

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

NMI graduation requirements include completion of Skills Assessments. This set of skills and abilities is evaluated by students and preceptors during Preceptor-Supervised Student-Primary Care. Assessments are made after every five births where the student provides preceptor-supervised primary midwifery care. The progression of assessments is intended to document the student's increasing competence to provide care and apply midwifery skills and abilities. Students satisfy this graduation requirement upon receiving a rubric score of 4 on all skills.

Preceptor Assessment Rubric Scoring System

Based on a four point system, evaluate student's ability with each skill as follows:

- 4) Performs skill with competence and without assistance
- 3) Familiar with skill, needs practice
- 2) Learning new skill
- 1) Student has not practiced this skill

The skills have been identified through multiple NARM Job Analyses. NARM conducts a repeat Job Analysis every 6-8 years.

The initial NARM Job Analysis occurred in 1995 during the Certification Task Force. The extensive JA survey was mailed to 3000 midwives practicing in predominately out-of-hospital settings. Participants reported completion time to be around 12 hours. 850 midwives responded.

The first NARM Job Analysis conducted entirely of CPMs was in 2001, sent to over 600 potential participants. 2001 saw a participation rate of 58%.

In 2009 the NARM Job Analysis was web-based and over 1000 CPMs received the survey. NARM 2010 analysis reported a 42% response rate.

Over 2100 CPMs were contacted to participate in the web-based Job Analysis in 2016. Data analysis includes responses from over 700 CPMs.

The Job Analysis surveys determine the required skills and knowledge for the NARM CPM credential. National Midwifery Institute includes these skills and areas of knowledge in graduation requirements.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
	Date	Date	Date	Date	
NARM 1. Midwifery Counseling, Education and Communication					
A. Provides interactive support, counseling and/or referral for the possibility of less-than-optimal pregnancy outcomes					
B. Provides education and counseling based on maternal and paternal health/reproductive/family history and ongoing risk assessment					
C. Facilitates the mother/pregnant person's decision of where to give birth:					
1. The advantages and the risks of different birth sites					
2. The requirements of the birth site					
3. How to prepare, equip and supply birth site					
D. Educates the mother/pregnant person and their family/support unit to share responsibility for optimal pregnancy outcome					
E. Educates the mother/pregnant person concerning the natural physical and emotional processes of pregnancy, labor, birth and postpartum					
F. Applies the principles of informed consent					
G. Communicates practice parameters and limits of practice					

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<i>NARM 1. Midwifery Counseling, Education and Communication</i>					
H. Applies principles of client confidentiality					
I. Provides individualized care					
J. Advocates for the mother/pregnant person during pregnancy, birth and postpartum					
K. Provides culturally appropriate education, counseling and/or referral to other health care professionals, services, agencies for:					
1. genetic counseling for at-risk mothers/pregnant people					
2. abuse issues: including, emotional, physical and sexual					
3. prenatal testing and lab work					
4. diet, nutrition and supplements					
5. effects of smoking, drugs and alcohol use					
6. social risk factors					
7. situations requiring an immediate call to the midwife					
8. sexually transmitted diseases/infections and safer sex practices					
9. blood borne pathogens: HIV, Hepatitis B, Hepatitis C					
10. complications of pregnancy					
11. environmental risk factors					
12. newborn care including normal/abnormal newborn activity, responses, vital signs, appearance, behavior, etc.					
13. postpartum care concerning complications and self-care					
14. contraception					
15. female reproductive anatomy and physiology					
16. monthly breast self examination techniques					
17. breastfeeding					
19. risks to fetal health, including:					
a) TORCH viruses (toxoplasmosis, rubella, cytomegalovirus, herpes, other)					
b) environmental hazards					
c) teratogenic substances					

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NARM 2. General Health care Skills					
A. Demonstrates the application of Universal Precautions as they relate to midwifery:					
1. hand washing					
2. gloving and ungloving					
3. sterile technique					
B. Demonstrates optimal documentation and charting skills					
C. Offers alternative healthcare practices (non-allopathic treatments) and modalities, and educates on the benefits and contraindications:					
1. herbs					
2. hydrotherapy (baths, compresses, showers, etc.)					
D. Refers to alternative healthcare practitioners for non-allopathic treatments					
E. Manages shock by:					
1. recognition of shock, or impending shock					
2. assessment of the cause of shock					
3. treatment of shock:					
a) position mother/birthing person flat, legs elevated 12 inches					
b) administer oxygen					
c) keep mother/birthing person warm, avoid overheating					
d) administer/use non-allopathic remedies					
e) encourage deep, calm, centered breathing					
f) administer or refer for IV fluids					
g) activate emergency medical services					
h) prepare to transport					
F. Understands the benefits and risks and recommends the appropriate use of vitamin and mineral supplements including: Prenatal Multi-Vitamin, Vitamin C, Vitamin E, Folic Acid, B-Complex, B-6, B-12, Iron, Calcium, Magnesium					
G. Demonstrates knowledge of the benefits and risks and appropriate administration of the following pharmacological (prescriptive) agents:					
1. Lidocaine/xylocaine for suturing					

student's name _____

National Midwifery Institute, Inc.

