



MDWF13006 Midwifery Practice 4

Term 1 - 2021

Profile information current as at 01/05/2024 09:56 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 - 2021

- 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 SUTE

Feedback

I especially enjoyed reading through the assignment in regard to the coroners case as I felt it aided in my professional practice in recognising and learning what not to do and the consequences of not abiding to the policies and procedures

Recommendation

Continue to provide interesting and clinically relevant assessments.

Feedback from SUTE

Feedback

Continuity of care. This was a great experience which I could learn many things throughout the care of the women. Also the assessment task "coroner's report" helped me to review and consolidate the learning contents of the entire midwifery course.

Recommendation

Continue to provide Continuity of Care experiences to midwifery students.

Feedback from SUTE

Feedback

This unit really challenges and probes our critical thinking skills in linking all we have learnt over the degree to how we would challenge adversity in our careers. I really appreciate that it teaches us those skills, rather than just teaching us "what policy says". As always the content has been challenging but not impossible, and the convenors/lecturers easily approachable and willing to engage in my learning. Also, the new module platform is so much better!!

Recommendation

Continue to provide quality learning and teaching material that aligns to clinical practice to enhance the development of midwifery practice.

Feedback from SUTE

Feedback

2 days a week prac is so valuable! This became so evident when prac was cancelled due to covid as I really missed the consolidation of learning that occurs when you get regular clinical experience.

Recommendation

Continue to provide flexibility in placement opportunity to students and industry providers.

Feedback from SUTE

Feedback

none, was a great subject thank you for the ongoing support especially during the Covid panic

Recommendation

Continue to provide fast and flexible support to students during times of crisis and hardship.

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

Assessment Tasks	Learning Outcomes		
	1	2	3
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
1 - Communication	•	•	•
2 - Problem Solving	•	•	•
3 - Critical Thinking	•	•	•
4 - Information Literacy	•	•	•
5 - Team Work	•	•	•
6 - Information Technology Competence	•	•	•
7 - Cross Cultural Competence	•	•	•

Graduate Attributes	Learning Outcomes		
	1	2	3
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

MDWF13006

Prescribed

Myles Textbook for Midwives

Edition: 16th ed. (2014)

Authors: Marshall, J. & Raynor, M.

Churchill Livingstone

London, England

Binding: Paperback

Additional Textbook Information

An electronic copy of this textbook will be made available to students on the Moodle unit website. If you prefer your own copy, you can purchase one at the CQUni Bookshop here; <http://bookshop.cqu.edu.au> (search on the Unit code)

IT Resources

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)
- Computer - ability to access study materials, including instructional videos and scan and upload assessment.
- Microphone and headset
- Scanner and printer (Distance students only)
- Camera and microphone for attending Zoom tutorials

Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 7th Edition \(APA 7th edition\)](#)

For further information, see the Assessment Tasks.

Teaching Contacts

Bridget Ferguson Unit Coordinator
b.ferguson@cqu.edu.au

Schedule

Week 1 - 08 Mar 2021

Module/Topic	Chapter	Events and Submissions/Topic
<p>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.</p>	<p>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.</p>	<p>Ongoing clinical placement</p>

Week 2 - 15 Mar 2021

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

Week 3 - 22 Mar 2021

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

Week 4 - 29 Mar 2021

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

Week 5 - 05 Apr 2021

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

Vacation Week - 12 Apr 2021

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

Week 6 - 19 Apr 2021

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

Week 7 - 26 Apr 2021

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

Week 8 - 03 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
--------------	---------	------------------------------

Clinical Placement		Ongoing clinical placement
Week 9 - 10 May 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement
Week 10 - 17 May 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement
		Coroner's Report and Audio Presentation Due: Week 10 Tuesday (18 May 2021) 6:00 pm AEST
Week 11 - 24 May 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement
Week 12 - 31 May 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement
		Assessment 1: Reflective Portfolio Due: Week 12 Friday (4 June 2021) 6:00 pm AEST
Review/Exam Week - 07 Jun 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement
		Clinical Practice Placement: End of Term 4 Documents Due: Review/Exam Week Friday (11 June 2021) 6:00 pm AEST
Exam Week - 14 Jun 2021		
Module/Topic	Chapter	Events and Submissions/Topic
Clinical Placement		Ongoing clinical placement

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 unit online forums: News forum, Q & A and Discussion forum for the entire term. 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.
- Students must adhere to the Medication Management and Safety Requirements as posted on the MDWF13006 Moodle page.
- Please note that the prescribed textbook is Myles Textbook for Midwives, 17th edition, however, an e-copy of the 16th edition is available for free to students on the Moodle unit page and this edition is acceptable for use during the term and for assessments.

