

**University of Colorado College of Nursing
Graduate Clinical Placement Office
Nurse Midwifery (NMW)**

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Thank you for volunteering your time as a preceptor in the **University of Colorado College of Nursing**. Your direction and leadership is an integral part of our student's training and development into a leader in the nursing field. We appreciate your participation and welcome you into our University of Colorado College of Nursing community.

NMW students complete 14 credits of practicum (630 contact hours). The success of clinical training of students depends on maintaining good communication among the student, the program, the preceptors, and the clinical faculty. The program strives to maintain open faculty–colleague relationships with its preceptors and believes that, should problems arise during a rotation, by notifying appropriate program personnel early, problems can be solved without unduly burdening the preceptor.

Graduate nurse-midwifery education promotes leadership, advocacy and academic excellence toward improving the health of women and families worldwide based on a broad foundation in the arts, sciences and humanities.

InPlace is the electronic system for the University of Colorado College of Nursing students to record clinical encounters.

- Students will be logging information into InPlace regarding patient demographics, chief complaints, CPT and ICD-9 codes, procedures, etc.
- The data obtained is in compliance with HIPAA and no patient-specific identifying information will be entered. InPlace adheres to all HIPAA regulations.
- This data is used to provide documentation of adherence with our accreditation standards as well as provide a synopsis of what was experienced during the clinical rotation.
- InPlace is an interactive program that also allows you, as a preceptor, to become a more integral and involved part of the NP program.

You will be expected to provide feedback on the student's developmental progress and attendance. Upon the completion of your rotation, you will be sent a link to an evaluation page. Please complete the evaluation at your earliest convenience. The preceptor's evaluation of the student is tremendously important. On required rotations (i.e., core rotations required by the institution for all students prior to graduation), a passing evaluation from the preceptor is mandatory. If deemed "not passing," the student may be requested to repeat the rotation or undergo procedures specified by the program. ***The program faculty ultimately makes the final grade for a clinical rotation and the decision to pass or fail a student.*** The program will designate how often evaluations need to be completed. Please contact the clinical faculty for specific evaluation forms and policies, in accordance with the student handbook.



Professional Role	Course Description	Student Competencies
NURS 6755 Novice	A clinical course that focuses on beginning-level competencies in the novice Advanced Practice role in a selected population; 10 outcomes are assessed.	<ol style="list-style-type: none">1. Patient interviews, history-taking, physical examination and written communication.2. Heavy reliance on preceptor; needs explicit, clear instructions3. Decision-making is slow, rigid, and halted, governed by rules4. By end of semester, should demonstrate foundational clinical skills.
NURS 6756 Advanced Beginner	A clinical course that allows students to refine competencies as an advanced-beginner Advanced Practitioner (NP) in a selected population; students must have completed Diagnosis and Management I prior to 6756. 19 outcomes are assessed.	<ol style="list-style-type: none">1. Increased emphasis on communication, assessment, differential diagnosis, and therapeutic plan development.2. Decreased reliance on preceptor; performance becomes marginally acceptable.3. May feel overwhelmed and frustrated, attention global.4. By end of semester, demonstrates growth toward assuming role of NP.
NURS 6757 Competent	A clinical course that allows students to practice and refine higher-level competencies in the competent Advanced Practice role for a select population; students will complete Diagnosis and Management II during 6757. 23 outcomes are assessed.	<ol style="list-style-type: none">1. Increasing abilities in the presentation of clinical findings, differential diagnosis, and therapeutic plan to the preceptor.2. Less reliance on preceptor; accepts more individual accountability but may lack self-confidence.3. May have issues with time utilization.4. By end of semester, is able to demonstrate role of NP in advanced-clinical skills.
NURS 6758 Proficient	A clinical course that allows students to refine higher-level competencies in a more-autonomous, proficient Advanced Practice role; students will have completed women's health and geriatrics curriculum. 24 competencies will be assessed.	<ol style="list-style-type: none">1. Recognition of critical aspects of a situation, patterning care, easier decision-making, views from holistic perspective.2. Preceptor oversight primarily for validation of competency and ensuring patient safety.3. By end of semester, is able to demonstrate role of NP through competence and management skills.



