date: .................................................................................
### Appendix 3: Grading of practice outcomes

<table>
<thead>
<tr>
<th>Skills and Knowledge</th>
<th>Supervised participant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Exceptional</strong> 80-100%</td>
<td><strong>Grade awarded</strong></td>
</tr>
<tr>
<td>Communication with other professionals and client group is consistently informative and applied relevantly to women’s health and choices.</td>
<td>Consistently uses current evidence, audit, theory and policy in professional/clinical discussions to accurately inform practice decisions.</td>
</tr>
<tr>
<td>Is consistently adaptable in the practice setting with women, families, professionals and prioritises practice activities effectively.</td>
<td>Contribution to team working is consistently reliable and effective, demonstrating sound communication and activities.</td>
</tr>
<tr>
<td>Consistently demonstrates accurate knowledge and ability in the conduct of midwifery practice which reflects women centred care.</td>
<td>Excels in the execution of practice skills, consistently conducts skills in a safe and sensitive manner respecting the privacy and dignity of the individual.</td>
</tr>
<tr>
<td><strong>Mentor signature</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Skills and Knowledge</th>
<th>Supervised participant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Excellent</strong> 70-79%</td>
<td><strong>Grade awarded</strong></td>
</tr>
<tr>
<td>With occasional guidance communication with other professionals and client group is always informative and applied relevantly to women’s health and choices.</td>
<td>Utilises current evidence, audit, theory and policy in professional/clinical discussions and with occasional guidance can accurately inform practice decisions.</td>
</tr>
<tr>
<td>Is adaptable in the practice setting with women, families, professionals but requires occasional guidance to prioritise practice activities effectively.</td>
<td>Most team working activity is reliable and effective.</td>
</tr>
<tr>
<td>With occasional guidance demonstrates knowledge and ability in the conduct of midwifery practice which reflects women centred care.</td>
<td>Practice is always safe practice and conducts practice skills in a safe and sensitive manner respecting the privacy and dignity of the individual.</td>
</tr>
<tr>
<td><strong>Mentor signature</strong></td>
<td></td>
</tr>
</tbody>
</table>

69
<table>
<thead>
<tr>
<th>Skills and Knowledge</th>
<th>Grade awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Good 60-69%</strong></td>
<td>Supervised participant</td>
</tr>
<tr>
<td>Communication with other professionals and client group is informative and usually applied relevantly to women’s health and choices but requires prompting.</td>
<td></td>
</tr>
<tr>
<td>When using current evidence, audit, theory and policy in clinical and professional discussions to accurately inform practice decisions, requires prompting.</td>
<td></td>
</tr>
<tr>
<td>Usually adaptable in the practice setting with women, families, professionals and can prioritise practice activities effectively.</td>
<td></td>
</tr>
<tr>
<td>Require occasional prompting to integrate with team working to could contribute more to the team.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates knowledge and ability in the conduct of midwifery practice which reflects women centred care but requires prompting.</td>
<td></td>
</tr>
<tr>
<td>Practice is always safe and care is usually conducted in a safe and sensitive manner respecting the privacy and dignity of the individual.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Skills and Knowledge</th>
<th>Grade awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pass 50-59%</strong></td>
<td>Supervised participant</td>
</tr>
<tr>
<td>Communication with other professionals and client group is informative but sometimes requires assistance to apply relevantly to women’s health and choices.</td>
<td></td>
</tr>
<tr>
<td>Engages in discussion using current evidence, audit, theory and policy but requires more depth and breadth of knowledge in its application.</td>
<td></td>
</tr>
<tr>
<td>Sometimes requires support to adapt in the practice setting with women, families, professionals and generally can prioritise practice activities sufficiently.</td>
<td></td>
</tr>
<tr>
<td>Generally integrates with team working but requires encouragement to contribute and be proactive.</td>
<td></td>
</tr>
<tr>
<td>Generally demonstrates knowledge and ability in the conduct of midwifery practice which reflects women centred care and sometimes lacks depth and breadth of the subject.</td>
<td></td>
</tr>
<tr>
<td>Practice is always safe and care is generally conducted in a safe and sensitive manner respecting the privacy and dignity of the individual.</td>
<td></td>
</tr>
<tr>
<td>Skills and Knowledge</td>
<td>Supervised participant</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td><strong>Borderline pass</strong>&lt;br&gt;40-49%</td>
<td>Communication with articulation which can be irrelevant or not appropriate when engaging with other professionals and client group. Inconsistent in discussion when using current evidence, audit, theory and policy and requires significant prompting to apply knowledge to midwifery management and care. Frequently requires guidance to adapt in the practice setting with women, families, professionals and requires assistance to prioritise practice activities. Generally integrates with team working but lacks confidence in own abilities. Demonstrates minimal knowledge and ability to conduct midwifery practice which reflects women centred care. Practice is always safe and is conducted in a sensitive manner respecting the privacy and dignity of the individual with prompting.</td>
</tr>
<tr>
<td><strong>Mentor signature</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Skills and Knowledge</th>
<th>Supervised participant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fail</strong>&lt;br&gt;0-39%</td>
<td>Unable to communicate with other professionals and client group, is insensitive to the situation. Fails to use current evidence, audit, theory and policy with any relevance when in discussion with women, families and other professionals. Fails to apply relevant knowledge and valid evidence in the assessment, planning, delivery and evaluation of midwifery care. Cannot adapt in the practice setting with women, families, professionals, and unaware of their needs. Has difficulty interacting with others including team working. Lacks insight into their own influence upon the outcome of care activities. Acts without due regard to present level of ability and fails to take up learning opportunities. Inability to complete or achieve a pass in all practice outcomes. Written reflective evidence to support designated practice theme is not completed. Practice is unsafe.</td>
</tr>
<tr>
<td><strong>Mentor signature</strong></td>
<td></td>
</tr>
</tbody>
</table>
Medicines Compulsory Summative Assessment