preceptor's name _____

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<i>NARM 2. General Health care Skills</i>					
G.2. medical oxygen					
3. methergine					
4. prescriptive ophthalmic ointment					
5. Pitocin® for postpartum hemorrhage					
6. RhoGam					
7. Vitamin K:					
a) oral					
b) IM					
8. antibiotics for Group B Strep					
9. IV fluids					
H. Demonstrates knowledge of benefits/risks of ultrasounds:					
1. provides counseling regarding ultrasound					
2. makes appropriate referrals for ultrasound					
I. Demonstrates knowledge of benefits/risks of biophysical profile:					
1. provides counseling					
2. makes appropriate referrals					
J. Demonstrates knowledge of how and when to use instruments and equipment including:					
1. Amni-hook® / Amnicot®					
2. bag and mask resuscitator					
3. bulb syringe					
4. Delee® (tube/mouth suction device)					
5. hemostats					
6. lancets					
7. nitrazine paper					
8. scissors (all kinds)					
9. suturing equipment					
10. urinary catheter					
11. vacutainer/blood collection tube					
12. gestational wheel or calendar					

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<i>NARM 2. General Health care Skills</i>					
J.13. newborn and adult scale					
14. thermometer					
15. urinalysis strips					
16. cord clamp					
17. Doppler					
18. Fetoscope					
19. stethoscope					
20. vaginal speculum					
21. blood pressure cuff					
22. oxygen tank, flow meter, cannula, and face mask					
K. Proper use of injection equipment:					
1. syringe					
2. single dose vial					
3. multi dose ampule					
4. sharps container					
L. Draws blood for lab work					
M. Obtains or refers for urine culture					
N. Obtains or refers for blood screening tests					
O. Evaluates laboratory and medical records:					
1. hematocrit/hemoglobin					
2. blood sugar (glucose)					
3. HIV					
4. Hepatitis B and C					
5. Rubella					
6. Syphilis (VDRL or RPR)					
7. Group B Strep					
8. Gonorrhea Culture					
9. Complete Blood Count					

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<i>NARM 2. General Health care Skills</i>					
O.10. blood type and Rh factors					
11. Rh antibodies					
12. Chlamydia					
13. PAP test					
NARM 3. Maternal Health Assessment					
A. Obtain and maintain records of health, reproductive and family medical history and possible implications to current pregnancy, including:					
1. personal information/demographics					
2. personal history, including religion, occupation, education, marital status, economic status, changes in health or behavior and woman/pregnant person's evaluation of their health and nutrition					
3. potential exposure to environmental toxins					
4. medical conditions					
5. surgical history					
6. reproductive history including:					
a) menstrual history					
b) gynecologic history					
c) sexual history					
d) childbearing history					
e) contraceptive practice					
f) history of sexually transmitted infections					
g) history of behavior posing risk for sexually transmitted infection exposure					
h) history of risk of exposure to blood borne pathogens					
i) Rh type and plan of care if negative					
7. family medical history					
8. psychosocial history					
9. history of abuse					
10. mental health					

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<i>NARM 3. Maternal Health Assessment</i>					
A.11. Mother/pregnant person's medical history:					
a) genetics					
b) alcohol use					
c) drug use					
d) tobacco use					
e) allergies					
f) father/non-gestational parent's medical history					
g) genetics					
h) alcohol use					
i) drug use					
j) tobacco use					
B. Perform a physical examination, including assessment of:					
1. general appearance/skin condition					
2. baseline weight and height					
3. vital signs					
4. HEENT (Head, Eyes, Ears, Nose and Throat) including:					
a) hair and scalp					
b) eyes: pupils, whites, conjunctiva					
c) thyroid by palpation					
d) mouth, teeth, mucus membrane, and tongue					
5. lymph glands of neck, chest and under arms					
6. breasts					
6.a) evaluates mother/pregnant person's knowledge of self-breast examination techniques, instructs if needed					
b) performs breast examination					
7. torso, extremities for bruising, abrasions, moles, unusual growths					
8. baseline reflexes					
9. heart and lungs					
10. abdomen by palpation and observation for scars					

