

Bachelor of Midwifery Practice Experience Guidelines 2025

School of Nursing and Midwifery



This document is updated annually.
In the unlikely event that the information in this document conflicts with
University policy, University policy will be upheld)

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Overview of the Bachelor of Midwifery Program

Introduction

The Bachelor of Midwifery program at Griffith University is a three to four year undergraduate degree leading to registration as a midwife in Australia with the Nursing and Midwifery Board of Australia (NMBA). There is an option to undertake Year 1 of the program across two years, making this a four-year pathway. Students will engage in a range of midwifery practice experiences over the program and achieve a comprehensive set of skills necessary to meet the NMBA Midwife Standards for Practice.

The Bachelor of Midwifery program develops graduate midwives who are deeply woman-centered, autonomous, culturally safe, future capable, primary maternity and midwife-led continuity of care, holistic practitioners who envision and transform maternity care. The program development has been informed by international best practice, industry experts and primary health care principles. The Bachelor of Midwifery program enables students to establish and maintain partnerships with childbearing women and their families and facilitate student learning in the acquisition of midwifery skills, knowledge, and professional identity.

Throughout the program, students will learn to provide midwifery care and support for women, their significant others, and infants throughout pre-conception, pregnancy, birth and postpartum. The theoretical component of each course will be introduced during the long MILE (Midwifery Immersive Learning) held at the beginning of each trimester on Logan campus. Students will be involved in clinical skills laboratory sessions on campus during long MILE and through attendance at Short MILE. Midwifery practice experience achievements are documented in an online Midwifery@Griffith Interactive ePortfolio (M@GIE). Students will be expected to record all midwifery practice experience activities and hours, regular reflections of practice, continuity of care experiences (CoCE) and upload completed skills assessment documents into their M@GIE.

Students in Year 1 will provide midwifery care under the direct supervision of a midwife with the emphasis on normal pregnancy, labour, and birth and postpartum. The assessment of clinical skills initially focuses on the student's provision of basic care for the well woman and baby and the ability to identify normal transitional processes during childbearing. During Year 2, students begin to provide care in consultation with experienced midwives and provide care for women with complexities. Clinical skill application evolves during second year with more complex skills and deepening theoretical analysis required. In Year 3, student's ability to plan and manage care of women and babies in a variety of contexts and settings is assessed.

The 5-point Bondy Rating Scale provides a structure for scaffolding the degree of competency of relevant skills and required clinical behaviours. The Bondy Rating Scale was adapted to provide a framework for developing midwifery students' competency during their candidature. The reference points on the rating scale indicate the degree of competency to which the learner has performed the outlined clinical behaviours (Appendix 1). These have been incorporated into the Skills Assessment Tools (SATs) completed within each practice course.

Bachelor of Midwifery Full-time Progression:

Pre-requisites and Co-requisites

Year / Tri	Course Code	Course Title	CP	Prerequisite/s	Co-requisite/s
1-1	1551NRS	Knowing Midwifery	10		
1-1	1552NRS	Foundational Anatomy and Physiology	10		
1-1	1553NRS	Preparation for Midwifery Practice	10		1551NRS 1600NRS
1-1	1600NRS	Midwifery Practice I: Primary Maternity Care*	10		1551NRS 1553NRS
1-2	1556NRS	Life Science for Midwives	10	1551NRS 1552NRS	
1-2	1557NRS	Research Evidence and Clinical Practice	10	1551NRS	
1-2	1601NRS	Holistic Midwifery Care	10	1553NRS 1600NRS	1602NRS 1556NRS 1557NRS
1-2	1602NRS	Midwifery Practice 2: Supporting the Woman & Healthy Newborn*	10	1553NRS 1600NRS	1601NRS 1556NRS 1557NRS
2-1	2662NRS	Maternal and Infant Wellbeing	10	1601NRS 1602NRS 1556NRS	
2-1	2663NRS	Medication, Pharmacology and Screening for Midwives	10	1602NRS 1556NRS	
2-1	2700NRS	Normal Complex Continuum of Childbirth	10	1602NRS	2701NRS
2-1	2701NRS	Midwifery Practice 3: Integrating Care with Complexity*	10	1602NRS	2700NRS
2-2	2702NRS	Complex Maternal Care	10	2701NRS 2700NRS 2663NRS 2662NRS	2703NRS
2-2	2703NRS	Midwifery Practice 4: Complex Midwifery Care*	10	2701NRS 2700NRS 2663NRS 2662NRS	2702NRS
2-2	2705NRS	First Peoples Mothers and Babies	10	1600NRS	
2-2	3900NRS	Care of the Neonate	10		
3-1	3771NRS	Challenges in Practice	10	2702NRS 2703NRS	
3-1	3777NRS	Global Women's Health†	10		
3-1	3778NRS	Midwifery Practice 5: Consolidating Midwifery Practice*	20	2702NRS 2703NRS	3771NRS
3-2	3774NRS	Promoting Normal Birth	10	3778NRS	
3-2	3776NRS	Transition to Professional Midwifery Practice	10	3778NRS	3779NRS
3-2	3779NRS	Midwifery Practice 6: Becoming a Midwife*	20	3778NRS	3776NRS

