



MDWF13006 Midwifery Practice 4

Term 1 - 2020

Profile information current as at 16/05/2024 02:07 pm

All details in this unit profile for MDWF13006 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 final of four that provides you with midwifery clinical experience. In this capstone unit you will be required to integrate and apply knowledge, concepts and skills learnt throughout the course. The learning experiences will provide you with the opportunity to demonstrate your ability to practice at the level of a competent beginning midwife. Midwifery Practice 4 is to be undertaken with Transition to Autonomous Practice.

Details

Career Level: *Undergraduate*

Unit Level: *Level 3*

Credit Points: *12*

Student Contribution Band: *7*

Fraction of Full-Time Student Load: *0.25*

Pre-requisites or Co-requisites

Co-req MDWF13005 Transition to Autonomous Practice Pre-Req MDWF13002 Postnatal Health and Wellbeing

MDWF13003 Midwifery Practice 3

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

The reflective portfolios are so difficult to submit via the Graduate Entry port. It is over-complicated and stressful.

Recommendation

The midwifery team to review the processes of submitting reflective portfolios to ensure steps are clearly outlined and easy to follow.

Feedback from Unit evaluation

Feedback

This unit was well planned and assessments well spaced to allow for planning and balancing of other commitments.

Recommendation

To continue to work cohesively as a team supporting the students to have a manageable assessment workload and clinical placement schedule

Feedback from Unit evaluation

Feedback

The lecturers were the best aspects, I feel they supported our learning regardless of the fact we were online users with extremely limited face to face time.

Recommendation

The midwifery team to continue to work together supporting the students via a variety of weekly learning resources together with being available via email and phone. Timely responses to students queries and concerns assists the students to progress through the unit.

Unit Learning Outcomes

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

1. Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.
2. Reflect on clinical learning and midwifery practice.
3. Demonstrate midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) requirements.

NMBA Midwife Standards for Practice

Standard 1: Promotes evidence-based maternal health and wellbeing.

Standard 2: Engages in respectful partnerships and professional relationships.

Standard 3: Demonstrates the capability and accountability for midwifery practice.

Standard 4: Undertakes comprehensive assessments.

Standard 5: Develops plans for midwifery practice.

Standard 6: Provides safe and quality midwifery practice.

Standard 7: Evaluates outcomes to improve midwifery practice.

Alignment of Learning Outcomes, Assessment and Graduate Attributes



Alignment of Assessment Tasks to Learning Outcomes

Textbooks and Resources

Textbooks

MDWF13006

Prescribed

Myles Textbook for Midwives

Edition: 16th edn (2014)

Authors: Marshall, J. & Raynor, M.

Churchill Livingstone

London, England

ISBN: 9780702051463

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)

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
This clinical placement unit is the final of four that provides you with midwifery clinical experience. In this capstone unit, you will be required to integrate and apply knowledge, concepts and skills learnt throughout the course. The learning experiences will provide you with the opportunity to demonstrate your ability to practice at the level of a competent beginning midwife. Midwifery Practice 4 is to be undertaken with Transition to Autonomous Practice.	NMBA: Code of Conduct, Ethics and Midwife Standards for Practice. Queensland Health State-wide Maternal and Neonatal Clinical Guidelines. CQUniversity Midwifery Student Clinical Placement Logbook.	Ongoing clinical placement

Week 2 - 16 Mar 2020

Module/Topic	Chapter	Events and Submissions/Topic
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Clinical Placement	ongoing clinical placement
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Week 3 - 23 Mar 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 4 - 30 Mar 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 5 - 06 Apr 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		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
Clinical Placement		ongoing clinical placement

Week 7 - 27 Apr 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 8 - 04 May 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 9 - 11 May 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 10 - 18 May 2020

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

Clinical Placement

Written Assessment: Coroners Report and Presentation Due: Week 10 Monday (18 May 2020) 6:00 pm AEST

Week 11 - 25 May 2020

Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		ongoing clinical placement

Week 12 - 01 Jun 2020

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

Clinical Placement

Reflective Portfolio Due: Week 12 Friday (5 June 2020) 11:55 pm AEST

Review/Exam Week - 08 Jun 2020

Module/Topic	Chapter	Events and Submissions/Topic
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Exam Week - 15 Jun 2020**Module/Topic****Chapter****Events and Submissions/Topic**

Term Specific Information

All students must adhere to the CQUniversity student clinical placement attendance 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. Students are to remain subscribed to the online forums: News forum, Q & A and Discussion forum for the entire semester. 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.