Assessment Tasks

1 Assessment 1: Reflective Portfolio

Assessment Type

Portfolio

Task Description

Assessment 1 - Reflective Portfolio

Type: Written assessment: ongoing reflective journal

Due date: 18:00 hrs AEST 4/06/2021 (week 12)

Weighting: 40%

Length: N/A. Each journal entry should be approximately 400 words however labour and birth reflections can be longer.

Unit Coordinator: Robyn Buis

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

Aim:

The aim of this assessment is to allow you to demonstrate reflective practice.

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.

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.

Instructions

1. 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).
 2. By week 12 you need to have completed 10 comprehensive reflective journals that include a minimum of:
 - 4 antenatal visits
 - labour & Birth/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

Reflective Journal Requirements

Refer to the provided Reflective Journal Template and the Two Reflective Journal examples.

Journal entries are your written reflections of face to face or telehealth episodes of care with the recruited Continuity of Care woman. Phone calls, emails, text messages or any other form of communication other than face to face contact or telehealth is not acceptable. *If you are experiencing COVID-19 restrictions in the clinical area and this impedes face to face contact please contact the unit coordinator to discuss your options well before the due date.

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, 2019). 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: (do not 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!

Literature and references

In this assessment you may use contemporary references (<5 years) to support your reflective writing. You may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites. When sourcing information, consider the five elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Grey literature sourced from the internet must be from reputable websites such as from government, university, or peak national bodies: for example, the Australian College of Midwives.

Requirements

- Each CoC woman must have their own individual journal in Word Doc. Format and be uploaded as an individual file to the Bachelor of Midwifery Meta page.
- Each journal entry in the portfolio must adhere to the template provided on the MDWF13006 Moodle page.
- Each CoC woman must be de-identified within the journal.
- Use a conventional and legible size 12 font, such as Times New Roman or Arial, with 1.5 line spacing and 2.54cm page margins (standard pre-set margin in Microsoft Word).
- Include page numbers on each page in a footer.
- You may write in the first-person perspective.
- Use formal academic language.
- Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online APA Referencing Style Guide.
- The word count is considered from the first word of the introduction to the last word of the conclusion. The word count excludes the reference list but includes in-text references and direct quotations.

Resources

- You must use unit provided journal templates and other credible sources of information (e.g. journal articles, books) to reference your discussion. The quality and credibility of your sources are important.
- We recommend that you access your discipline specific library guide: Midwifery Resource Guide
- We recommend you use EndNote to manage your citations and reference list. More information on how to use EndNote is available at the CQUniversity Library website.
- For information on academic communication please go to the Academic Learning Centre Moodle site. The Academic Communication section has many helpful resources including information for students with English as a second language.
- Submit a draft before the due date to review your Turnitin Similarity Score before making a final submission. Instructions are available here.

Submission

Submit your assessment via the Bachelor of Midwifery Meta Moodle site in Microsoft Word format only.

Marking Criteria

Refer to the marking rubric on the Moodle site for more detail on how marks will be assigned.

References

Benner, P. (1984). From novice to expert. Menlo Park.

Driscoll, J. (1994). Reflective practice for practise. Sr Nurse, 14(1), 47-50.

Gimenez, J. (2019). Writing for Nursing and Midwifery Students: Springer Nature.

Hays, R., & Gay, S. (2011). Reflection or 'pre-reflection': what are we actually measuring in reflective practice? Medical Education, 45(2), 116-118. doi:10.1111/j.1365-2923.2010.03813.x

Macdonald, J., & Poniatowska, B. (2011). Designing the professional development of staff for teaching online: an OU (UK) case study. Distance Education, 32(1), 119-134. doi:10.1080/01587919.2011.565481

Assessment Due Date

Week 12 Friday (4 June 2021) 6:00 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 (18 June 2021)

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

Weighting

40%

Assessment Criteria

HD 85-100%

D 75-84%

C 74-65%

P 64-50%

F 49-0%

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 spelling, grammar, or paragraph structure errors.

Well-presented portfolio. Reflective journals set out as per provided template. 2 or 3 consistent spelling, grammar, or paragraph structure errors.

Adequately presented portfolio, reflective journals set out per provided template. 4 or 5 inconsistent spelling, grammar, or paragraph structure errors.

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 learned **(45 %)**

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 learned

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 learned

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 learned

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 learned

10 comprehensive reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face to face visits **(45%)**

10 well-developed reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face to face visits

10 reflective journals that include a minimum of: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits - Face to face visits

10 disjointed reflective journals that include some of the following: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits - Face to face 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 - Face to face visits

Referencing Style

- [American Psychological Association 7th Edition \(APA 7th edition\)](#)

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 Coroner's Report and Audio Presentation

Assessment Type

Written Assessment

Task Description

Assessment 2 - Coroners Case.