*Note 1: This is a designated course. A student may be eligible for exclusion based on failure in one or more designated courses.

Bachelor of Midwifery Part-time Progression:

Pre-requisites and Co-requisites

Year/ Tri	Course Code	Course Title	CP	Prerequisite/s	Co-requisite/s
1-1	1551NRS	Knowing Midwifery	10		
1-1	1552NRS	Foundational Anatomy and Physiology	10		
1-2	1556NRS	Life Science for Midwives	10	1551NRS 1552NRS	
1-2	1557NRS	Research Evidence and Clinical Practice	10	1551NRS	
2-1	1553NRS	Preparation for Midwifery Practice:	10	1551NRS 1552NRS 1556NRS	1600NRS
2-1	1600NRS	Midwifery Practice1: Primary Maternity Care*	10	1551NRS 1552NRS 1556NRS	1553NRS
2-2	1601NRS	Holistic Midwifery Care	10	1553NRS 1600NRS	1602NRS
2-2	1602NRS	Midwifery Practice 2: Supporting the Woman & Healthy Newborn*	10	1553NRS 1600NRS	1601NRS
3-1	2662NRS	Maternal and Infant Wellbeing	10	1602NRS 1601NRS 1556NRS	
3-1	2663NRS	Medication, Pharmacology and Screening for Midwives	10	1602NRS 1556NRS	2701NRS
3-1	2700NRS	Normal-Complex Continuum of Childbirth	10	1602NRS	2701NRS
3-1	2701NRS	Midwifery Practice 3: Integrating Care with Complexity*	10	1602NRS	2700NRS
3-2	2702NRS	Complex Maternal Care	10	2701NRS 2700NRS 2663NRS	2703NRS
3-2	2703NRS	Midwifery Practice 4: Complex Midwifery Care*	10	2701NRS 2700NRS 2663NRS 2662NRS	2702NRS
3-2	2705NRS	First Peoples Mothers and Babies	10	1600NRS	
3-2	3900NRS	Care of the Neonate	10		
4-1	3771NRS	Challenges in Practice	10	2702NRS 2703NRS	
4-1	3777NRS	Global Women's Health	10		
4-1	3778NRS	Midwifery Practice 5: Consolidating Midwifery Practice*	20	2702NRS 2703NRS	3771NRS
4-2	3774NRS	Promoting Normal Birth	10	3778NRS	
4-2	3776NRS	Transition to Professional Midwifery Practice	10	3778NRS	3779NRS
4-2	3779NRS	Midwifery Practice 6: Becoming a Midwife*	20	3778NRS	3776NRS

*Note 1: This is a designated course. A student may be eligible for exclusion based on failure in one or more designated courses.