Assessment Tasks

1 Reflective Portfolio

Assessment Type

Portfolio

Task Description

Assessment One – Portfolio/Ongoing Reflective Journal

Weighting: 40%

Word Count: N/A

Due Date: 5 June 2020 (Week 12)

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 a minimum of 10 continuity of care cases, including each of the four (4) newly recruited women from term three (3).

By week 12 you need to have completed 10 comprehensive reflective journals that include a minimum of:

- 4 antenatal visits
- labour/intrapartum care of at least 6 women
- 2 postnatal visits
- You must have spent a minimum of 10 hours with each woman.

Please upload your minimum of 10 completed journals to the Bachelor of Midwifery (Graduate Entry) 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 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 (5 June 2020) 11:55 pm AEST

Please submit your final reflective portfolios into the Bachelor of Midwifery Meta page journal submission zone and not to the Midwifery Practice 4 Moodle page

Return Date to Students

Exam Week Friday (19 June 2020)

Please allow up to two weeks from 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.	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
10 Comprehensive reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits (45%) (Learning Outcome 1 - 4)	10 Well-developed reflective journals that include a minimum of : - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits	10 reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits	10 disjointed reflective journals that include some of the following: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits	10 or less inadequate reflective journals that have not met the minimum requirements of: - 4 antenatal visits - +/- the labour (Intrapartum Visits) - 2 postnatal visits

Referencing Style

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

Submission

Online

Submission Instructions

Please submit your final reflective portfolios into the Bachelor of Midwifery Meta page journal submission zone and not to the Midwifery Practice 4 Moodle page

Learning Outcomes Assessed

- Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.
- Reflect on clinical learning and midwifery practice.

Graduate Attributes

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

2 Written Assessment: Coroners Report and Presentation

Assessment Type

Written Assessment

Task Description

Assessment 2 - Written Assessment and Presentation

Weighting: 60%

Word Count: 2500 words +/- 10%

Assessment Due Date

Week 10 Monday the 18th of May 2020 6.00 p.m. AEST

The word count is considered from the first word of the introduction to the last word of the conclusion. It excludes the cover page, abstract, contents page, reference page and appendices. It includes in-text references and direct quotations. Students are expected to write this assignment in an essay format. Your essay is to follow academic conventions of structure with an introduction, body and conclusion.

Learning Outcomes

This assessment relates to these Learning Outcomes:

Learning outcome 1: Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.

Learning outcome 2: Reflect on clinical learning and midwifery practice.

Assessment Task

In this assessment, you are required to examine a Coroner's Report. This Report is from December 2014 and relates to the case of Baby A. Baby A and his mother were under the intrapartum care of maternity health services at a Gold Coast private hospital, and, according to the facts before the coroner, Baby A died as a result of hypoxic-ischemic encephalopathy due to meconium aspiration syndrome.

In this assessment you are asked to follow the pregnancy and intrapartum journey provided in the report, examine what occurred, and perhaps most importantly, provide alternative midwifery actions that may have led to a different outcome. These actions may include multidisciplinary collaboration and communication, maternal and foetal assessment, provision of evidence based care, education, advocacy for the mother and foetus, and partner involvement.

As part of this assignment you are expected to review current (5 years) peer reviewed evidence, policy and guidelines on water immersion and water birth, identify the benefits, prohibitors and risk factors for water immersion and water birth. It is also expected that you will identify early warning signs of maternal and foetal deterioration during pregnancy and labour and discuss clinical midwifery interventions to mitigate this.

Assessment details:

Part 1: Written component.

1. Download the Coroner's report.

2. Utilising a timeline of the labour and considering antenatal events, highlight the critical areas where you consider the intrapartum care was not evidence based. Identify critical intrapartum incidents where effective communication and clinical midwifery intervention would have been appropriate. Outline what appropriate midwifery interventions would be at that critical point in the timeline and how you as a practising registered midwife would have intervened. You will need to support your argument with appropriate current evidence.

3. Utilising current (last 5 years) literature provide an overview of the appropriate use of water immersion and water birth. The discussion should include the benefits and risks relating to the use of water immersion during labour and water birth. Include this information in your assessment piece.

