



MDWF12003 Midwifery Practice 1

Term 1 - 2020

Profile information current as at 21/05/2024 02:40 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.

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 - 2020

- Mixed Mode

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](#).

Previous Student Feedback

Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

Feedback from Unit Evaluation

Feedback

Great support from unit co-ordinator. Quick return on assessment tasks with detailed feedback that helped me to improve my practice

Recommendation

To continue to provide prompt and meaningful feedback to students.

Feedback from Unit Evaluation

Feedback

Very knowledgeable members of faculty. They are all so keen and involved in ensuring that we are managing ok. Marked work came back so quickly too

Recommendation

To continue to work as a team and provide students with access to all members of the midwifery team who may contribute to their learning.

Feedback from Unit Evaluation

Feedback

I have no complaints about this unit. I have loved my clinical placement and the requirements of completing reflections are fair and not an excessive amount of work.

Recommendation

To continue to support students whilst on clinical placement and ensure they have access to help, feedback and assistance whilst in the clinical environment.

Feedback from Unit Evaluation

Feedback

Continuous practicum and theory allow us to put into practice what we are learning. The expectations and resources are really easily laid out and easy to follow which makes such a busy time flow much more easily

Recommendation

To continue to provide easy to follow and helpful information, unit materials, and resources.

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
1 - Portfolio - 40%	•	•	•	
2 - Written Assessment - 60%	•	•	•	
3 - Professional Practice Placement - 0%	•	•	•	•

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 ed. (2014)

Authors: Marshall, J. & Raynor, M.

Churchill Livingstone

London , England

Binding: Paperback

Additional Textbook Information

Copies are available for purchase at the CQUni Bookshop here: <http://bookshop.cqu.edu.au> (search on the Unit code)

[View textbooks at the CQUniversity Bookshop](#)

IT Resources

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)
- Access to The Australian College of Midwives App 'National Midwifery Guidelines for Consultation and Referral is a requirement for this unit. This can be downloaded from:
<https://www.midwives.org.au/resources/national-midwifery-guidelines-consultation-and-referral-3rd-edition-issue-2-2014>

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

Schedule

Week 1 - 09 Mar 2020

Module/Topic	Chapter	Events and Submissions/Topic
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This clinical placement unit 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'. 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.

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 - 16 Mar 2020

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

Week 3 - 23 Mar 2020

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

Week 4 - 30 Mar 2020

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

Week 5 - 06 Apr 2020

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

Vacation Week - 13 Apr 2020

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

Week 6 - 20 Apr 2020

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

Week 7 - 27 Apr 2020

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

Week 8 - 04 May 2020

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

Written Essay Due: Week 8 Friday (8 May 2020) 11:55 pm AEST

Week 9 - 11 May 2020

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

Week 10 - 18 May 2020

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

Week 11 - 25 May 2020

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

Week 12 - 01 Jun 2020

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement
		Reflective Portfolio Due: Week 12 Tuesday (2 June 2020) 11:55 pm AEST

Review/Exam Week - 08 Jun 2020

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

Exam Week - 15 Jun 2020

Module/Topic	Chapter	Events and Submissions/Topic
		Ongoing clinical placement
		Clinical Placement: Hours, Skills and Competency Assessment Tool Due: Exam Week Friday (19 June 2020) 11:55 pm AEST

Term Specific Information

- Students are required to have access to the Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. This resource is available in an app available for purchase at: <https://www.midwives.org.au/resources/national-midwifery-guidelines-consultation-and-referral-3rd-edition-issue-2-2014>
- Students must remain subscribed to all online forums: Q & A forum, Discussion Forum and News Forum, for the entire semester. Students must adhere to the CQUniversity Clinical Placement Attendance Policy and notify all absences as per the instruction on the Midwifery Practice 1 unit page. It is a requirement that students check their student email account at least once per week as per the CQU Student Email Account Policy and Procedure.
- All students must adhere to the CQUniversity student clinical placement policy. All students must follow the correct notification procedures if they are absent from clinical placement and supply a medical certificate for missed shifts and also a medical clearance to return to placement if required as outlined in the policy.

Assessment Tasks

1 Reflective Portfolio

Assessment Type

Portfolio

Task Description

Assessment One - Portfolio/Ongoing Reflective Journal

40% Weighting

Word Count: N/A

Referencing Style: APA 6th

Due Date: 2/06/2020 (Week 12)

Objectives: This assessment item relates to learning outcomes

One (1) Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.

