



# MDWF12003 *Midwifery Practice 1*

## Term 1 - 2017

Profile information current as at 08/05/2024 11:43 pm

All details in this unit profile for MDWF12003 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

### Corrections

#### Unit Profile Correction added on 28-03-17

Please delete the information in the unit schedule section under:

week 6 stating: Assessment 2 written essay due date 21st of April 2017

review/exam week stating: Assessment One reflective journal/portfolio due date of June 2017

## General Information

### Overview

This clinical placement unit is the first of four that provides you with midwifery clinical experience. The focus of this unit is on the role of the midwife in promoting and facilitating normal processes of the childbearing continuum utilising the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'. You will be involved in the provision of care of the woman and her family throughout pregnancy, birth and the postnatal period. The practical application of different models of care will be explored with an emphasis on best practice. This unit is to be studied in conjunction with Foundations of Midwifery 1.

### Details

Career Level: *Undergraduate*

Unit Level: *Level 2*

Credit Points: *12*

Student Contribution Band: *7*

Fraction of Full-Time Student Load: *0.25*

### Pre-requisites or Co-requisites

Co-reqs MDWF12002 Foundations of Midwifery 1

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the [Assessment Policy and Procedure \(Higher Education Coursework\)](#).

### Offerings For Term 1 - 2017

- Distance

### Attendance Requirements

All on-campus students are expected to attend scheduled classes – in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

### Residential Schools

This unit has a Compulsory Residential School for distance mode students and the details are:  
Click here to see your [Residential School Timetable](#).

### Website

[This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.](#)

## Class and Assessment Overview

### Recommended Student Time Commitment

Each 12-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 25 hours of study per week, making a total of 300 hours for the unit.

### Class Timetable

#### [Regional Campuses](#)

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

#### [Metropolitan Campuses](#)

Adelaide, Brisbane, Melbourne, Perth, Sydney

### Assessment Overview

#### 1. **Portfolio**

Weighting: 40%

#### 2. **Written Assessment**

Weighting: 60%

#### 3. **Professional Practice Placement**

Weighting: Pass/Fail

### Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the [University's Grades and Results Policy](#) for more details of interim results and final grades.

## CQUniversity Policies

**All University policies are available on the [CQUniversity Policy site](#).**

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure – Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure – International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback – Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the [CQUniversity Policy site](#).

## Unit Learning Outcomes

### On successful completion of this unit, you will be able to:

1. Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.
2. Demonstrate beginning midwifery practice skills related to assessment of women and the neonate across the continuum of normal childbearing using the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'.
3. Reflect on clinical learning related to your continuity of care experiences to enhance practice.
4. Demonstrate midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) requirements.

### NMBA domain and competencies

#### Domain - Legal and professional practice

- o Competency 1 Functions in accordance with legislation and common law affecting midwifery practice.
- o Competency 2 Accepts accountability and responsibility for own actions within midwifery practice.

#### Domain - Midwifery knowledge and practice

- o Competency 3 Communicates information to facilitate decision making by the woman.
- o Competency 4 Promotes safe and effective midwifery care.
- o Competency 5 Assesses, plans, provides and evaluates safe and effective midwifery care.
- o Competency 6 Assesses plans, provides and evaluates safe and effective midwifery care for the woman and/or baby with complex needs.

#### Domain - Midwifery as primary health care

- o Competency 7 Advocates to protect the rights of women, families and communities in relation to maternity care.
- o Competency 8 Develops effective strategies to implement and support collaborative midwifery practice.
- o Competency 9 Actively supports midwifery as a public health strategy.
- o Competency 10 Ensures midwifery practice is culturally safe.

#### Domain - Reflective and ethical practice

- o Competency 11 Bases midwifery practice on ethical decision making.
- o Competency 12 Identifies personal beliefs and develops these in ways that enhance midwifery practice.
- o Competency 13 Acts to enhance the professional development of self and others.
- o Competency 14 Uses research to inform midwifery practice.