Part 2 Audio-visual component

1. Provide a video of yourself undertaking a ten-minute talk that could be used for education with colleagues at a Grand Round. You may use visual aids such as a PowerPoint presentation to assist with your delivery of this talk. Base your talk on this Coroner's Report and the salient learnings from this for registered midwives. Your talk should be approximately ten minutes long but no longer than 15 minutes. It should include the timeline, what in your opinion went wrong and how to prevent a tragedy like Baby A's death from re-occurring in the future, viewed from a midwifery perspective and using current evidence. In essence this is a summarisation of Part 1.

Tips and resources on how to upload your talk will be made available on your Moodle site and in an assignment guide.

An audio-only exemplar is provided on the Moodle page.

Referencing Style: American Psychological Association (APA)

Submission: Online

Submission Instructions: Submit via the Moodle link.

Learning Outcomes Assessed

1: Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.

2: Reflect on clinical learning and midwifery practice.

Graduate Attributes

- Knowledge
- Communication
- Cognitive, technical and creative skills
- Research
- Self-management
- Ethical and Professional Responsibility and Accountability
- Leadership
- Professional Development

Assessment Due Date

Week 10 Monday (18 May 2020) 6:00 pm AEST

Please submit this assessment to the Midwifery Practice 4 Moodle assignment 2 submission zone.

Return Date to Students

Week 12 Monday (1 June 2020)

Please allow for up to 2 weeks post the due date for the return of marked assignments.

Weighting

60%

Assessment Criteria

High Distinction 85-100%	Distinction 75-84%	Credit 65-74%	Pass 50-64%	Fail Below 50%
Structure 20%				
Introduction 5%				
Highly appropriate and relevant to content. Provides very clear sense of what follows.	Appropriate and relevant to content. Provides clear sense of what follows.	Largely appropriate and relevant to content. Provides sense of what follows.	Somewhat appropriate and relevant to content. Provides some sense of what follows.	Not evident and/or not appropriate.
Conclusion 5%				
Provides very strong sense of closure and highly appropriate.	Provides sound sense of closure and appropriate.	Provides a sense of closure and largely appropriate.	Somewhat provides a sense of closure and somewhat appropriate.	No recognisable conclusion or conclusion is inappropriate.
Presentation 5%				
Very well presented. No spelling or grammatical errors. Well proof read. Written in a clear and cohesive style.	Very well presented. Minimal spelling and grammatical errors. Well proof read. Written in a clear and easy to ready style.	Well presented. Some spelling and grammatical errors. Written in an easy to ready style.	There may be one or more areas where there was evidence of lack attention to presentation.	Many presentation errors.
Referencing 5%				
Consistently integrates appropriate references to support and reflect all ideas, factual information and quotations.	Generally, integrates appropriate references to support and reflect ideas, factual information and quotations, with 1 or 2 exceptions.	Partly integrates appropriate references to support and reflect ideas, factual information and quotations, with 3 or 4 exceptions.	Occasionally integrates appropriate references to support and reflect ideas, factual information and quotations, with 5 or 6 exceptions.	Fails to or infrequent attempts (>7 errors) to integrate appropriate references to support and reflect ideas, factual information and quotations.
Accurate APA referencing. No errors.	Accurate APA referencing. One error.	Accurate APA referencing. Two errors.	Accurate APA referencing. Three errors.	More than three errors.
Analysis 25%				

Excellent analysis of midwifery care, assessment and actions which very is clear and cohesive. Identification of at least four or more warning signs and critical incidents.

Very good analysis of midwifery care, assessment and actions, which is clear and cohesive. Identification of three warning signs and critical incidents.

Sound analysis of midwifery care, assessment and actions which is largely clear and cohesive. Identification of two warning signs and critical incidents.

Some analysis of midwifery care, assessment and actions which is somewhat clear and cohesive. May be descriptive at times. Includes identification of one warning sign and critical incident.

Analysis of midwifery care, assessment and actions is not clear and/or not relevant. No warning signs and critical incidents are identified.

Alternative midwifery actions 25%

Proposed actions reflect excellent knowledge of midwifery and current evidence based literature and guidelines. Actions are supported with current high quality peer reviewed evidence. Demonstrated high level understanding of intrapartum midwifery care.

Proposed actions reflect a sound knowledge of midwifery and current evidence based literature and guidelines. Actions are supported with current quality evidence. Demonstrated good understanding of intrapartum midwifery care.

Proposed actions reflect a mostly sound knowledge of midwifery and evidence based literature and guidelines. Actions are supported by up to date appropriate evidence. Some understanding of intrapartum midwifery care.