Type: Written assessment and Audio presentation.

Due date: 18:00 hrs 18/05/2021 (week 10)

Weighting: 60%

Length: 2000 words

Unit Coordinator: Robyn Buis

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

Aim:

The aim of this assessment is to critically analyse and reflect upon a Coroner's case report, then apply your midwifery knowledge to the case and provide alternative midwifery actions that are justified by the evidence. This assessment will provide you with an opportunity to disseminate your findings verbally.

Instructions:

In this assessment, you are required to examine a Coroner's Report. This Report is from August 2020, pertaining to events from December 2012 and relates to the case of Baby C. Baby C and his mother were under the antenatal, intrapartum and postnatal care of maternity health services at a Queensland Health hospital, and, according to the facts before the coroner, Baby C died as a result of meconium aspiration syndrome and persistent pulmonary hypertension.

In this assessment you are asked to follow the pregnancy, intrapartum and postnatal 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 induction of labour and electronic fetal monitoring (EFM), identify the benefits, prohibitors and risk factors for both. It is also expected that you will identify early warning signs of maternal and foetal deterioration during pregnancy, labour and birth and postnatally and discuss clinical midwifery interventions to mitigate this.

Please follow the steps below to complete your assessment task:

Part 1: Written component.

1. Download the Coroner's report.
2. Utilising a timeline of the labour/birth events and considering antenatal events, highlight the critical areas where you consider the maternity care was not evidence based. Identify critical 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 induction of labour and electronic fetal monitoring (EFM). The discussion should include the benefits and risks relating to induction of labour and EFM. Include this information in your assessment piece.

Part 2 Audio component

1. Provide an audio recording of yourself undertaking a five-minute talk that could be used for education with colleagues at a Grand Round. Base your talk on this Coroner's Report and the salient learnings from this for registered midwives.
2. Your talk should be approximately five minutes long but no longer than 10 minutes. It should include the timeline, what in your opinion went wrong and how to prevent a tragedy like Baby C'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 exemplar is provided on the Moodle page.

Literature and references

In this assessment you are to use contemporary references (<5 years) to support your writing. You

may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites. When sourcing information, consider the five elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Grey literature sourced from the internet must be from reputable websites such as from government, university, or peak national bodies: for example, the Australian College of Midwives.

Requirements

- Use a conventional and legible size 12 font, such as Times New Roman or Arial, with 1.5 line spacing and 2.54cm page margins (standard pre-set margin in Microsoft Word).
- Include page numbers on each page in a footer.
- You may write in the first-person perspective.
- Use formal academic language.
- Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online APA Referencing Style Guide.
- The word count is considered from the first word of the introduction to the last word of the conclusion. The word count excludes the reference list but includes in-text references and direct quotations.

Resources

- You may use unit materials provided and other credible sources of information (e.g. journal articles, books) to reference your argument. The quality and credibility of your sources are important.
- We recommend that you access your discipline specific library guide: Midwifery Resource Guide
- We recommend you use EndNote to manage your citations and reference list. More information on how to use EndNote is available at the CQUniversity Library website.
- For information on academic communication please go to the Academic Learning Centre Moodle site. The Academic Communication section has many helpful resources including information for students with English as a second language.
- Submit a draft before the due date to review your Turnitin Similarity Score before making a final submission. Instructions are available here.

Submission

Submit your assessment via the MDWF13006 Moodle site in Microsoft Word format only. Please submit your completed audio recording as a separate document to the assessment submission zone, therefore you will upload two files.

Marking Criteria

Refer to the marking rubric on the Moodle site for more detail on how marks will be assigned.

Assessment Due Date

Week 10 Tuesday (18 May 2021) 6:00 pm AEST

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

Return Date to Students

Week 12 Friday (4 June 2021)