## Alignment of Learning Outcomes, Assessment and Graduate Attributes



### Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes			
	1	2	3	4
<b>1 - Portfolio - 40%</b>	•	•	•	
<b>2 - Written Assessment - 60%</b>	•	•	•	
<b>3 - Professional Practice Placement - 0%</b>	•	•	•	•

### Alignment of Graduate Attributes to Learning Outcomes

Graduate Attributes	Learning Outcomes			
	1	2	3	4
1 - Communication	•	•	•	•
2 - Problem Solving	•	•		•
3 - Critical Thinking	•	•	•	•
4 - Information Literacy	•	•	•	•
5 - Team Work	•	•		•
6 - Information Technology Competence				
7 - Cross Cultural Competence	•	•	•	•
8 - Ethical practice	•	•	•	•
9 - Social Innovation				
10 - Aboriginal and Torres Strait Islander Cultures				

### Alignment of Assessment Tasks to Graduate Attributes

Assessment Tasks	Graduate Attributes									
	1	2	3	4	5	6	7	8	9	10
1 - Portfolio - 40%	•	•	•	•	•		•	•		
2 - Written Assessment - 60%	•	•	•	•	•		•	•		
3 - Professional Practice Placement - 0%	•	•	•	•	•		•	•		

## Textbooks and Resources

### Textbooks

MDWF12003

#### Prescribed

##### **Myles Textbook for Midwives**

Edition: 16th (2014)

Authors: Marshall, J & Raynor, M

Churchill Livingstone

London, England

ISBN: 9780702051456

Binding: Paperback

[View textbooks at the CQUniversity Bookshop](#)

### IT Resources

**You will need access to the following IT resources:**

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

## Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 6th Edition \(APA 6th edition\)](#)

For further information, see the Assessment Tasks.

## Teaching Contacts

**Bridget Ferguson** Unit Coordinator

[b.ferguson@cqu.edu.au](mailto:b.ferguson@cqu.edu.au)

## Schedule

### Week 1 - 06 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
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This clinical placement course is the first of four that provides you with midwifery clinical experience. The focus of this course is on the role of the midwife in promoting and facilitating normal processes of the childbearing continuum utilizing the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'. A link to the guidelines is provided below. You will be involved in the provision of care of the woman and her family throughout pregnancy, birth and the postnatal period. The practical application of different models of care will be explored with an emphasis on best practice. This course is to be studied in conjunction with Foundations of Midwifery 1.

Australian College of Midwives  
Guidelines for Consultation and Referral.

Nursing and Midwifery Board of Australia: Code of Conduct, Ethics and Professional Standards for Midwives.

Queensland Health State Wide maternal and Neonatal Clinical Guidelines

CQ University Midwifery Student Clinical Placement Logbook

Commence Clinical Placement: Assessment Three.

#### Week 2 - 13 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

#### Week 3 - 20 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

#### Week 4 - 27 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

#### Week 5 - 03 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

#### Vacation Week - 10 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

#### Week 6 - 17 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement Assessment Two: Written Essay due date 21st of April 2017.

#### Week 7 - 24 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic

Ongoing clinical placement

### Week 8 - 01 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

### Week 9 - 08 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

**Written Assessment** Due: Week 9  
Friday (12 May 2017) 11:45 pm AEST

### Week 10 - 15 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

### Week 11 - 22 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

### Week 12 - 29 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement

**Portfolio** Due: Week 12 Friday (2 June 2017) 11:45 pm AEST

### Review/Exam Week - 05 Jun 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement Assessment One: Reflective Journal/Portfolio due date 9th of June 2017.

### Exam Week - 12 Jun 2017

Module/Topic	Chapter	Events and Submissions/Topic
		Assessment Three: Clinical practice due by Friday the 16th of June.