Faculty and School Responsibilities	Student Responsibilities	Preceptor Responsibilities
<p>Negotiates clinical affiliation agreements with the clinical agency</p> <p>Validates completion of student health requirement, liability insurance, licensure, and CPR certification</p> <p>Clarifies expectations of the preceptor</p> <p>Is available to preceptor for questions, problems, and concerns that may come up during the clinical experience</p> <p>Provides feedback to both the students and the preceptor</p> <p>Organizes computer training and agency paperwork as necessary</p>	<p>Develops individual learning objectives for the clinical experience</p> <p>Completes all clinical and course assignments</p> <p>Meets with the preceptor prior to clinical experience to discuss details and logistics of the clinical experience</p> <p>Is prepared and punctual in the clinical area on scheduled days and times</p> <p>Schedules any make-up time at the convenience of the preceptor after notifying faculty and preceptor of schedule changes</p> <p>Participates in ongoing evaluations of self, preceptor, and faculty</p> <p>Maintains client confidentiality</p> <p>Maintains liability insurance, RN licensure, CPR certification, and completes all health requirements</p>	<p>As applicable, maintains certification as advanced practice nurse or physician's assistant</p> <p>Negotiates dates and times for student clinical experience and is present or arranges for a qualified substitute</p> <p>Reviews objectives for clinical experience and determines feasibility of meeting them</p> <p>Assists students in meeting and modifying clinical-learning objectives of the clinical experience</p> <p>Serves as a host, sponsor, teacher, and role model for student at clinical site</p> <p>Orients student to clinical agency</p> <p>Selects, with student, clinical experiences appropriate to objectives</p> <p>Intervenes where appropriate to manage situations beyond the student's ability</p> <p>Evaluates student's care while providing immediate feedback and co-signing all charts</p> <p>Contacts faculty if there are problems with student</p> <p>Evaluates the student verbally and in writing</p> <p>Meets with student and faculty members prior to the clinical experience</p>

The **UCD CON Graduate Program Learning Outcomes** are based on the American Association of Colleges of Nursing (AACN) essentials (2011) and the National Organization of Nurse Practitioner Faculties (NONPF) Nurse Practitioner Core Competencies (2012). The AACN Essentials delineate the knowledge and skills that all nurses prepared in master's nursing programs acquire. These Essentials guide the preparation of graduates for diverse areas of practice in any healthcare setting. [Click here for Core Competencies for Basic Midwifery Practice.](#)

Essential I: Background for Practice from Sciences and Humanities

Recognizes that the master's-prepared nurse integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings.

Essential II: Organizational and Systems Leadership

Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize ethical and critical decision-making, effective working relationships, and a systems-perspective.

Essential III: Quality Improvement and Safety

Recognizes that a master's-prepared nurse must be articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within ***an organization.***

Essential IV: Translating and Integrating Scholarship into Practice

Recognizes that the master's-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.

Essential V: Informatics and Healthcare Technologies

Recognizes that the master's-prepared nurse uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.

Essential VI: Health Policy and Advocacy

Recognizes that the master's-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.

Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

Recognizes that the master's-prepared nurse, as a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.

Essential VIII: Clinical Prevention and Population Health for Improving Health

Recognizes that the master's-prepared nurse applies and integrates broad, organizational, client-centered, and culturally appropriate concepts in the planning, delivery, management, and ***evaluation of evidence-based clinical prevention and population care and services to individuals, families, and aggregates/identified populations.***

Essential IX: Master's-Level Nursing Practice

Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.



Sample Evaluation Form: Nurse-Midwifery Specialty

Part I: Skills Competencies

Each of the following criteria will be scored as:

Complete Supervision----- Partial Supervision-----Minimum Supervision-----No Supervision

I. Data Collection:

Systematically compiles and updates a complete and relevant data base including a thorough or focused health history and physical exam for Triage, IP & immediate PP patients.