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<i>NARM 3. Maternal Health Assessment</i>					
B.11. kidney pain (CVAT)					
12. deep tendon reflexes of the knee					
13. pelvic landmarks					
14. cervix (by speculum exam)					
15. size of the uterus and ovaries (by bimanual exam)					
16. condition of vulva, vagina, cervix, perineum and anus					
17. musculo-skeletal system, including spine straightness and symmetry, posture					
18. vascular system (edema, varicosities, thrombophlebitis)					
NARM 4. Prenatal					
A. Assess results of routine prenatal physical exams including ongoing assessment of:					
1. maternal psycho-social, emotional health and well-being					
2. signs and symptoms of infection					
3. maternal health by tracking variations and change in:					
a) blood pressure					
b) weight					
c) color of mucus membranes					
d) general reflexes					
e) elimination/urination patterns					
f) sleep patterns					
g) energy levels					
4. nutritional patterns					
5. hemoglobin/hematocrit					
6. glucose levels					
7. breast condition/implications for breastfeeding					
8. signs of abuse					
9. urine for:					
a) appearance: color, density, odor, clarity					

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<i>NARM 4. Prenatal</i>					
A.9.b) protein					
c) glucose					
d) ketones					
e) PH					
f) Leukocytes					
g) Nitrites					
h) blood					
10. fetal heart rate/tones auscultated with fetoscope or Doppler					
11. vaginal discharge or odor					
12. estimated due date based upon:					
a) last menstrual period					
b) last normal menstrual period					
c) length of cycles					
d) changes in mucus condition or ovulation history					
e) date of positive pregnancy test					
f) date of implantation bleeding					
g) quickening					
h) fundal height					
i) calendar date of conception/unprotected intercourse					
13. assessment of fetal growth and well-being:					
a) auscultation of fetal heart					
b) correlation of weeks gestation to fundal height					
c) fetal activity and responsiveness to stimulation					
d) fetal palpation for:					
(1) fetal weight					
(2) fetal size					
(3) fetal lie					
(4) degree of fetal head flexion					

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<i>NARM 4. Prenatal</i>					
14. clonus					
15. vital signs					
16. respiratory assessment					
17. edema					
B. Records results of the examination in the prenatal records					
C. Provides prenatal education, counseling, and recommendations for:					
1. nutritional, and non-allopathic dietary supplement support					
2. normal body changes in pregnancy					
3. weight gain in pregnancy					
4. common complaints of pregnancy:					
a) sleep difficulties					
b) nausea/vomiting					
c) fatigue					
d) inflammation of the sciatic nerve					
e) breast tenderness					
f) skin itchiness					
g) vaginal yeast infections					
h) bacterial vaginosis					
i) symptoms of anemia					
j) indigestion/heartburn					
k) constipation					
l) hemorrhoids					
m) carpal tunnel syndrome					
n) round ligament pain					
o) headache					
p) leg cramps					
q) backache					

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<i>NARM 4. Prenatal</i>					
C.2.4.r) varicose veins					
s) sexual changes					
t) emotional changes					
u) fluid retention/swelling/edema					
5 Physical preparation:					
a) preparation of the perineum					
b) physical activities for labor preparation (e.g., movement and exercise)					
D. Recognizes and responds to potential prenatal complications/variatio					
ns by identifying/assessing:					
1. antepartum bleeding:					
a) first trimester					
b) second trimester					
c) third trimester					
2. identifying pregnancy-induced hypertension					
3. assessing, educating and counseling for pregnancy-induced hypertension with:					
a) nutritional/hydration assessment					
b) administration of calcium/magnesium supplement					
c) stress assessment and management					
d) non-allopathic remedies					
e) monitoring for signs and symptoms of increased severity					
f) increased frequency of maternal assessment					
g) hydrotherapy					
4. identifying and consulting, collaborating or referring for:					
a) pre-eclampsia					
b) gestational diabetes					
c) urinary tract infection					
d) fetus small for gestational age					
e) intrauterine growth retardation					