**Placement** Due: Exam Week Friday  
(16 June 2017) 11:45 pm AEST

## Assessment Tasks

### 1 Portfolio

#### Assessment Type

Portfolio

#### Task Description

Reflective practice is listed as one of the key domains that make up the *National Competency Standards for the Midwife*. It is through reflective processes that both students and registered midwives can identify and explore diverse values, beliefs, learning needs and sociocultural structures. To facilitate your reflective skill development you are required to complete a reflective piece of writing for each of the three (3) recruited 'continuity of care experience' women you are working with.

#### **Overview of Reflective Journal Writing:**

A reflective journal is a way of thinking in a critical and analytical way about your clinical experience. It involves looking at a situation, assessing what you have learnt from it, what you could have done differently, realising new approaches to your care and ultimately, how you felt about the whole experience. As a



student midwife it shows how different aspects of your work interconnect and can be very useful for identifying gaps in knowledge and ethical dilemmas or situations that need further thought. Understanding your feelings is a vital skill for reflective writing, and studying midwifery involves being exposed to a lot of new situations - doing your first antenatal booking; helping a woman with breastfeeding support; witnessing a birth - which can bring new reactions to the surface. It's important to comprehend what you feel, why you feel that way and to then learn from it, as failing to reflect can lead to poor insight and therefore poor performance in practice (Hays & Gay, 2011).

\*Reflective writing is more personal than other kinds of academic writing and is an **exploration of events not just a description of them.**

**Reflective Journal Requirements:**

(Refer to the provided Reflective Journal Template and the Two Reflective Journal examples)

**How to structure reflective writing**

It can be useful to use a reflective model, or series of questions, which will help you look at the whole event from many different angles (Macdonald, 2011; Driscoll, 1994; Benner, 1984). The Driscoll model has a very simple 'what', 'so what' and 'now what' model, which is easy to remember and write up. There are three common reflective writing models that you may choose to follow when writing reflectively: Van Manen, Gibbs and Durgahee (Giminez, 2011). The models all involve thinking systematically about the phases of an activity, using headings including: description, feelings, evaluation, analysis, conclusion and action plan. These theoretical frameworks provide a starting point for the critical skills that all student midwives should develop by the end of their educational program.

**Example:**

1. *Description:* (don't make this too long - refer to the provided template)

What is it? What happened? Why am I talking about it?

2. *Interpretation:* What is important and relevant? Look through your description and try to find words or phrases that require further exploration. Include the rationale for what was done or why it was done. Where there is controversy about what was done or found, provide the rationale and sources of evidence for both sides of the argument. How can it be explored and explained using contemporary theories.

3. *Outcome:* What have I learned from this? How will it influence my future work?

**Above all, enjoy writing the journal - it is about you and your reflection and your development as a clinical midwife!**

**Assessment Due Date**

Week 12 Friday (2 June 2017) 11:45 pm AEST

**Return Date to Students**

Exam Week Friday (16 June 2017)

Approximately 3 week after submission

**Weighting**

40%

**Assessment Criteria**

MDWF 12003- Midwifery Practice One - Assessment Criteria Sheet - Assessment One - Portfolio

Student Name:

HD	D	C	P	F
<b>Structure (10%)</b>				
Excellent presentation of portfolio. Reflective journals set out as per template. Consistently accurate with spelling, grammar and paragraph structure. (10%)	Well-presented portfolio, Reflective journals set out as per template. 1 or 2 errors spelling, grammar and paragraph structure.	Well-presented portfolio. Reflective journals set out as per provided template. 3 or 4 consistent errors with spelling, grammar and paragraph structure.	Well-presented portfolio, reflective journals set out per provided template. 2 or 3 inconsistent errors with spelling, grammar and paragraph structure	Poorly presented journal. Provided template not utilised. Many inaccuracies with spelling, grammar and paragraph structure (> 5 errors).