- A. Conducts a thorough and complete chart review.*
- B. Evaluates correctly lab and ultrasound data.*
- C. Conducts a complete interim history.*
- D. Identifies and gathers missing data.
- E. Conducts a thorough or focused physical exam.
 - 1. Explains exam procedures to patient*.
 - 2. Performs correctly:
 - a. fundal height*
 - b. SVE*
 - c. sterile speculum exam*
 - d. EFW
 - e. Leopold's Maneuvers*
 - f. extremities (DTR's, edema, Homan's)*
 - 3. Postpartum examination

II. Assessment: Identifies findings as normal or abnormal and formulates a diagnosis.

- A. Identifies risk factors/potential problems from history.
- B. Identifies appropriate physical findings.
 - 1. contraction pattern*
 - 2. FHT Category
 - 3. fetal position
 - 4. stage of labor*
 - 5. normal/abnormal progression of labor*
 - 6. confirms diagnosis with faculty preceptor*
- C. Explains findings to patient*

III. Management: Incorporates health care needs/ problems.

- A. Collaborates with patients in establishing goals (self-determination).*
 - 1. Incorporates patient's birth plan*
 - 2. Explains options to client
 - a. patient/family support*
 - b. nutritional needs*
 - c. methods to facilitate labor progression, pharmacologic & non-pharmacologic methods
- B. Addresses patient needs for specific complications
 - 1. IV hydration*
 - 2. pain relief/medication (pudendal, local, etc.)
 - 3. amniotomy*
 - 4. internal monitoring*



5. amnioinfusion
 6. additional labs
 7. rotation of baby
 8. antibiotic therapy*
 9. CAMs to include herbal suggestions, touch, aroma therapy
- C. Addresses breastfeeding needs including nutrition
- D. Addresses family planning needs for breastfeeding & formula feeding patients

IV. Management: Develops a comprehensive plan of care with patient.

- A. Provides information and support for informed decisions (self-determination).*
- B. Develops a plan of care.
1. determines need for admission/observation*
 2. individualizes plan*
 3. presents plan to faculty (SOAP) prior to initiating care*
 4. anticipates complications:
 - a. malposition
 - b. labor dystocia
 - c. shoulder dystocia
 - d. post-partum hemorrhage/ infection
- C. Acquires appropriate follow-up data.
- D. Integrates clinical assessment and theoretical knowledge to give valid rationale for nurse-midwifery management plan.*
- E. Plan of care is evidence-based.*

V. Assumes primary responsibility for implementing plan.

- A. Informs patient/family in a manner that they understand.*
- B. Provides appropriate comfort measures/labor support.*
- C. Orders appropriate therapies.
- D. Performs SVE at appropriate intervals.
- E. Prepares for birth:
1. informs RN of needs*
 2. alerts Peds when appropriate
- F. Conducts birth:
1. interacts w/ patient appropriately in 2nd stage*
 2. positions patient appropriately for 2nd stage*
 3. supports perineum during delivery*
 4. performs episiotomy when needed
 5. supports infant during delivery*
 6. clears infant's airway as needed.*
 7. assesses infant appropriately*
 8. meets infant's immediate needs for DABC
 9. delivers & assesses placenta & UC correctly*
 10. assesses for maternal bleeding *
 11. controls bleeding as needed
 12. inspects for lacerations*
 13. repairs lacerations with assistance



VI. Documentation: Utilizes medical record.

- A. Completes charting as indicated.*
 - 1. organized, legible notes*
 - 2. timely notes
 - 3. appropriate maternal assessment*
 - 4. appropriate fetal assessment

VII. Interacts as a professional.

- A. Consults with faculty preceptor/confirms doubtful findings.*
 - 1. Recognizes limitations.*
 - 2. Promotes goal setting.*
 - 3. Communicates effectively with health care team.
 - 4. Promptly shows up for assigned work/shifts.*
 - 5. Completes assigned tasks.*
 - 6. Utilizes Standard Precautions.*
 - 7. Maintains confidentiality and is ethical in approach*
- B. Understands cultural differences and practices cultural sensitivity.