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<i>NARM 4. Prenatal</i>					
D.4.f) thrombophlebitis					
g) oligohydramnios					
h) polyhydramnios					
5. breech presentations:					
a) identifying breech presentation					
b) turning breech presentation with:					
(1) alternative positions (tilt board, exercises, etc.)					
(2) referral for external version					
(3) non-allopathic methods (moxibustion, homeopathic)					
c) management strategies for unexpected breech delivery					
6. multiple gestation:					
a) identifying multiple gestation					
b) management strategies for unexpected multiple births					
7. occiput posterior position:					
a) identification					
b) prevention					
c) techniques to encourage rotation					
8. vaginal birth after cesarean (VBAC):					
a) identifying VBACs by history and physical					
b) indications/contraindications for out-of-hospital births					
c) management strategies for VBAC					
d) recognizes signs, symptoms of uterine rupture and knows emergency treatment					
9. identifying and dealing with pre-term labor with:					
a) referral					
b) consults for preterm labor					
c) treats for preterm labor:					
(1) increase of fluids					
(2) non-allopathic remedies					
(3) discussion of the mother/pregnant person's fears - emotional support					
(4) consumption of an alcoholic beverage					
(5) evaluation of urinary tract infection					

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<i>NARM 4. Prenatal</i>					
D.9.c.(6) evaluation of other maternal infection					
(7) bed rest					
(8) pelvic rest (including no sexual intercourse)					
(9) no breast stimulation (including nursing)					
10. assessing and evaluating a post-date pregnancy by monitoring/assessing:					
a) fetal movement, growth, and heart tone variability					
b) estimated due date calculation					
c) previous birth patterns					
d) amniotic fluid volume					
e) maternal tracking of fetal movement					
f) consultation or referral for:					
(1) ultrasound					
(2) non-stress test					
(3) biophysical profile					
11. treating a post-date pregnancy by stimulating the onset of labor:					
a) sexual/nipple stimulation					
b) assessment of emotional blockage and/or fears					
c) stripping membranes					
d) cervical massage					
e) castor oil induction					
f) non-allopathic therapies					
g) physical activity					
h) repositioning a posterior baby					
i) refer for chiropractic adjustment					
j) refer for acupuncture					
12. identifying and referring for:					
a) tubal pregnancy					
b) molar pregnancy					

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<i>NARM 4. Prenatal</i>					
D.12.c) ectopic pregnancy					
d) placental abruption					
e) placenta previa					
13. identifying premature rupture of membranes					
14. managing premature rupture of membranes in a FULL-TERM pregnancy:					
a) monitor fetal heart tones and movement					
b) minimize internal vaginal examinations					
c) reinforce appropriate hygiene techniques					
d) monitor vital signs for signs of infection					
e) encourage increased fluid intake					
f) support nutritional/non-allopathic treatment					
g) stimulate labor					
h) consult for prolonged rupture of membranes					
i) review Group B Strep status and inform of options					
15. consult and refer for premature rupture of membranes in PRE-TERM pregnancy					
16. establishes and follows emergency contingency plans for mother/birthing person and baby					
5. Labor, Birth and Immediate Postpartum					
A. Facilitates maternal relaxation and provides comfort measure throughout labor by administering/encouraging:					
1. massage					
2. hydrotherapy (compresses, baths, showers)					
3. warmth for physical and emotional comfort (e.g., compresses, moist warm towels, heating pads, hot water bottles, friction heat)					
4. communication in a calming tone of voice, using kind and encouraging words					
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5. the use of music or sound					

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5. Labor, Birth and Immediate Postpartum					
A.6. silence					
7. continued mobility throughout labor					
8. pain management:					
a) differentiation between normal and abnormal pain					
b) validation of the woman/birthing person's experience/fears					
c) counter-pressure on back					
d) relaxation/breathing techniques					
e) non-allopathic treatments					
f) position changes					
B. Evaluates/responds during first stage:					
1. assess maternal/infant status based upon:					
a) vital signs					
b) food and fluid intake/output					
c) status of membranes					
d) uterine contractions for frequency, duration and intensity with a basic intrapartum examination					
e) fetal heart tones					
f) fetal lie, presentation, position and descent with:					
(1) visual observation					
(2) abdominal palpation					
(3) vaginal examination					
g) effacement, dilation of cervix and station of the presenting part					
h) maternal dehydration and/or vomiting by administering:					
(1) fluids by mouth					
(2) ice chips					
(3) oral herbal/homeopathic remedies					
(4) IV fluids (administer or refer for)					
2. anterior/swollen lip by administering/supporting:					
a) position change					
b) light pressure or massage to cervical lip					

