



The aim of this course is to enable students to demonstrate appropriate midwifery knowledge and skills in a clinical practice environment and to achieve the course objectives in alignment with the Nursing and Midwifery Board of Australia (NMBA) Midwife Standards for Practice. Midwifery Development Practicum ELA3 provides opportunity for second year midwifery students to engage in complex neonatal care and either intrapartum or mixed care.

Courses undertaken to support their clinical learning include: Evidence Based Midwifery, Primary Midwifery Practice, Human Body 1 & 2, Midwifery Foundation Practicum ELA1, First Peoples' Health, Healthy Mothers and Babies, Complex Care of the Woman, Fetal and Maternal Pathophysiology, Midwifery Development Practicum ELA2, Complex Care of the Neonate and Pharmacology and Pharmacotherapeutics for Midwives.

Students should be encouraged to **actively** participate in care as soon as appropriate under either direct or indirect supervision of a midwife or doctor. Direct supervision is when the supervisor/clinician takes direct and principal responsibility for the midwifery care provided and must be physically present to observe the student when they are providing care. Indirect supervision is when the supervisor is easily contactable and available to observe and discuss the midwifery care the student is delivering. When students are undertaking any intimate examinations or care, they should **always** be under the direct supervision of a health professional.

The following is a **guide only** to the theory and skills practiced on-campus for this course at beginner level.

Theory and Skills

ELA 1-2 clinical skills (as per Quick Guides 1-2)

Professional communication: Effective communication with the woman, family centred care, informed consent, active decision making, written documentation and clinical handover/ISBAR, advocacy and cultural competency

Team work: TeamSTEPPS, collaboration with multidisciplinary team, referral pathways.

Management of the compromised neonate: Care of the neonate that requires active monitoring and additional care within a special care needs i.e. respiratory distress, hypoglycaemia, hypothermia, prematurity and jaundice

Understanding of grief and loss: Care of a dying baby and support for the parents and family, empathic listening skills, knowledge of community support services.

Pharmacology and diagnostics in midwifery practice: Pharmacokinetics and pharmacodynamics of frequently used medications in a midwifery/neonatal setting and interpretation of test results

Reflective practice: evidence-based practice, ethical practice and clinical reasoning skills

Medicine calculation/administration: Maternal and neonatal; oral medications, SC, IM and IV injections and IV therapy; maternal epidural administration/management¹ and PR & PV medications.

COCE: Engagement in the care of 8-12 women for their Continuity of Care Experience (CoCE) over the course of the program.

Students are required to have these 5 Clinical Assessment Tools (CATs) assessed by their supervising midwives:

- **CAT 4:** Parenting education for the woman and her family
- **CAT 8:** Care of the woman progressing in labour
- **CAT 15:** Vaginal examination
- **CAT 22:** Enteral/tube feeding a baby
- **CAT 23:** Care of the unwell baby receiving oxygen therapy

It is expected that students will attain a **minimum** rating of **Proficient (P)** level (please see 'Quick Guides: Clinical Assessment Tool for the Midwifery Student').

CAT 26: Neonatal resuscitation via simulation has already been assessed and passed in the pre-clinical workshop.

Students are required to collect daily feedback from their supervising midwives. Each student has a Clinical Facilitator allocated by the University; please provide feedback as requested or contact as needed if the student requires.

Thank you for participating in educating the next generation of midwives

¹ Bachelor of Midwifery students are NOT permitted to administer schedule 8 medications