The NMC require midwifery students to achieve the Essential Skills Clusters for pre-registration midwifery education as detailed in the NMC (2009) Standards for pre-registration midwifery education. For entry to the register students must achieve 100% pass mark in summative health related numerical assessment which must be undertaken in the practice setting. The assessment must confirm the student;

‘Manages drug administration and safely monitors its effect’.
‘Calculates accurately the medicinal products frequently encountered within field of practice’.


The summative health related numerical assessment sits within the Module 5 assessment of practice (Theme K – Competent Practitioner Level – Safe medicine management in midwifery practice). This is detailed on page 23 of the ‘Practice Assessment Document Year 3’.

This assessment forms part of the Module 5 Practice Assessment.

The assessment comprises the following:

During your formative review discussion your mentor will identify four different medicines frequently encountered in the module 5 practice placement that you will have witnessed being administered/administered to women in your care. Before your summative interview you are required to complete the following template for each of the four different medicines. The following administration routes must be included;

Oral
Intravenous
Injection – subcutaneous or intramuscular

As you complete each template you must discuss it with your mentor. At your Summative interview your mentor will test your knowledge and understanding of the four drugs identified ensuring assessment of;

- Management of drug administration and safe monitoring of its effect’
- Accurate calculation of the medicinal products frequently encountered within field of practice’.

You must achieve 100% in this summative health related numerical assessment. A pass for one template = 25%, a fail for one template = 0%.

You will be familiar with the template below and will have been using it from your first placement to facilitate your understanding of medicinal products management. You must attach your four templates to your assessment of practice documentation and submit these as per your assessment schedule.
<table>
<thead>
<tr>
<th><strong>Medicines Management – Summative Record</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Drug name</strong></td>
</tr>
<tr>
<td><strong>Proprietary name</strong></td>
</tr>
<tr>
<td><strong>Drug group</strong></td>
</tr>
<tr>
<td><strong>Indications/ Application to Midwifery</strong></td>
</tr>
<tr>
<td><strong>Cautions</strong></td>
</tr>
<tr>
<td><strong>Contraindications</strong></td>
</tr>
<tr>
<td><strong>Side effects</strong></td>
</tr>
<tr>
<td><strong>Dose</strong></td>
</tr>
<tr>
<td><strong>Preparations</strong></td>
</tr>
<tr>
<td><strong>Mode of administration</strong></td>
</tr>
<tr>
<td><strong>Availability</strong></td>
</tr>
<tr>
<td><strong>Example(s) of dose calculation from clinical experience</strong></td>
</tr>
<tr>
<td><strong>Mentor Comments</strong></td>
</tr>
<tr>
<td><strong>Pass / Fail (Please indicate as appropriate)</strong></td>
</tr>
<tr>
<td><strong>Mentor Name</strong></td>
</tr>
<tr>
<td><strong>Print</strong></td>
</tr>
<tr>
<td><strong>Signature</strong></td>
</tr>
</tbody>
</table>
### EXAMPLE ONLY

#### Medicines Identification

<table>
<thead>
<tr>
<th>Drug name</th>
<th>Amoxicillin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proprietary name</td>
<td>Amoxil</td>
</tr>
<tr>
<td>Drug group</td>
<td>Broad spectrum antibiotic</td>
</tr>
<tr>
<td>Indications / Application to Midwifery</td>
<td>Urinary tract infections, oral infections, bronchitis</td>
</tr>
<tr>
<td>Cautions</td>
<td>History of allergy</td>
</tr>
<tr>
<td>Contraindications</td>
<td>Penicillin hypersensitivity</td>
</tr>
<tr>
<td>Side effects</td>
<td>Nausea, vomiting, diarrhoea, rashes</td>
</tr>
<tr>
<td>Dose</td>
<td>0.25-1mg six hourly, UTI 500mg eight hourly</td>
</tr>
<tr>
<td>Preparations</td>
<td>Capsules, oral suspension, powder for reconstitution for injection</td>
</tr>
<tr>
<td>Mode of administration</td>
<td>Oral (mouth) Intramuscular injection Intravenous injection Intravenous infusion</td>
</tr>
<tr>
<td>Availability</td>
<td>Prescription only medication 250 mg capsules Oral suspension 125mg/5ml Powder Vial 500mg</td>
</tr>
</tbody>
</table>
| Example(s) of dose calculation from clinical experience for this drug | Prescribed 500mgs orally for severe infection  
Dose required = 500mg  
Strength of available tablet = 250mg x 1 = 2 tablets  
Prescribed 1gm by intravenous injection for severe infection  
500mg Powder Vial diluted in 4 mls water for Injections  
Want x volume = 1000mg x 4 ml = 2 x 4 = 8ml = 2 vials  
Got 500mg |

---

74