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<i>5. Labor, Birth and Immediate Postpartum</i>					
B.2.c) warm bath					
d) pushing the lip over the baby's head while the mother/birthing person pushes					
e) deep breathing and relaxation between contractions					
f) non-allopathic treatments					
3. posterior, asynclitic position by encouraging and/or supporting:					
a) the mother/birthing person's choice of position					
b) physical activities (pelvic rocking, stair climbing, walking, etc.)					
c) non-allopathic treatments					
d) rest or relaxation					
e) manual internal rotation ("dialing the phone")					
4. pendulous belly inhibiting descent by:					
a) assisting the positioning of the uterus over the pelvis					
b) positioning semi-reclining on back					
c) lithotomy position					
5. labor progress by providing:					
a) psychological support					
b) position change					
c) nutritional support					
d) rest					
e) physical activity					
f) non-allopathic treatments					
g) nipple stimulation					
C. Demonstrates the ability to evaluate/support during second stage:					
1. wait for the natural urge to push					
2. encourage aggressive pushing in emergency situations					
3. allow the mother/birthing person to choose the birthing position					
4. recommend position change as needed					

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<i>5. Labor, Birth and Immediate Postpartum</i>					
C.5. perineal support					
6. encourage the mother/birthing person to touch the newborn during crowning					
7. provide an appropriate atmosphere for the moment of emergence					
D. Accurate and complete recordkeeping and documentation of labor and birth					
E. Demonstrates the ability to recognize and respond to labor and birth complications such as:					
1. abnormal fetal heart tones and patterns by:					
a) administer oxygen to mother/birthing person					
b) change maternal position					
c) facilitate quick delivery if birth is imminent					
d) encourage deep breathing					
e) evaluate for consultation and referral					
f) evaluate for transport					
2. cord prolapse by:					
a) change maternal position to knee-chest					
b) activate emergency medical services/medical backup					
c) monitor FHT and cord for pulsation					
d) keep the presenting cord warm, moist and protected					
e) administer oxygen to mother/birthing person					
f) place cord back into vagina					
g) facilitate immediate delivery, if birth is imminent					
h) prepare to resuscitate the newborn					
3. variations in presentation:					
a) breech:					
(1) understands mechanism of descent and rotation for complete, frank, or footling breech presentation					
(2) hand maneuvers for assisting delivery					
(3) techniques for release of nuchal arm with breech					
b) nuchal hand/arm					

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<i>5. Labor, Birth and Immediate Postpartum</i>					
E.3.b)(1) apply counter pressure to hand/or arm and the perineum					
(2) sweep arm out					
c) nuchal cord:					
(1) loop finger under the cord, and sliding it over head					
(2) loop finger under the cord, and sliding it over the shoulder					
(3) clamp cord in two places, cutting the cord between the two clamps					
(4) press baby's head into perineum and somersault the baby out					
(5) prepare to resuscitate the baby					
d) face and brow:					
(1) prepare for imminent birth					
(2) determine position of chin					
(3) prepare resuscitation equipment					
(4) prepare treatment for newborn bruising/swelling					
(5) administer arnica					
(6) position the mother/birthing person in a squat					
(7) prepare for potential eye injury					
e) multiple birth and delivery:					
(1) identifies multiple gestation					
(2) consults or transports according to plan					
(3) prepares for attention to more than one newborn					
f) shoulder dystocia:					
(1) apply gentle traction while encouraging pushing					
(2) reposition the mother/birthing person to:					
(a) hands and knees (Gaskin maneuver)					
(b) exaggerated lithotomy (McRobert's position)					
(c) end of bed					
(d) squat					
(3) reposition shoulders to oblique diameter					

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<i>5. Labor, Birth and Immediate Postpartum</i>					
E.3.f)(4) extract the posterior arm					
(5) flex shoulders of newborn, then corkscrew					
(6) apply supra-pubic pressure					
(7) sweep arm across newborn's face					
(8) fracture baby's clavicle					
4. vaginal birth after cesarean (vbac)					
5. management of meconium stained fluids:					
a) assess presence of meconium					
b) assess baby's status - vigorous/non-vigorous					
c) suction mouth and trachea, if indicated					
d) ongoing evaluation					
6. management of maternal exhaustion by:					
a) adequate hydration					
b) nutritional support					
c) increase rest					
d) non-allopathic treatments					
e) evaluate the mother/birthing person's psychological condition					
f) monitor vital signs					
g) monitor fetal well-being					
h) evaluate urine for ketones					
i) evaluate effect of support team or visitors					
j) evaluate for consultation and/or referral					
F. recognize/consult/transport for signs of:					
1. uterine rupture					
2. uterine inversion					
3. amniotic fluid embolism					
4. stillbirth					
G. assess the condition of, and provide care for the newborn:					
1. keep baby warm					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
5. <i>Labor, Birth and Immediate Postpartum</i> G.2. make initial newborn assessment					
3. determine APGAR score at:					
a) 1 minute					
b) 5 minutes					
c) 10 minutes (as appropriate)					
4. keep baby and mother/birthing person together					
5. monitor respiratory and cardiac function by assessing:					
a) symmetry of the chest					
b) sound and rate of heart tones and respirations					
c) nasal flaring					
d) grunting					
e) chest retractions					
f) circumoral cyanosis					
g) central cyanosis					
6. stimulate newborn respiration:					
a) rub up the baby's spine					
b) encourage parental touch, and call newborn's name					
c) flick or rub the soles of the baby's feet					
d) keep baby warm					
e) rub skin with blanket					
f) apply percussion massage for wet lungs					
7. responding to the need for newborn resuscitation:					
a) administer mouth-to-mouth breaths					
b) positive pressure ventilation for 15-30 seconds					
c) administer oxygen					
d) leave cord unclamped until placenta delivers					
e) consult and transport if needed					
8. recognize and consult or transport for apparent birth defects					
9. recognizes signs and symptoms of Meconium Aspiration Syndrome and consults or refers as needed					