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 proofread. Written in a clear and cohesive style.	Very well presented. Minimal spelling and grammatical errors. Well proofread. 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. Uses >10 references.	Generally, integrates appropriate references to support and reflect ideas, factual information and quotations, with 1 or 2 exceptions. Uses >8 references.	Partly integrates appropriate references to support and reflect ideas, factual information and quotations, with 3 or 4 exceptions. Uses >6 references.	Occasionally integrates appropriate references to support and reflect ideas, factual information and quotations, with 5 or 6 exceptions. Uses 5 references.	Fails to or infrequent attempts (>7 errors) to integrate appropriate references to support and reflect ideas, factual information and quotations. uses < 5 references.
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 five or more warning signs and critical incidents.	Very good analysis of midwifery care, assessment, and actions, which is clear and cohesive. Identification of four warning signs and critical incidents.	Sound analysis of midwifery care, assessment and actions which is largely clear and cohesive. Identification of three 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 two warning sign and critical incident.	Analysis of midwifery care, assessment and actions is not clear and/or not relevant. One or less 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 midwifery care for the mother and infant.	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 midwifery care for the mother and infant.	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 midwifery care for the mother and infant.	Proposed actions reflect some knowledge of midwifery and evidence-based literature and guidelines. Actions are mostly supported by appropriate evidence. Basic understanding of midwifery care for the mother and infant.	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 midwifery care for the mother and infant.
Use of Induction of Labour and EFM 10%				
Comprehensive review of appropriate literature providing an excellent overview of the use of induction of labour and electronic fetal monitoring. Discussion includes the benefits and risks relating to the use of induction of labour and EFM.	Very good review of appropriate literature providing a cohesive overview of the use of induction of labour and electronic fetal monitoring. Discussion considers the benefits and risks relating to the use of induction of labour and EFM.	Sound review of appropriate literature providing a broad overview of the use of induction of labour and electronic fetal monitoring. Discussion relates to some of the benefits and risks relating to the use of induction of labour and EFM.	Basic review of appropriate literature providing a brief overview of the use of induction of labour and electronic fetal monitoring. Discussion on the benefits and risks relating to the use of induction of labour and EFM.	Limited review of literature providing an unclear or illogical overview of the use of induction of labour and electronic fetal monitoring. Discussion does not include the benefits and risks relating to the use of induction of labour and EFM.
Five-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 discuss 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 7th Edition \(APA 7th edition\)](#)

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: End of Term 4 Documents

Assessment Type

Professional Practice Placement

Task Description

Assessment 3 - Clinical Practice Placement: End of Term Documents.

Type: Clinical Hours, Skills and Competency Assessment Tool.

Due date: 18:00 hrs 11/06/2021 (week 13)

Weighting: 0% - Pass/Fail

Unit Coordinator: Robyn Buis

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

Aim:

The aim of this assessment is to aid you in consolidating your midwifery knowledge and the application of theory to practice for ensuring safe and effective care is received by the women and infants in your care. This assessment aims to provide you with the opportunity to demonstrate competent midwifery clinical practice that meets the requirements of the NMBA Midwife Standards for Practice (2018).

Task Description:

Minimal clinical practice experience of 224 hours is required by the completion of this unit. This clinical experience will allow you to consolidate knowledge and skills acquired throughout the unit. You are required to meet the clinical requirements listed below and these requirements need to be documented within your Student Clinical Experience Record Book. Please note that successful completion of this unit is not merely completing requisite clinical hours and skills but also demonstrating midwifery novice competency based upon the NMBA requirements and professional behaviour as per relevant CQUniversity policies.

Please follow the steps below to complete your assessment task:

You are expected to work towards minimal clinical requirements which include:

1. Complete the four '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 & birth/intrapartum care of at least 6 women
 - 2 postnatal visits
 2. Complete the Term 4 Competency Performance Assessment
 3. Complete 224 hours of clinical practice experience plus continuity of care hours (10-20 in total per woman recruited).
- Submit the following completed documents:
- Bachelor of Midwifery (Graduate Entry) Record of Hours.
 - Midwifery clinical hours running sheet.
 - Term 4 Competency Assessment Tool.
 - Record of CoCE sheet.

**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 in conjunction with the unit coordinator.

Resources

- You must use the correct documents (as listed above) that are provided on the MDWF 13006 Moodle unit page.

Submission

All four documents, listed above - must be completely filled out with no mistakes, no white out, and correctly calculated hours, with all sections signed by the student and registered midwife assessor. All completed and correct documents must be legible and clearly scanned with a high resolution scanner. Clear, readable scanned copies will be emailed to Robyn Buis at r.buis@cqu.edu.au by the due date.

Marking Criteria

There is no marking rubric for this assessment as this is a Pass/Fail assessment.

Assessment Due Date

Review/Exam Week Friday (11 June 2021) 6:00 pm AEST

Please scan and email high quality copies of all the fully completed and signed off end of term documents to r.buis@cqu.edu.au.

Return Date to Students

Exam Week Friday (18 June 2021)

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 7th Edition \(APA 7th edition\)](#)

Submission

Online

Submission Instructions

Please scan and email high quality copies of all the fully completed and signed off end of term documents to r.buis@cqu.edu.au.

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