**Approach & Argument (90%)** As per template.

Comprehensive critical and analytical reflective journals that explore and identify gaps in knowledge. Each reflective journal provides - A description - An Interpretation - An outcome - what was learnt (45 %) (Learning Outcome 1-4)	Insightful and well-developed reflective journals that explore and identifies gaps in knowledge. Each reflective journal provides - A description - An Interpretation - An outcome - what was learnt	Provides logical and broadly reflective journals that explore and identifies gaps in knowledge. Each reflective journal provides - A description - An Interpretation - An outcome - what was learnt	Disjointed reflective journals that explores and identify some gaps in knowledge. Each reflective journal provides some of the following: - A description - An Interpretation - An outcome - what was learnt	Inadequate reflective journals that do not explore or identify gaps in knowledge. The following have not been included: - A description - An Interpretation - An outcome - what was learnt
3 Comprehensive reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits (45%) (Learning Outcome 1 - 4)	3 Well-developed reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits	3 reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits	3 disjointed reflective journals that include some of the following: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits	3 or less inadequate reflective journals that have not met the minimum requirements of: - 4 antenatal visits - +/- the labour (Intrapartum Visits) - 2 postnatal visits

This assignment is worth **40 %** of the total assessment for this subject. **/100**

### Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

### Submission

Online

### Submission Instructions

Upload via the Bachelor of Midwifery Moodle page

### Learning Outcomes Assessed

- Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.
- Demonstrate beginning midwifery practice skills related to assessment of women and the neonate across the continuum of normal childbearing using the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'.
- Reflect on clinical learning related to your continuity of care experiences to enhance practice.

### Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Cross Cultural Competence
- Ethical practice

## 2 Written Assessment

### Assessment Type

Written Assessment

### Task Description

### Task Description

3000 word (+ or - 10%) essay on the topic of :

*'The Baby Friendly Health Initiative' and how continuity midwifery care supports and promotes the breastfeeding relationship.*

· The Baby Friendly Health Initiative (BFHI) is a global strategy that was launched in 1991 by the United Nations Children's Fund (UNICEF) and the World Health Organisation (WHO) to ensure that all maternity units become centres of breastfeeding

support. The aim is to implement practices that protect, promote and support breastfeeding.

· Continuity models of midwifery care provide women with a known midwife. Women who have the same midwife caring for them throughout pregnancy, birth and postnatal stages have the opportunity to develop trusting relationships resulting in increased confidence and healthy outcomes with multiple benefits.

Using a midwifery perspective you are required to:

**Discuss** the 'Baby Friendly Health Initiative' in particular the aims of the initiative, and its recommendations. Consider and discuss how the *known* 'continuity of care' midwife is best placed to support those aims whilst promoting and supporting the breastfeeding relationship.

**Analyse** the importance of breastfeeding and its benefits to the mother, baby and society in general. Consider and discuss the benefits of midwifery led continuity of care models on the support and promotion of breastfeeding.

**Outline** how the midwife can help support women beyond the postnatal period, to maintain breastfeeding upon their returning to work.

**Assessment Due Date**

Week 9 Friday (12 May 2017) 11:45 pm AEST

**Return Date to Students**

Week 12 Friday (2 June 2017)

Approximately three weeks after submission

**Weighting**

60%

**Assessment Criteria**

MDWF 12003 Midwifery Practice One- Assessment Criteria Sheet - Assessment Two-  
Written Assessment

Student Name:

HD	D	C	P	F
<b>Structure (15%)</b>				
Clear and succinct introduction that introduces the topic and outlines the direction of the paper. (5%)	Clear and appropriate introduction that introduces the topic and outlines the direction of the paper	Appropriate introduction that introduces the topic and outlines the direction of the paper	Introduction is apparent and the topic is introduced but there is not clear direction to the paper	No recognisable introduction-the topic is not introduced and/or there is no direction of the paper
Clear and succinct conclusion that outlines the main points and brings the argument to a logical close. (5%)	Clear and appropriate conclusion that outlines the main points and brings the argument to a close	Conclusion outlines most of the main points and brings some sense of closure	Conclusion apparent and outlines most of the main points and endeavours to bring the argument to a close-there may be some incongruity	No recognisable conclusion-little reference to the main points and no clear conclusion to the paper

Excellent presentation of assignment, double spaced with 12 point font. Consistently accurate with spelling, grammar and paragraph structure. (5%)

Well-presented assignment, double spaced with 12 point font. 1 or 2 errors spelling, grammar and paragraph structure.