Form 52 - Assessment of Student's Midwifery Skills

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Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
5. Labor, Birth and Immediate Postpartum					
G.10. support family bonding					
11. immediate cord care:					
a) clamping the cord after pulsing stops					
b) cutting the cord after clamping					
c) evaluating the cord stump					
d) collecting a cord blood sample, if needed					
12. administer eye prophylaxis					
13. assess gestational age					
14. assess for central nervous system disorder					
H. Assist in placental delivery and responds to blood loss:					
1. remind mother/birthing person of the onset of third stage of labor					
2. determine signs of placental separation such as:					
a) separation gush					
b) contractions					
c) lengthening of cord					
d) urge to push					
e) rise in fundus					
3. facilitate the delivery of the placenta by:					
a) breast feeding/nipple stimulation					
b) change the mother/birthing person's position					
c) perform guarded cord traction					
d) emptying the bladder					
H.3.e) administer non-allopathic treatment					
f) encourage release verbally					
g) manual removal of placenta					
h) transport for removal of placenta					
4. after delivery, assess the condition of the placenta					
5. estimate blood loss					
6. respond to a trickle bleed by:					
a) assess origin					

Form 52 - Assessment of Student's Midwifery Skills

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Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i>					
H.6.b) assess fundal height and uterine size					
c) fundal massage					
d) assess vital signs					
e) empty bladder					
f) breastfeeding or nipple stimulation					
g) express clots					
h) non-allopathic treatments					
7. respond to a vaginal tear and bleeding with:					
a) assessment of blood color and volume					
b) direct pressure on tear					
c) suturing					
d) clamp with forceps					
8. respond to postpartum hemorrhage with:					
a) fundal massage					
b) external bimanual compression					
c) internal bimanual compression					
d) manual removal of clots					
e) administer medication					
f) non-allopathic treatments					
g) maternal focus on stopping the bleeding/tightening the uterus					
h) administer oxygen					
i) treat for shock					
j) consult and/or transfer					
k) activate medical emergency backup plan					
l) prepare to increase postpartum care					
m) administer or refer for IV fluids					
I. Assess general condition of mother/birthing person:					
1. assess for bladder distension:					
a) encourage urination for bladder distension					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i>					
1.1.b) perform catheterization for bladder distension					
2. assess lochia					
3. assess the condition of vagina, cervix and perineum for:					
a) cystocele					
b) rectocele					
c) hematoma					
d) tears, lacerations					
e) hemorrhoids					
f) bruising					
g) prolapsed cervix					
4. repair the perineum:					
a) administer a local anesthetic					
b) perform basic suturing of:					
(1) 1st degree tears					
(2) 2nd degree tears					
(3) labial tears					
c) provide alternate repair methods (non-suturing)					
5. provide instruction for care and treatment of the perineum					
6. facilitate breastfeeding by assisting and teaching about:					
a) colostrum					
b) positions for mother/birthing person and baby					
c) skin-to-skin contact					
e) maternal hydration					
f) maternal nutrition					
g) maternal rest					
h) feeding patterns					
i) maternal comfort measures for engorgement					
j) letdown reflex					
k) milk expression					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i>					
I.6.I) normal newborn urine and stool output					
J. Perform a Newborn Exam by assessing:					
1. the head for:					
a) size/circumference					
b) molding					
c) hematoma					
d) caput					
e) sutures					
f) fontanel					
2. the eyes for:					
a) jaundice					
b) pupil condition					
c) tracking					
d) spacing					
e) clarity					
f) hemorrhage					
g) discharge					
3. the ears for:					
a) positioning					
b) response to sound					
c) patency					
d) cartilage					
4. the mouth for:					
a) appearance and feel of palate					
b) lip and mouth color					
c) tongue					
d) lip cleft					
e) signs of dehydration					
5. the nose for:					
a) patency					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i> J.5.b) flaring nostrils					
6. the neck for:					
a) enlarged glands; thyroid and lymph					
b) trachea placement					
c) soft tissue swelling					
d) unusual range of motion					
7. the clavicle for:					
a) integrity					
b) symmetry					
8. the chest for:					
a) symmetry					
b) nipples					
c) breast enlargement including discharge					