Two (2) Demonstrate beginning midwifery practice skills related to the assessment of women and the neonate across the continuum of normal childbearing using the Australian College of Midwives National Midwifery Guidelines for Consultation or Referral.

Three (3) Reflect on clinical learning related to your continuity of care experiences to enhance practice.

Four (4) Demonstrate midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) requirements.

Reflective practice is a key element that contributes to the NMBA Midwife Standards for Practice. It is through reflective processes that both students and registered midwives can identify and explore diverse values, beliefs, learning needs and sociocultural structures.

Task

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. The journals must be uploaded to the appropriate section of the Bachelor of Midwifery Meta page.

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 many 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 Tuesday (2 June 2020) 11:55 pm AEST

Please submit all portfolios to the Bachelor of Midwifery Meta page in the 2020 group submission section. All submissions must be kept in draft format only.

Return Date to Students

Exam Week Friday (19 June 2020)

Please allow for up to two weeks post the due date for the return of marked assessments.

Weighting

40%

Assessment Criteria

HD 100-85%

D 84-75%

C 74-65%

P 64-50%

F <50%

Structure (10%)

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)

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 a broad and generally reflective journals that explore and identifies gaps in knowledge. Each reflective journal provides - A description - An Interpretation - An outcome - what was learnt

Disjointed and limited 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 and illogical 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: - 1 to 4 antenatal visits: Face to Face. (45%) (Learning Outcomes 1 - 4)

3 Well-developed reflective journals that include a minimum of: - 1 to 4 antenatal visits: Face to Face.

3 reflective journals that include a minimum of: - 1 to 4 antenatal visits: Face to Face.

3 disjointed reflective journals that include some of the following: - 1 to 4 antenatal visits: Face to Face.

3 or less inadequate reflective journals that have not met the minimum requirements of: - 1 to 4 antenatal visits: Face to Face.

Referencing Style

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

Submission

Online

Submission Instructions

Please submit all portfolios to the Bachelor of Midwifery meta page only

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 Essay

Assessment Type

Written Assessment

Task Description

Weighting 60%

Task Description

2500 words (+ or - 10%) on the topic of:

“Health Promotion: Tailoring antenatal education to the individual woman”

Background:

The NMBA (2018) Midwife Standards for Practice states:

The midwife is responsible and accountable for midwifery practice that includes:

- providing women’s health support, care and advice before conception, during pregnancy, labour, birth and the postnatal period
- promoting normal physiological childbirth and identifying complications for the woman and her baby
- consultation with and referral to medical care or other appropriate assistance. (NMBA, 2018, p.7)

Using the principles of midwifery continuity of care and primary health care the midwife provides antenatal counselling and education.

During antenatal care the midwife has an opportunity to educate and assess the woman’s needs and identify risk factors. An initial “booking in” maternity assessment risk score is determined from her history and status, which assists in highlighting risks and tailoring appropriate care.

The Australian College of Midwives provides a document, The National Guidelines for Consultation & Referral. This document is designed for use by midwives to integrate clinical evidence with experience to determine a midwifery assessment score: A, B or C. Timely identification of the score provides an indication of which model of care may be most appropriate and when to consult and refer to medical care. The maternity assessment score is initially determined at the booking in antenatal visit but may be revised and changed throughout the pregnancy.

Overview:

You are required to reflect on your clinical experiences related to your 'Continuity of Care' (CoC) women. You are to select a health promotion educational activity, that you could provide to your CoC woman from one of the following options:

- Lifestyle changes in pregnancy (exercise and nutrition in pregnancy and/or Alcohol, Tobacco or other Drugs).
- Social and Mental health risk screening (Safe Start and/or Edinburgh Postnatal Depression Scale)

Task:

You are required to correctly determine your chosen CoC woman’s midwifery assessment score using The Australian College of Midwives ‘National Guidelines for Consultation and Referral. You are required to access the National Midwifery Guidelines for Consultation and Referral via the Australian College of Midwives app available here: <https://www.midwives.org.au/resources/national-midwifery-guidelines-consultation-and-referral-3rd-edition-issue-2-2014> You will discuss why the woman has been allocated the score and what is the appropriate action to take: consult or refer according to The National Guidelines for Consultation & Referral.

Part A: - Using a midwifery perspective you are required to:

Research your chosen health promotion educational activity that is in alignment with your role as a midwife and primary healthcare provider.

Evaluation: Explore current research to provide a critical evaluation of the evidence/research regarding your chosen topic.