Midwifery Practice Experience Components of the Bachelor of Midwifery

There are six types of midwifery practice activities that students will engage in during the Bachelor of Midwifery program:

1. Continuity of Care Experiences
2. Practice Placement Hours
3. Mandatory Midwifery Practice Experiences / Activities
4. Skill Assessment Tools (SATs)
5. Australian Midwifery Standards Assessment Tool (AMSAT)
6. Reflective Journal

It is the student's responsibility to ensure correct and complete documentation is maintained as detailed within each midwifery practice course.

Student Registration with Nursing and Midwifery Board of Australia (NMBA)

AHPRA will contact the University via the Enterprise Information Systems (EIS) team around census date each year in March and August to obtain the details they require to register Midwifery students with the Nursing and Midwifery Board of Australia (NMBA). This registration is a requirement under National Law, where all students enrolled in an approved program of study in a health profession must be registered as a student with their respective National Board. Students do not need to do anything for this to occur and information provided does not become publicly available. No one can search a student's details on the AHPRA site.

Griffith University is obligated under National Law to notify the NMBA of any student undertaking practice experience with a health impairment that is considered to put the public at risk of harm. The NMBA may also be notified if the student has been charged or convicted of an offence that is punishable by 12 months imprisonment. The NMBA may impose conditions or suspend a student from undertaking practice experience.

Further information is available from the NMBA website: [Student Registration](#)

Upon completion of all program requirements, the University will provide to AHPRA a list of students who are eligible to apply as registered midwives. Students are obliged to ensure they meet English language requirements as part of the registration process. Further information is available from the NMBA Website: [Applying for Registration](#)

Responsibilities of the Student

Fit for Professional Practice Mandatory Requirements


It is important that all students ensure ALL FIT FOR PROFESSIONAL PRACTICE MANDATORY REQUIREMENTS are completed prior to the commencement of any practice placement and are kept up to date continuously throughout the program. The Health Placement Support Hub is responsible for processing and for advising students on their Fit for Professional Practice requirements (FFPPs). These are mandatory for all students within the Health Group even when not on Professional experience (clinical) placement.

Students must keep their original documents or certified copies of original documents as they may be asked to provide evidence of these mandatory requirements.

Students who are not able to provide evidence of the identified mandatory requirements or who allow the validity of their documentation to lapse, are in breach of the [Griffith Health Local Protocol – Fit for Professional Practice](#). Students may be issued with a Tier 1 or 2 Breach of Local Protocol and will be unable to attend any practice placement, including engaging in continuity of care experiences until all mandatory requirements are completed and updated.

In some cases, students will be withdrawn from the course if they have been unable to ‘undertake the professional practice component’ of the course as outlined in the University policy ‘Inability to Complete Required Components of Professional Qualification’ before the Assessment Board meets at the end of each trimester.

Please refer to the Health Placement Support Hub’s Midwifery page on the Griffith [website](#). For any questions you have regarding FFPP requirements you can contact the Health Placement Support hub on:

 Phone: (07) 5552 9480

 Email: healthplacementsupport@griffith.edu.au

Inherent Requirements

There are inherent requirements that students must meet whilst enrolled in the program, see [here](#). Students are advised to maintain their health to ensure safety on practice placement and to protect the safety of the public. If an

impairment is identified that may impact the student's ability to undertake Midwifery Practice Experience, they must meet with the Director of Midwifery Practice Experience and/or Program Director to determine the extent and impact of the disability and if reasonable adjustments can be made in conjunction with the Student Disability support Advisors. If the impairment is temporary, a 'fit for placement certificate' is requested prior to resumption of midwifery practice experience. The medical certificate must be uploaded to the SONIA database under 'Documents' and the Practice Lecturer and Clinical Placement Officer must be notified it has been uploaded.

If reasonable adjustments cannot be made the student would meet with the Program Director to determine if an alternate pathway is possible, students are also directed to AHPRA to determine if the impairment will impact registration as a midwife in the future.

The medical certificate must be uploaded to the SONIA database under 'Documents' and the Practice Lecturer and Clinical Placement Officer must be notified it has been uploaded.

Students with allergies are to inform the School of Nursing and Midwifery of their individual requirements for specific activities (such as immersive simulations).