d) measurement (chest circumference)					
e) count heart rate					
f) monitor heartbeat for irregularities					
g) auscultate the lungs, front and back for:					
(1) breath sounds					
(2) equal bilateral expansion					
9. the abdomen for:					
a) enlarged organs					
b) masses					
c) hernias					
d) bowel sounds					
e) rigidity					
10. the groin for:					
a) femoral pulses					
b) swollen glands					
11. the genitalia for:					
a) appearance					
b) position of urethral opening					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i>					
J.11. c) testicles for:					
(1) descent					
(2) rugae					
(3) herniation					
d) labia for:					
(1) patency					
(2) maturity of clitoris and labia					
12. the rectum for:					
a) patency					
b) meconium					
13. abduct hips for dislocation					
14. the legs for:					
a) symmetry of creases in the back of the legs					
b) equal length					
c) foot/ankle abnormality					
15. the feet for:					
a) digits, number, webbing					
b) creases					
c) abnormalities					
16. the arms for symmetry in:					
a) structure					
b) movement					
17. the hands for:					
a) number of digits, webbing					
b) finger taper					
c) palm crease					
d) length of nails					
18. the backside of baby for:					
a) symmetry of hips, range of motion					
b) condition of the spine:					
(1) dimpling					
(2) holes					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>5. Labor, Birth and Immediate Postpartum</i>					
J.18.b)(3) straightness					
19. temperature					
20. flexion of extremities and muscle tone					
21. reflexes:					
a) sucking					
b) moro					
c) Babinski					
d) plantar/palmar					
e) stepping					
f) grasping					
g) rooting					
h) blinking					
22. skin condition for:					
a) color					
b) lesions					
c) birthmarks					
d) milia					
e) vernix					
f) lanugo					
g) peeling					
h) rashes					
i) bruising					
j) Mongolian spots					
23. length of baby					
24. weight of baby					
NARM 6. The Postpartum Period					
A. Completes the birth certificate					
B. Performs postpartum reevaluation of mother/person who gave birth, and baby at:					
1. day-one to day-two					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>NARM 6. The Postpartum Period</i>					
B.2. day-three to day-four					
3. one to two weeks					
4. three to four weeks					
5. five to six weeks					
C. Assesses and provides counseling and education as needed, for:					
1. postpartum-subjective history					
2. lochia vs abnormal bleeding					
3. return of menses					
4. vital signs, digestion, elimination patterns					
5. breastfeeding, condition of breasts and nipples					
6. muscle prolapse of vagina and rectum (cystocele, rectocele)					
7. strength of pelvic floor					
8. condition of the uterus (size and involution), ovaries and cervix					
9. condition of the vulva, vagina, perineum and anus					
D. Educates regarding adverse factors affecting breastfeeding:					
1. environmental					
2. biological					
3. occupational					
4. pharmacological					
E. Provides contraceptive/family planning education and counseling					
F. Facilitate psycho-social adjustment					
G. Provides opportunity for client feedback:					
1. verbal					
2. written					
H. Knows signs and symptoms, differential diagnosis, and appropriate midwifery management or referral for:					
1. uterine infection					
2. urinary tract infection					

Form 52 - Assessment of Student's Midwifery Skills

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Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>NARM 6. The Postpartum Period</i>					
H.3. infection of vaginal tear or incision					
4. postpartum depression					
5. postpartum psychosis					
6. late postpartum bleeding/hemorrhage					
7. thrombophlebitis					
8. separation of abdominal muscles					
9. separation of symphysis pubis					
I. Assesses for, and treats jaundice by:					
1. encourage mother/person who gave birth to breastfeed every two hours					
2. expose the front and back of newborn to sunlight through window glass					
3. assess newborn lethargy and hydration					
4. consult or refer					
J. Provide direction for care of circumcised penis					
K. Provide direction for care of uncircumcised penis					
L. Treat thrush on nipples:					
1. dry nipples after nursing					
2. non-allopathic remedies					
3. allopathic treatments					
M. Treat sore nipples with:					
1. exposure to air					
2. suggest alternate nursing positions					
3. evaluate baby's sucking method					
4. apply topical agents					
5. apply expressed milk					
N. Treat mastitis by:					
1. provide immune system support including:					
a) nutrition/hydration					
b) non-allopathic remedies					
2. encourage multiple nursing positions					

Form 52 - Assessment of Student's Midwifery Skills

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Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>NARM 6. The Postpartum Period</i>					
N.3. apply herbal/non-allopathic compresses					
4. apply warmth, soaking in tub or by shower					
5. encourage adequate rest/relaxation					
6. assess for signs and symptoms of infections					
7. teach mother/person who gave birth to empty breasts at each feeding					
8. provide/teach gentle massage of sore spots					
9. consult/refer to:					
a) La Leche League					
b) lactation counselor					
c) other healthcare providers					
NARM 7. Well-Baby Care					
A. Provide well-baby care up to six weeks					
B. Instruct on newborn care including normal/abnormal newborn activity, responses, vital signs, appearance, behavior, etc.					
C. Assess the current health and appearance of baby including:					
1. temperature					
2. heart rate, rhythm and regularity					
3. respirations					
4. appropriate weight gain					
5. length					
6. measurement of circumference of head					
7. neuro-muscular response					
8. level of alertness					
9. wake/sleep cycles					
10. feeding patterns					
11. urination and stool for frequency, quantity and color					
12. appearance of skin					
13. jaundice					
14. condition of cord					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>NARM 7. Well-Baby Care</i>					
D. Instructs mother/person who gave birth in care of:					
1. diaper rash					
2. cradle cap					
3. heat rash					
E. Advises and facilitates treatment of thrush					
F. Advises and facilitates treatment for colic					
G. Recognizes signs/symptoms and differential diagnosis of:					
1. infections					
2. cardio-respiratory abnormalities					
3. glucose disorders					
4. hyperbilirubinemia					
5. birth defects					
6. failure to thrive					
7. newborn hemorrhagic disease (early and late onset)					
8. polycythemia					
H. Provide information for referral for continued well-baby care					
I. Support integration of baby into family					
J. Perform or refer for newborn metabolic screening					
K. Perform or refer for hearing screening					
MEAC and ICM Essential Competencies					
In addition to the NARM Skills List, National Midwifery Institute graduation requirements include the following areas of evaluation. These <i>Professional Behaviors</i> are specifically identified by MEAC and are drawn from the International Confederation of Midwives <i>Essential Competencies</i> . Evaluate these abilities with the same 1-4 scoring rubric used above.					
<i>Professional Behaviors</i>					
1. The midwife (student) is responsible and accountable for clinical decisions and actions.					
<i>Continued on next page</i>					

Form 52 - Assessment of Student's Midwifery Skills

Preceptor completes after every five Preceptor-Supervised Student-Primary Births.

Skill or Ability Evaluated	SPC Births 1-5	SPC Births 6-10	SPC Births 11-15	SPC Births 16-20	When a skill receives a 4, Preceptor signs this box.
<i>MEAC and ICM Essential Competencies</i>					
<i>Professional Behaviors</i>					
2. The midwife (student) acts consistently in accordance with professional ethics, values and human rights as defined by national and local professional midwifery organizations.					
3. The midwife (student) behaves in a courteous, non-judgmental, non-discriminatory, and culturally appropriate manner with all clients.					
4. The midwife (student) is respectful of individuals and of their culture and customs, regardless of socioeconomic status, race, ethnic origin, sexual orientation, gender, physical ability, cognitive ability, or religious belief.					
5. The midwife (student) uses shared decision-making in partnership with women/pregnant people and their families; enables and supports them in making informed choices about their health, including the need or desire for referral or transfer to other health care providers or facilities for continued care when health care needs exceed the abilities of the midwife provider and their right to refuse testing and intervention.					
6. The midwife (student) follows appropriate protocol and etiquette for transport/transfer of care of the mother/birthing person or newborn from home or birth center to the hospital during pregnancy, in labor, or postpartum.					

Preceptor's Affirmation of Honest Intent of Representation

I, _____, do hereby acknowledge that honesty in relationship to the student midwives I precept is of utmost importance. I affirm that I, to the best of my ability and professional integrity, have represented my evaluation of this student's practice, knowledge, skills, experience and expertise honestly and fairly.
I affirm that this document has been completed honestly.

Preceptor's Signature: _____ Date: _____