Well-presented assignment, double spaced with 12 point font. 3 or 4 consistent errors with spelling, grammar and paragraph structure.

Well-presented assignment, double spaced with 12 point font. 3 or 4 inconsistent errors with spelling, grammar and paragraph structure

Poorly presented assignment. Double spacing not used. 12 point font not used. Many inaccuracies with spelling, grammar and paragraph structure. (> 5 errors).

### Approach & Argument (75%)

Content is clearly relevant to the topic, the approach comprehensively answers the question and the argument proceeds logically and is within the set word limit. (15%)

Content is relevant to the topic, the approach clearly answers the question and the argument proceeds logically and is within the set word limit

Content is appropriate and answers the question and the argument for the most part proceeds logically and is within the set word limit

Content answers the question the argument is at times repetitive or lacks cohesion and is within the set word limit with a 10% allowance (under or over the set limit)

Content is irrelevant and or does not answer the question and the argument lacks cohesion. The word limit has not been adhered to, the word limit is well over or under the 10% allowance

An articulate and comprehensive analysis and discussion which makes clear the benefits of breastfeeding, the aims and initiatives of the BFHI and the benefits of continuity midwifery models of care to the breastfeeding relationship. (35%) (Learning Outcome 2, 3 & 4)

Insightful and well-developed analysis and discussion which links the benefits of breastfeeding, the aims and initiatives of the BFHI and the benefits of continuity midwifery models of care to the breastfeeding relationship.

A logical discussion that demonstrates competent knowledge in the benefits of breastfeeding, the aims and initiatives of the BFHI and the benefits of continuity midwifery models of care to the breastfeeding relationship. .

A disjointed discussion that demonstrates a limited knowledge of the benefits of breastfeeding, the aims and initiatives of the BFHI and the benefits of continuity midwifery models of care to the breastfeeding relationship.

An inadequate discussion which demonstrates a poor knowledge of the benefits of breastfeeding, the aims and initiatives of the BFHI and the benefits of continuity midwifery models of care to the breastfeeding relationship.

Comprehensive discussion that critically explores the role of the known midwife in providing breastfeeding education and support to the mother and how continuity midwifery care promotes the aims of the BHFI to support the breastfeeding relationship. (15%) (Learning Outcome 1 & 4 )	Well-developed analysis and discussion that explores the role of the known midwife in providing breastfeeding education and support to the mother and how continuity midwifery care promotes the aims of the BHFI to support the breastfeeding relationship	Broad discussion that explores the role of the known midwife in providing breastfeeding education and support to the mother and how continuity midwifery care promotes the aims of the BHFI to support the breastfeeding relationship	Minimal analysis and disjointed discussion explores the role of the known midwife in providing breastfeeding education and support to the mother and how continuity midwifery care promotes the aims of the BHFI to support the breastfeeding relationship	Inadequate analysis and discussion (which at time is repetitive) that explores the role of the known midwife in providing breastfeeding education and support to the mother and how continuity midwifery care promotes the aims of the BHFI to support the
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Clear, coherent discussion that critically explores how the midwife can help support women to maintain breastfeeding when they are returning to work. (10%) (Learning Outcome 1 & 2 )	A clear and relevant discussion that explores how the midwife can help support women to maintain breastfeeding when they are returning to work.	A logical discussion which broadly explores how the midwife can help support women to maintain breastfeeding when they are returning to work.	Satisfactory exploration that shows a limited discussion that can be repetitive at times regarding how the midwife can help support women to maintain breastfeeding when they are returning to work.	Poor understanding of the topic. Content does not explore how the midwife can help support women to maintain breastfeeding when they are returning to work.
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**Referencing (10%)**