Proposed actions reflect some knowledge of midwifery and evidence based literature and guidelines. Actions are mostly supported by appropriate evidence. Basic understanding of intrapartum midwifery care.

Proposed actions reflect limited knowledge of midwifery and evidence based literature and guidelines. Actions are not supported with appropriate evidence. Limited or no understanding of intrapartum midwifery care.

Use of water immersion and water birth 10%

Comprehensive review of appropriate literature providing an excellent overview of the use of water during labour and birth. Discussion includes the benefits and risks relating to the use of water immersion and water birth.

Very good review of appropriate literature providing a cohesive overview of the use of water during labour and birth. Discussion considers the benefits and risks relating to the use of water immersion and water birth.

Sound review of appropriate literature providing a broad overview of the use of water during labour and birth. Discussion relates to some of the benefits and risks relating to the use of water immersion and water birth.

Basic review of appropriate literature providing a brief overview of the use of water during labour and birth. Discussion on the benefits and risks relating to the use of water immersion and water birth are limited.

Limited review of literature providing an unclear or illogical overview of the use of water during labour and birth. Discussion does not include the benefits and risks relating to the use of water immersion and water birth.

Ten-minute talk 20%

Situation, background, assessment and recommendations are clearly demarcated. Summation of the coroner's report is accurate. Perspective and content are salient, convincing, and persuasive. The talk is presented with flair and reflects ability to debate critical issues.

Situation, background, assessment and recommendations are demarcated. Summation of the coroner's report is accurate. Perspective and content are salient, convincing, and persuasive. The talk is presented with flair.

Situation, background, assessment and recommendations are clearly demarcated. Summation of the coroner's report is mostly accurate. Perspective and content somewhat convincing and persuasive. The talk is well presented and demonstrates some originality.

Largely clear and competent explanation of situation, background, assessment and recommendations. Summation of the coroner's report is basic. The talk is largely well presented.

Context not clearly explained. Summation of the coroner's report is missing or contains many inaccuracies. The talk is missing or has no salient content.

Referencing Style

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

Submission

Online

Submission Instructions

Please submit this assessment to the Midwifery Practice 4 Moodle assignment 2 submission zone.

Learning Outcomes Assessed

- Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.
- Reflect on clinical learning and midwifery practice.

Graduate Attributes

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

3 Clinical Practice Placement Hours and Skills

Assessment Type

Professional Practice Placement

Task Description

Assessment 3 - Clinical Practice Placement

Due Date: 12 June 2020 (week 13)

Weighting: 0% - Pass/Fail

This assessment relates to learning outcomes one (1), two (2) and three (3)

Minimal clinical practice experience of 224 hours (term 4) is required by completion of this course*. This clinical experience will allow you to consolidate knowledge and skills acquired throughout the course. 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 the minimum clinical requirements which are:

Complete the four (4) 'Continuity of Care (CoC) experience women recruited in term 3. By week 13 you must have completed and submitted 10 comprehensive reflective journals that include a minimum of:

- 4 antenatal visits
- labour/intrapartum care of at least 6 women
- 2 postnatal visits

Completed Competency Assessment Tool (CAT).

Complete 224 hours of clinical practice in experience plus continuity of care hours (10-20 in total per woman recruited) in term 4.

*As this is the completion of the entire course, in total, all students must have completed a grand total of a minimum of 896 clinical hours plus a minimum of 100 CoC hours and have been signed off as competent throughout the term 4 CAT. The required clinical experience will be reviewed by the midwifery educator/manager and /or clinical facilitator at your clinical placement facility in conjunction with the unit coordinator.

Assessment Due Date

Review/Exam Week Friday (12 June 2020) 11:55 pm AEST

Please scan and email high quality copies of all the fully completed and signed off end of term documents to the unit coordinator.

Return Date to Students

Exam Week Friday (19 June 2020)

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

Weighting

Pass/Fail

Assessment Criteria

This is a pass/fail assessment and as such no marking criteria are applied to this assessment.

Referencing Style

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

Submission

Online

Submission Instructions

Please scan and email high quality copies of all the fully completed and signed off end of term documents to the unit coordinator.

Learning Outcomes Assessed

- Demonstrate safe and effective midwifery care at the level of a competent beginning midwife.
- Reflect on clinical learning and midwifery 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
- Information Technology Competence
- 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