Analyze and apply: Provide recommendations for pregnant women on your chosen health promotion educational activity.

Discuss: How these recommendations can assist the woman during her pregnancy and include in your discussion the woman’s maternity risk score and the correct actions to take according to the Australian College of Midwives ‘National Guidelines for Consultation and Referral and discuss why.

Part A - Word limit - 2000 words.

Part B: - Design and produce a comprehensive pamphlet which summarises the research and recommendations from Part A related to your chosen educational activity or health promotion strategy. This would be a pamphlet that you would be able to offer to women as a resource when providing education. In designing your pamphlet please ensure you consider the following:

- Before you start - make sure that you have thought of the purpose, the message, the target audience and finally the content you wish to include. Gather ideas and examples of other pamphlets when starting your design.
- Write an outline - Keep your language simple by avoiding long words and jargon. The best pamphlets are short and simple. Remember the information that you will utilise for the pamphlet will need to be based on your 2000 word overview (Part A).
- Do not make the layout too dense with lots of small typing or multiple images. Leave some space in between the writing either as empty white space or as space or pictures. This makes it easier for people to read.
- Readability is very important in designing a pamphlet. Check which are easiest to read and use them as an example to guide you. You can also vary the typing by using bold and italics as well as different size letters for headings, captions and so on. Arrange your topics in a logical sequence, fitting to a general layout. Play around with the design until you decide on the best layout. You can use both sides of the pamphlet, that is front and back.
- Be creative. It may help you to fold up a piece of paper in the way your pamphlet will be folded and sketch it out. Use bold headlines to catch people's attention and to make it interesting.
- Tip: Word contains a template that is able to design pamphlets.

• Word Count:500

You will need to submit both Part A and Part B for marking as per the normal submission process for written assessments.

Please Note:

- A title page is required for this assignment - including your name, student number, due date, word count and unit coordinator's name.
- An introduction, conclusion and reference list are also required this assessment: Part A.
- A 10% leeway on either side of the word limit will be accepted. The word count will be measured from the first word of the introduction to the last word of the conclusion and includes in-text references and citations. Not included is the cover page, contents page, or reference list.
- It is an expectation that the references used will be recent journal articles, five years or less since publication and reference books are to be no older than ten year, unless seminal works. Correct referencing is to be utilised throughout the body of work.
- Referencing: American Psychological Association referencing style is a requirement. Poor referencing is unacceptable at this level of study.
- For more information on the APA referencing style please visit: CQUniversity Library site - click on students and then referencing.
- Plagiarism detection software - Turnitin will be utilised to evaluate assignments. Please refer to the course profile for further information regarding Turnitin.

Specific expectations:

- Before commencing the assessment, you are required to read the marking criteria sheet for this assessment (see below)
- For assessment extension requests - please go to the Assignment Extension Request tool bar on the MDWF12003 Moodle page.
- Submission of the assessment is via Moodle, if you experience problems with submission, please contact the CQU TASAC helpdesk on 07 4930 9090.

Support and Contact Details: Unit Coordinator – Bridget Ferguson b.ferguson@cqu.edu.au

Assessment Due Date

Week 8 Friday (8 May 2020) 11:55 pm AEST

Please review TURNITIN scores prior to submission and submit assessments to the Midwifery Practice 1 Moodle page via the assessment submission zone.

Return Date to Students

Week 10 Friday (22 May 2020)

Please allow up to two weeks post the due date for the return of marked assignments.

Weighting

60%

Assessment Criteria

HD 100-85%	D 84-75%	C 74-65%	P 64-50%	F <50%
Structure (15%) PART A				
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 no clear direction to the paper	No recognisable introduction- the topic is not introduced and/or there is no direction offered to the paper
Part A: Clear and succinct conclusion that outlines the main points brings 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 does not offer a clear conclusion to the paper
Part A: 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%) Part A