VIII. Exhibits advanced assessment/management.

- A. Recognizes need for consultation.
- B. Initiates consultation with appropriate provider.
- C. Initiates management of common complications.

*these elements are MANDATORY for student to pass.

Part II: Clinical Competencies

Overall clinical grade

Scoring Legend

0: Unsafe. Actions or omissions pose a danger to the patient or fetus and are considered a 'critical incident'. Behavior is inconsistent with professional ethics, and philosophy, mission and policies, and protocols of ACNM, College of Nursing or clinical agency. The student should be sent home immediately and the course faculty notified.

Critical elements include medication errors, chronic tardiness or leaving early for personal reasons, sending a patient home without the CNM/NP first examining her, blatant rudeness, blatant misinformation.

1: Unsatisfactory. Omits important parts of history, exam or plan of management. Student does not make satisfactory progress in refining skills. Student's inability to demonstrate clinical reasoning is obvious as evidenced by student's inability to apply knowledge in the clinical setting.

2: Unsatisfactory progress in demonstrating knowledge, skills, and initiative given the student's previous learning experiences. *This score should be used whenever there is serious concern about a student's progress.*

3: Behavior is appropriate for a student learning a new skill. May be disorganized, but is able to obtain needed information and apply it.

4: There is satisfactory progress toward meeting course objectives; student consistently demonstrates adequate knowledge base, skills, initiative and clinical reasoning. Student demonstrates dexterity, appears relaxed and confident during performance of tasks, and focuses on client while providing care, including providing labor support as appropriate.

5: Behaviors consistently demonstrate knowledge, skills, and initiative appropriate for a student ending a specific clinical experience. Student requires minimal cues from Preceptor to perform midwifery management process. The student has met the clinical objectives of the course and has moved from complete to partial supervision during the 1st semester and from partial to minimal supervision the 2nd semester. The student is or will be ready to progress to the next level of clinical experiences.



Rate each of the following criteria from 0-5, based on the legend above.

I. Data Base Collection: Gathers necessary information in a safe, accurate, complete manner to form an appropriate assessment. This includes (1) chart review, (2) laboratory review, (3) patient history and (4) physical examination for AP, GYN, FP & PC patients.

II. Assessment: Comes to an accurate diagnosis (es) or conclusion based on data collected. Identifies findings as normal or abnormal and formulates reasonable differential diagnosis (es).

III. Development of Management Plan: Develops a midwifery plan of management which is safe, individualized, comprehensive & based on the best evidence available.

IV. Implementation of Management Plan: Carries out plan correctly, safely and sensitively. This includes use of specific skills, as well as coordination, for preparation and organization in carrying out plan.

V. Evaluation of Management Plan: Evaluates plan to determine effectiveness. Able to adjust and change assessment and management based on accurate evaluation of the patient's response. Demonstrates flexibility.

VI. Documentation: Is clear, timely and complete in medical records, as well as other required forms.

VII. Time Management

VIII. Professionalism: Demonstrates appropriate communication with patient, family and all members of the healthcare team. Demonstrates appropriate initiative. Accepts feedback.

Clinical Competencies

A: 36-40 A-: 32-35 B+: 28-31 B: 24-27 B-: 20-23 C: <20

*Any 'critical incident' results in dismissal of the student for the day and immediate contact of course faculty (score of 0; unsafe). A Learning Contract needs to be developed immediately if a score of ≤ 2 on any single objective is given, or if a student averages <3 on competencies resulting in a total of <24 at midterm.

Part III: Number of Visits

Mid-term evaluation- report the number of the following (Students should collect these numbers in advance):

1. preconception visits
2. new antepartum
3. return antepartum
4. labor managements
5. births
6. newborn assessments
7. breastfeeding support
8. postpartum (0-7 days)
9. postpartum (1-8 wks)
10. primary care
11. family planning
12. gynecology
13. common health problems
14. peri/menopause

Part IV: Student self-evaluation

Provide your preceptor with a typed self-evaluation to copy and paste into the electronic submission. Students, describe your overall progress toward meeting competencies (specific strengths & weaknesses).