Assessment, screening, planning, care and support across the continuum: shared skills for Domains 3 and 4

Reference: PFN Last Updated: 29/10/2026

6.14promote the woman's confidence in her own body, health and wellbeing, and in her own ability to be pregnant, give birth, build a relationship, and nurture, feed, love, and respond to her newborn infant

6.15when assessing, planning, and providing care include the woman's own self-assessment and assessment of her newborn infant's health and wellbeing, and her own ability and confidence in regard to self-care and care for her newborn infant

6.16respond to any questions and concerns, and recognise the woman's own expertise of her own pre-existing conditions

6.17demonstrate the ability to involve women in assessment, planning and evaluating their care

6.18apply in-depth knowledge of anatomy, physiology, genetics, genomics, epigenetics and psychology to inform the assessment, planning and provision of care for the woman and newborn infant across the continuum

6.19assess, plan and provide care that promotes and protects physical, psychological, social, cultural, and spiritual safety for all women and newborn infants, including any need for safeguarding, recognising the diversity of individual circumstances

6.20demonstrate the ability to conduct a holistic assessment of physical, psychological, social, cultural, and spiritual health and wellbeing for the woman and the newborn infant, across the continuum

6.21assess, plan and provide care that optimises the normal physiological processes of reproduction and early life, working to promote positive outcomes, health and wellbeing, and to anticipate and prevent complications

6.22provide evidence-based information on all aspects of health and wellbeing of the woman and newborn infant to enable informed decision-making by the woman, and partner and family as appropriate

6.23use evidence-based information to enable women, their partners and families to make individualised care choices and decisions about screening and diagnostic tests

6.24demonstrate the ability to discuss findings of tests, observations and assessments with the woman, partner/companion and family as appropriate

6.25assess the environment to maximise safety, privacy, dignity, and wellbeing, optimise normal physiological processes, and provide a welcoming environment for the woman, partner/companion, and family; and to create the conditions needed for the birth and subsequent care to be as gentle as possible for the newborn infant

6.26identify opportunities to offer support and positive feedback to the woman

6.27recognise and respond to signs of all forms of abuse and exploitation, and need for safeguarding

6.28use skills of infection prevention and control, following local and national policies and protocols

6.29engage women, partners, and families in understanding and applying principles of infection control and antimicrobial stewardship

6.30demonstrate the ability to measure and record vital signs for the woman and newborn infant, using technological aids where appropriate, and implement appropriate responses and decisions

6.31undertake abdominal examination and palpation of the woman appropriately across all stages of the continuum

6.32undertake auscultation of the fetal heart, using Pinard stethoscope and technical devices as appropriate including cardiotocograph (CTG), accurately interpreting and recording all findings including fetal heart patterns

6.33recognise normal vaginal loss and deviations from normal, across the continuum

6.34undertake vaginal examination with the woman's consent

6.35undertake venepuncture and cannulation and blood sampling, and interpret appropriate blood tests

6.36assess, plan and provide care that optimises the woman's hygiene needs and skin integrity

6.37recognise and respond to oedema, varicosities, and signs of thromboembolism

6.38support the woman when nausea and vomiting occur, recognising deviations from normal physiological processes

6.39assess, plan and provide care that optimises the woman's nutrition and hydration

6.40assess, plan and provide care that optimises the woman's bladder and bowel function and health across the continuum

6.41assess, plan and provide care and support in regard to the woman's experience of and response to pain and her need for pain management, using evidence-based techniques including comfort measures, non-pharmacological and pharmacological methods

6.42demonstrate the ability to recognise and respond to deviations from normal physiological processes, and unsafe psychological, social, cultural and spiritual situations for the woman and the newborn infant

6.43demonstrate the ability to avoid and minimise trauma

6.44demonstrate the ability to consult, collaborate with, and refer to, interdisciplinary and multiagency colleagues as appropriate

6.45act as an advocate when care involves the interdisciplinary and multiagency team, to ensure that care continues to focus on the needs, views, preferences and decisions of women, and the needs of newborn infants

6.46assess, promote, and encourage the development of the mother-newborn infant relationship, and opportunities for attachment, contact, interaction, and relationship building between the woman, newborn infant, partner and family

6.47enable immediate, uninterrupted, and ongoing safe skin-to-skin contact between the mother and the newborn infant, and positive time for the partner and family to be with the newborn infant and each other, preventing unnecessary interruptions

6.48observe, assess, and promote the woman's, and partner's (as appropriate), immediate response to the newborn infant, and their ability to keep the newborn infant close and be responsive to the newborn infant's cues for love, comfort and feeding (reciprocity)

6.49provide information about and promote access to community-based facilities and resources as needed.