Part A: Content is comprehensive and clearly relevant to the topic; the approach comprehensively addresses the chosen topic; the argument proceeds logically and is within the set word limit. (15%)	Content is relevant to the topic; the approach clearly addresses the chosen topic and the argument proceeds logically and is within the set word limit	Content is appropriate and mostly addresses the chosen topic and the argument for the most part proceeds logically and is within the set word limit	Content broadly addresses the chosen topic and is at times repetitive or lacks cohesion and is within the set word limit with a 10% allowance	Content is irrelevant and or does not address the chosen topic and the argument lacks cohesion. The word limit has not been adhered to, the word limit is well over or under the 10% allowance
Part A: An articulate and comprehensive discussion demonstrating a thorough understanding of the chosen topic and relates to one of the 'Continuity of Care' women. Correctly identifies the maternity risk score, comprehensively discusses why the woman meets the criteria for the score with rationales provided and what the correct action to take is. (20%)	Insightful and well developed discussion that demonstrates a clear understanding of the chosen topic and relates to one of your 'Continuity of Care' Women. Correctly identifies the maternity risk score and thoroughly discusses why the woman meets the criteria for the score and identifies the correct action to take.	A logical discussion that demonstrates a competent understanding of the identified chosen topic that is related to one of your 'Continuity of Care' women. Correctly identifies the maternity risk score and competently discusses why the woman meets the criteria for the score and identifies the correct action to take.	Provides a disjointed discussion that demonstrates a generalised or limited understanding of the chosen topic. Correctly identifies the maternity risk score and generally discusses why the woman meets the criteria for the score and identifies the correct action to take.	An inadequate discussion which demonstrates a poor understanding of the chosen topic, incorrectly identifies the maternity risk score and provides a limited discussion or fails to discuss why the woman meets the criteria for the score and incorrectly identifies what action to take.
PART B Comprehensive discussion that uses a sophisticated pamphlet design to fully communicate the chosen health promotion and educational activity to pregnant women. (20%)	Well-developed discussion which uses a thoughtful and relevant pamphlet design to effectively convey the chosen health promotion and educational activity to pregnant women.	Broad discussion which implements an appropriate pamphlet design to broadly communicate the chosen educational activity or health promotion strategy to pregnant women.	Minimal and disjointed discussion which uses a basic pamphlet design to communicate the chosen educational activity or health promotion strategy to pregnant women.	Inadequate discussion, which uses a limited pamphlet design with either over simplified or over complex language (medical jargon) to communicate the chosen educational activity or health promotion strategy to pregnant women.
Part B: A convincing and critical evaluation that highlights the evidenced based recommendations which support the chosen educational activity or health promotion strategy (20%)	A clear and coherent evaluation that highlights the evidenced based recommendations which support the chosen educational activity or health promotion strategy.	A logical evaluation which broadly highlights the evidenced based recommendations supporting the chosen educational activity or health promotion strategy.	A satisfactory understanding of the topic. There is minimal or limited evaluation of evidence that can be repetitive at times regarding the recommendations supporting the chosen educational activity or health promotion strategy.	A poor understanding of the topic. Content does not address the evidence based recommendations supporting the chosen educational activity or health promotion strategy.
Referencing (10%) PART A & B				
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.
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.

Referencing Style

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

Submission

Online

Submission Instructions

Please review TURNITIN scores prior to submission and submit assessments to the Midwifery Practice 1 Moodle page via the assessment submission zone.

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 Clinical Placement: Hours, Skills and Competency Assessment Tool

Assessment Type

Professional Practice Placement

Task Description

Assessment 3 - Placement

MDWF12006 - Midwifery Practice 1 - Clinical Placement

Due date: 19/06/2020 (Week 14)

Weighting: 0% - Pass/Fail

Learning Objectives:

One (1) Apply the concepts and principles underpinning the frameworks of midwifery to beginning midwifery practice.

Two (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'.

Three (3) Reflect on clinical learning related to your continuity of care experiences to enhance practice.

Four (4) Demonstrate midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) requirements.

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, and commence your reflective journals. Templates can be found on the Bachelor of Midwifery Meta page.
2. Complete the recruitment or a minimum of 1 antenatal visit for three (3) CoC women in term1 who will birth in term 2.
3. Competency Performance Assessment
4. Complete 224 hours of clinical practice experience plus continuity of care hours (10-20 in total per woman recruited)

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

Weighting 0% - Pass/Fail

Assessment Due Date

Exam Week Friday (19 June 2020) 11:55 pm AEST

Please email the unit co-coordinator a high quality scan of your completed and signed end of term documents. Do not send photos of the documents as this will not be accepted for submission.

Return Date to Students

Exam Week Friday (19 June 2020)

Please allow up to two weeks post the due date for the return of marked assessments.

Weighting

Pass/Fail

Assessment Criteria

This is a pass/fail assessment and therefore no marking rubric applies to this assessment.

Referencing Style

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

Submission

Online

Submission Instructions

Please email the unit co-coordinator a high quality scan of your completed and signed end of term documents. Do not send photos of the documents as this will not be accepted for submission.

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