



Expectations of Student Participation and Preceptor Supervision

Preceptors are responsible for all aspects of care including when a student is involved in providing such care.

Students are expected to work within the midwifery scope of care at all times. The only exceptions to this are in MIDW 350, 370 & 380, where students may be taught skills in placements that are outside the Midwifery scope, by interprofessional colleagues. Students may engage in skills that are outside the midwifery scope if they are under direct supervision of a preceptor qualified to perform those skills.

The preceptor must participate in all or part of every clinical encounter in **MIDW 200 to MIDW 420**.

- The preceptor will decide the portion of the prenatal encounter in which a preceptor should be present in the room. The preceptor's decision is based on the clinical course the student is registered in and the preceptor's assessment of the student's level of competence, skill, and knowledge.
- The preceptor will be on-site and immediately available* during all antenatal, postpartum and intrapartum client encounters (with the exceptions of limited postpartum home visits as outlined below and in 3rd and 4th year course syllabi). Students and preceptors should arrange timing of travel to client homes to ensure preceptor presence for all aspects of care.
- In the rare event where a student arrives at the client's home prior to the preceptor, and the client requires medical attention, the student should contact the preceptor for guidance (or emergency services as needed), remain with the client and assist them as needed. Students would be protected under the [Good Samaritan Act](#) in this case. They should NOT provide any non-mandatory clinical care under these circumstances.
- 2nd Attendant: Students in MIDW 200 through 420 may only act in this role under the supervision of a 2nd midwife or Registered Nurse.
- **No student shall provide clinical care in hospital without the onsite presence of a designated supervising member of the medical/midwifery/nursing staff. The care provided by the student must fall within the scope of the immediately available, supervising staff member.**

"Onsite and immediately available" means:

Clinic visits

Preceptors must be onsite and available within a few minutes, for any care provided by students in clinic. The degree to which they must be directly supervised (e.g. preceptor in the room, vs. preceptor onsite but available within a few minutes) will vary dependent on the level of student, and the acuity of the care (i.e. stage of labour or risk level of case).

Home visits

It is expected that second year midwifery students will not conduct a clinical encounter in the client's home without a preceptor present. Third and fourth year students may provide midwifery care for home visits in the absence of a preceptor in **limited and prescribed situations** of postpartum care. See "Students attending home visits without a preceptor present," below.

In situations where a student arrives at the client's home before the midwife, it may be appropriate for the student to enter the client's home and visit socially (as long as they do not initiate care or assessments until the preceptor arrives). In order to ensure that the time a student is waiting for the preceptor is minimal, we recommend clear communication regarding:

- Time of the visit,
- Real-time communication to coordinate arrival times, and
- Change of plans, such as postponing or canceling home visits.

In hospital

Midwifery students do not have privileges at hospitals. They must be supervised by a regulated health care provider with privileges at the hospital, for any care they provide in hospital. The degree to which they must be directly supervised (e.g. preceptor in the room, vs. preceptor onsite but available within a few minutes) will vary dependent on the level of student, and the acuity of the care (i.e. stage of labour or risk level of case).

Students are not permitted to provide any care in hospital without a preceptor present.

It is expected that students in midwifery placements will have a midwifery preceptor present or immediately available to them at all times. Preceptors are encouraged to give Clerks space to perform care management independently, and this may call for the preceptor to leave the room at times. In these cases, the preceptor must remain onsite and able to attend within a few minutes.

In a case where the designated preceptor is not able to attend for a short period of time, it is the preceptor's responsibility to communicate with an appropriate health care provider (e.g. RN or MD) to ensure they accept supervision responsibility. In this case, the student may only provide care to the level of the supervising individual.

Students receiving calls and pages directly from clients

Starting in MIDW 240, students will communicate directly with clients, responding to client-initiated contact (pages, texts, and emails) with preceptor support. By the end of the second year, students should be developing competency in these forms of communication. Responding to client-initiated communication is an integral part of the student role in **MIDW 320 and 322, MIDW 420, and Clerkship (MIDW 440)**.

We require all students to notify their preceptor immediately after each encounter and document the encounter in the health record as soon as possible.

For reasons related to both professional liability and effective teaching, each practice group should develop clear guidelines that outline the procedure for students responding to client-initiated encounters, and define the roles and responsibilities of student and preceptor.

Students should not be responsible for any emergency situation and should have clear direction from the on-call midwife about how to respond if there is an emergency communication from a client that takes into account the student's level in the program.

Practice groups should consider the following when creating practice guidelines for students receiving calls directly from clients:

- Have an informed choice discussion with clients regarding the student's involvement in receiving and responding to calls and pages.
- Develop instructions for clients about how and when to contact the student and/or the midwife, including when the client believes the situation is an emergency and how to redirect such calls.
- Provide supervision and follow-up for calls and pages the student receives from clients, including which midwife is responsible when the designated preceptor is off-call.
- Instruct the student how and when to redirect pages or phone messages as well as whom clients must contact when the student is off-call.
- Arrange how and when the preceptor will keep the student informed of client interaction that occurs directly with the preceptor.

Students attending home visits without a preceptor present

Students may provide midwifery care for home visits in the absence of a preceptor in **limited and prescribed situations** of postpartum care, as follows:

- MIDW 320 and 322: A student may attend 1 postpartum home visit per client without a midwife on-site provided that the visit is not within the first three postpartum days and is not the final discharge visit.
- MIDW 420: A student may attend 2 postpartum home visits per client without a midwife on-site, provided that the visits are not within the 1st three days and it is not the final discharge visit.
- MIDW 440: A student in Clerkship may attend 3 postpartum home visits without a midwife on-site provided that the visit is not the 1st visit after the birth and it is not the final discharge visit.

In the above situations, the preceptor and the student must plan in advance the care the student can complete on their own. The preceptor should be available to attend the visit in the event that the student identifies a problem. **Preceptors should inform clients that third and fourth year students are able to attend postpartum home visits without a preceptor if circumstances are appropriate.**

The preceptor must be aware of and available to a student attending a home visit. Students must report promptly to the supervising midwife before and after the unaccompanied visits and ensure the encounter is documented appropriately in the health record as soon as possible.

Students in Clerkship (MIDW 440)

The Clerkship is the final opportunity for students to integrate theory and practice before comprehensive examinations and the Canadian Midwifery Registration Exam (CMRE). Clerkship offers midwifery students the opportunity to provide primary care under the supervision of a preceptor who facilitates the role of the clerk within the bounds of safe care, as is acceptable to the client. Both clinical experiences and opportunities for review of basic and advanced course materials are necessary to prepare for safe entry-level practice.

The clerk must balance academic and clinical demands throughout the placement.

- The clerk will cover most of the clinic and call schedule of one full-time midwife, with scheduled time off as per the *Scheduling Within Placement Policy*.
- The clerk should provide approximately 30-35 hours per week of actual clinical work and should attend an average of 15 clinical appointments per week throughout the placement.
- Students in MIDW 440 may act as the sole 2nd attendant at births. MIDW 440 students may not be the sole 2nd attendant where the primary midwife is a new registrant as per the BCCNM's [Policy for Second Birth Attendants](#).

Prenatal Care in Clerkship

Providing care to clients in all stages of pregnancy will help the student to maintain and demonstrate their competency in the knowledge and range of skills required for midwifery practice.

Clerkship students are expected to undertake prenatal appointments on their own with clients; however, a midwife must be on site and immediately available for consultation. The midwife/preceptor should review and sign-off on the chart before the client leaves the clinic in case they need to intervene and/or something has been overlooked. For prenatal home visits, the clerk may do the visit prior to the midwife's arrival, but the midwife/preceptor must review and sign-off on the chart at the client's home on the same day.

Intrapartum Care in Clerkship

Clerkship students should plan to attend 10 - 12 births as a primary caregiver and an additional 2-3 births as a 2nd attendant, if this has not been completed in MIDW 420.

A Registered Midwife is legally responsible for all care provided by a clerk.

A preceptor should be on-site whenever a clerkship student is present for active labour. The clerk may provide intrapartum care by themselves, however there must be a preceptor on the premises, immediately available, and receives regular reports from the clerk.

Clerkship students are expected to have solid hands-on experience, except in situations requiring new skills. In such situations, the preceptor will provide guidance to the student.

Clerkship students can also benefit from latent phase management experiences. Students may independently observe, assess, and provide supportive care during latent phase labour over the course of the Clerkship, under the following conditions:

- The midwife has confirmed the status of labour either by phone or in person.
- Both the midwife and student agree the clinical situation is appropriate for clerk management.
- The midwife engages the student in creating a specific plan for latent phase support and management.
- The midwife and student make a plan for ongoing communication for each case.
- The midwife is available to return to the site upon request, change in maternal-fetal status, and/or upon onset of active labour.
- Distance or weather should not delay the midwife's ability to be available on site within 15-20 minutes.

Students in MIDW 440 may act as the sole 2nd attendant at births, provided the Primary Midwife in attendance is not a New Registrant.