Consistently integrates up-to-date references to support and reflect all ideas, factual information and quotations. (5%)	Generally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 1 or 2 exceptions	Frequently integrates up-to-date references to support and reflect ideas, factual information and quotations, with 3 or 4 exceptions	Occasionally integrates up-to-date references to support and reflect ideas, factual information and quotations, with 5 or 6 exceptions	Fails to or infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas, factual information and quotations
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Consistently accurate with referencing. A minimum of 10 references used including 7 journal articles and relevant web-sites. (5%)	1 or 2 consistent referencing errors identified. A minimum of 10 references used including 6 journal articles and relevant web-sites.	3 or 4 consistent referencing errors identified. A minimum of 10 references used including 5 journal articles and relevant web-sites.	3 or 4 inconsistent referencing errors identified. A minimum of 10 references used including 4 journal articles and relevant web-sites.	Many inaccuracies with referencing (>5). Less than 10 references used. Less than 4 journal articles not sourced. Relevant web-sites not included.
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This assignment is worth **60%** of the total assessment for this subject.

### Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

### Submission

Online

### Submission Instructions

Upload via the Bachelor of Midwifery Moodle page

### Learning Outcomes Assessed

- Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.
- Demonstrate beginning midwifery practice skills related to assessment of women and the neonate across the continuum of normal childbearing using the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'.
- Reflect on clinical learning related to your continuity of care experiences to enhance practice.

### Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Cross Cultural Competence
- Ethical practice

## 3 Placement

### Assessment Type

Professional Practice Placement

### Task Description

Minimal clinical practice experience of 224 hours is required by completion of this course. This clinical experience will allow you to consolidate knowledge and skills acquired throughout the term and enable you to draw distinction in your scope of practice between normal and complex midwifery care. You are required to meet the clinical requirements listed below and these requirements need to be documented within your Student Clinical Experience Record Book.

You are expected to work towards minimal clinical requirements and they include:

1. Recruit three (3) 'Continuity of Care' (CoC) experience women, with whom you will be expected to complete 10 to 20 hours with each woman, and add this to your reflective journals, that can be found on the Bachelor of Midwifery Meta page. Further instructions will be given to you during residential school.
2. Competency Performance Assessment
3. Complete 224 hours of clinical practice experience

The required clinical experience will be reviewed by the midwifery educator/manager in conjunction with the course coordinator.

**Assessment Due Date**

Exam Week Friday (16 June 2017) 11:45 pm AEST

**Return Date to Students**

Approximately three weeks after submission

**Weighting**

Pass/Fail

**Assessment Criteria**

See your clinical log book. Completion of 224 hours and the recruitment of 3 Continuity of Care women is required to meet this assessment.

**Referencing Style**

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

**Submission**

Offline

**Submission Instructions**

Scan and email the signature pages as evidence of your completed clinical hours to your unit coordinators

**Learning Outcomes Assessed**

- Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.
- Demonstrate beginning midwifery practice skills related to assessment of women and the neonate across the continuum of normal childbearing using the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'.
- Reflect on clinical learning related to your continuity of care experiences to enhance practice.
- Demonstrate midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) requirements.

**Graduate Attributes**

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Cross Cultural Competence
- Ethical practice

## Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the [Student Academic Integrity Policy and Procedure](#). This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

### What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

### Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

### Where can I get assistance?

For academic advice and guidance, the [Academic Learning Centre \(ALC\)](#) can support you in becoming confident in completing assessments with integrity and of high standard.

### What can you do to act with integrity?



#### Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



#### Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



#### Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem