A blue cover with white text

Description automatically generated

Clinical Support Plan

Bachelor of Midwifery

Clinical Support Plan

Student performance and assessment during experiential learning activities

Students are expected to make the most of their learning opportunities, be active participants of their learning, and always demonstrate professional behaviour when engaging in any midwifery practice experiences. For the midwifery student, such activities include workshops in the Horizon Hospital & Health Service (HHHS), attending clinical placements through the clinical courses or engaging with women through Continuity of Care Experiences (CoCE). Student performance is assessed against the [[NMBA Midwife Standards for Practice (2018)](https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/Midwife-standards-for-practice.aspx)](https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/Midwife-standards-for-practice.aspx). When a student’s performance and/or behaviour does not meet the standards for practice while engaging in midwifery practice experiences, a **Clinical Support Plan (CSP)** will be negotiated between the student, the Course Coordinator and/or Clinical Facilitator and/or Academic Liaison.

Clinical Support Plan (CSP)

The intent of the Clinical Support Plan is to assist the student to recognise areas of deficit, either in clinical practice or professional behaviours, so that they can focus on improving their practice in these identified areas and achieve success in their program. Prior to the implementation of a Clinical Support Plan, the Course Coordinator and/or Clinical Facilitator and/or Academic Liaison will discuss and collaborate with the student, to identify areas of strengths and deficits. The CSP is used to guide and support the student to achieve the appropriate standards for practice and specific learning outcomes within a set timeline.

The Clinical Support Plan supports the student by detailing:

* The specific NMBA Midwife Standards for Practice which require focus and improvements
* The recommended strategies for improvement
* The assistance or resources available to support improvement
* Outcomes that must be achieved for successful completion of the CSP
* The time span in which the improvements/outcomes will be assessed

Evidence of the student’s performance and other information impacting on the decisions regarding the successful or unsuccessful completion of a clinical support plan will be documented in the Clinical Support Plan by the Course Coordinator and/or Clinical Facilitator and/or Academic Liaison.

Students will only be offered one (1) Clinical Support Plan in each course. Where a Clinical Support Plan is successfully completed and the student is subsequently found to be still practicing below the required standards, a fail grade will be recorded for the course, and the student removed from placement or further COCE activities until a compulsory module and pre-clinical assessment has been completed before attempting the course again.

Note: A student may be removed from the clinical venue by UniSA staff or at the request of the placement venue at any time during the placement for unsafe practice or inappropriate behaviour as outlined in the [Work Integrated Learning (WIL) Policy](https://i.unisa.edu.au/siteassets/policies-and-procedures/docs/academic/ab-67-work-integrated-learning-policy.pdf?1651802720352). Students who have been precluded or suspended from placement will not be offered a Clinical Support Plan. This will result in a fail grade for the course and require the student to complete a compulsory module prior to completing further experiential activities, including COCE.

Please retain this page as part of the Clinical Support Plan document

Clinical Support Plan

Student’s name:

Student’s ID number:

Course:

Course Coordinator:

Clinical venue:

Start date:

Assessment date:

Identified areas for focus and improvement

(Document in accordance with NMBA Midwife Standards for Practice (2018). Include a brief statement of evidence & delete NMBA standards which are not applicable to this plan THEN DELETE THIS SENTENCE)

It has been identified that……………………… (insert student name) has…………………………….

This is evidenced by (please identify clearly)

……………………………………………………………………………………………

……………………………………………………………………………………………

……………………………………………………………………………………………

……………………………………………………………………………………………

……………………………………………………………………………………………

……………………………………………………………………………………………

and aligns with the following NMBA Midwife Standards for Practice (2018) *(delete those not applicable; add exemplar statements where applicable THEN DELETE THIS SENTENCE)*

Nursing and Midwifery Board of Australia – Midwife Standards for Practice (2018)

Standard 1: Promotes health and wellbeing through evidence-based midwifery practice

The midwife supports women’s wellbeing by providing safe, quality midwifery health care using the best available evidence and resources, with the principles of primary health care and cultural safety as foundations for practice.

The midwife:

1.1 identifies what is important to women as the foundation for using evidence to promote informed decision-making, participation in care, and self-determination

1.2 accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality midwifery practice

1.3 uses health assessment and health education to support birth and reproductive health, and minimise the potential for complications

1.4 undertakes ongoing processes of reflection to ensure professional judgements acknowledge how personal culture impacts on practice

1.5 supports access to maternity care for the woman

1.6 supports the development, implementation and evaluation of evidenced-based health initiatives and programs, and

1.7 identifies and promotes the role of midwifery practice and the midwifery profession in influencing better health outcomes for women.

Standard 2: Engages in professional relationships and respectful partnerships

The midwife establishes and maintains professional relationships with the woman by engaging purposefully in kind, compassionate and respectful partnerships. The midwife will also engage in professional relationships with other health practitioners, colleagues and/ or members of the public. These relationships are conducted within a context of collaboration, mutual trust, respect and cultural safety.

The midwife:

2.1 supports the choices of the woman, with respect for families and communities in relation to maternity care

2.2 partners with women to strengthen women’s capabilities and confidence to care for themselves and their families

2.3 practises ethically, with respect for dignity, privacy, confidentiality, equity and justice

2.4 practises without the discrimination that may be associated with race, age, disability, sexuality, gender identity, relationship status, power relations and/or social disadvantage

2.5 practises cultural safety that is holistic, free of bias and exposes racism

2.6 practises in a way that respects that family and community underpin the health of Aboriginal and/or Torres Strait Islander Peoples

2.7 develops, maintains and concludes professional relationships in a way that differentiates the boundaries between professional and personal relationships, and

2.8 participates in and/or leads collaborative practice.

Standard 3: Demonstrates the capability and accountability for midwifery practice

The midwife is accountable to the woman for safe and competent practice. The midwife is also accountable to themselves, the NMBA, their employer, the public and the profession for practice that includes ongoing improvement, self-management, and responding to concerns about other health professionals’ capability for practice.

The midwife:

3.1 understands their scope of practice

3.2 practises within relevant legal parameters and professional standards, codes and guidelines

3.3 participates in own continuing professional development to maintain the required knowledge and skill base for safe and effective practice

3.4 contributes to a culture that supports learning, teaching, knowledge transfer and critical reflection

3.5 engages in timely consultation, referral and documentation 3.6 uses relevant processes to identify, document and manage complexity and risk

3.7 recognises and responds appropriately where safe and quality practice may be compromised, and

3.8 considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice

Standard 4: Undertakes comprehensive assessments

The midwife in all contexts of practice continuously gathers, critically analyses and uses information and evidence to inform, validate and/ or improve midwifery practice.

The midwife:

4.1 works in partnership to determine factors that affect, or potentially affect, the health and wellbeing of women, communities and populations

4.2 uses assessment techniques to systematically collect relevant and accurate information

4.3 analyses information and data and communicates assessments and anticipated outcomes as the basis for midwifery practice, and

4.4 assesses the resources that are available to inform planning.

Standard 5: Develops a plan for midwifery practice

The midwife critically analyses information and evidence to make professional judgements in planning for practice.

The midwife:

5.1 interprets assessment data and best available evidence to develop a plan for practice

5.2 collaboratively develops plans until options, priorities, goals, actions, anticipated outcomes and timeframes are agreed with the woman, and/or relevant others

5.3 co-ordinates resources effectively and efficiently for planned actions, and

5.4 documents, evaluates and modifies plans to facilitate the anticipated outcomes.

Standard 6: Provides safety and quality in midwifery practice

The midwife uses comprehensive knowledge and skills to safely and effectively achieve the best possible midwifery practice outcomes.

The midwife:

6.1 actively contributes to quality improvement and research activities

6.2 practises to achieve the agreed goals and anticipated outcomes that meet the needs of the woman

6.3 is responsible for consultation and referral and/ or escalation in situations that are outside the individual’s scope of practice, and

6.4 provides and accepts effective and timely direction, allocation, delegation, teaching and supervision

Standard 7: Evaluates outcomes to improve midwifery practice

The midwife takes responsibility for the evaluation and continuous improvement of practice.

The midwife:

7.1 evaluates and monitors progress towards planned goals and anticipated outcomes

7.2 revises plan and actions based on evidence and what is learned from evaluation

7.3 uses evaluation and reflection to inform future practice and professional development.

Objectives to be attained for successful completion of this Clinical Support Plan

(What is required to successfully complete the Clinical Support Plan)

Recommended strategies and/or resources to support student improvement

Student agreement to Clinical Support Plan

I agree to the clinical support plan being undertaken by..................................................... (Assessor’s name) at

…............................................................................... (venue)

Student Signature: ……………………………………......................................….…… Date: ………………….

Assessor Signature: ………………….................................................................... Date: ..................…

Final outcome

Satisfactory performance ❒ Unsatisfactory Performance ❒

Assessor’s comment:

Acknowledgement that outcome has been discussed

Student Signature: ........................................................ Date: .................

Assessor Signature: ......................................................... Date: ................

Signed copies must be provided to all relevant parties which may include the student, Course Coordinator, Clinical Facilitator, Academic Liaison or Program Coordinator.