Students on WorkCover from paid employment

Although it is the responsibility of the individual not to put themselves at additional risk by participating in tasks that they are unfit to do or that may exacerbate a pre-existing injury, the school needs to apply due diligence and has a duty of care to students. We request that any student on WorkCover from their paid employer advise the BMid Placement Officer and provide appropriate documentation.

Notification should preferably be supported by the Workers Compensation Certificate and be made as soon as possible so that appropriate steps may be followed.

- Should the certificate advise that minimal restrictions are in place or WorkCover is for treatment only, it is likely the student can attend placement as normal. If restrictions are in place, students will be unable to attend their practice placement until WorkCover ceases and full clearance is given, or their treating doctor provides clearance for placement and all duties included.

Please note: Students on WorkCover will be reviewed on a case-by-case basis, and as such should not be compared to others. If it is discovered that a student is on WorkCover and the above steps have not been taken by the student, it will be assumed that full restrictions are in place and the student will be removed from placement.

Students with a Disability

Students with disabilities are encouraged to disclose the nature of their disability to appropriate Griffith Staff. See [Student Disability and Accessibility Website](#).

Students with disabilities should refer to the 'Students with Disabilities Policy' and seek assistance from the Disabilities Service staff, the Midwifery Practice Director or Program Director.

All students with disabilities are advised to seek advice from AHPRA regarding any impacts to performance capacity they feel their disability and /or health condition may impose - to check they will meet registration requirements.

Pregnancy

Students who are pregnant during a midwifery practice course must notify their Practice Lecturer of their pregnancy and expected date of birth so that the professional experience placement can be adequately scheduled.

Students who are greater than 34 weeks gestation or within six weeks postpartum must also provide their Practice Lecturer with a certificate from their care provider stating that they are 'fit for professional experience (clinical) placement.'

Lactation Breaks

Griffith University encourages breastfeeding and supports students who choose to continue breastfeeding once they return to their undergraduate studies. The following Information is adapted from Queensland Health's Breastfeeding and Work Policy (2019).

When Expressing Students Must:

- Discuss their specific needs and situation with their Practice Lecturer and appropriate ward staff.
- Provide own breast milk expressing and storing equipment (if not available in the workplace).
- Supply appropriate storage containers for expressed breast milk and clearly label these containers with their name and date before placing it in the refrigerator.

When Breast Feeding Students Must:

- Understand that restrictions still apply for caregivers that enter the workplace with the student's newborn/child and ensure caregivers entering the workplace do so on the understanding that restricted access applies.
- Ensure that they, their caregivers, and the child/children in their care, avoid environments when there is a risk of cross infection or injury.
- Constantly supervise children in the workplace.
- Ensure that children are delivered directly to the workplace facility designated for the purpose of

breastfeeding/lactation breaks.

- Ensure caregivers and the child/children in their care vacate the workplace at the completion of each lactation break.

Lactation breaks

Lactation breaks are available for students who choose to combine practice placement and breastfeeding. The lactation breaks are specifically for:

- Expressing breast milk.
- Feeding the baby (either on or away from the work site).

Lactation breaks can be accessed when other specified breaks are not suitable. Students combining practice placement and breastfeeding may be granted up to a total of one-hour lactation break per working day. The one-hour lactation breaks include travelling time for students who take lactation breaks away from the facility.

When lactation breaks can be taken

Lactation breaks are to be taken at times appropriate to the student and the ward/department/ facility. The flexibility women need to breastfeed, or express milk is to be considered in the timing of lactation breaks. For example, some breastfeeding students may require two 30-minute lactation breaks, whereas a one-hour lactation break may be required by other students.

Professional Behaviour

Students enrolled in the Bachelor of Midwifery program are expected to maintain a high standard of professional behaviour. It is an expectation that students will know where to locate relevant policies, professional codes and guidelines, understand these documents and conduct themselves accordingly.

See the Health Placement Support Hub website: [Your Performance](#)

Any behaviour deemed to be in breach of expected professional conduct may be cause for disciplinary action.

Social Media

Students need to be aware that no information regarding Practice placement can be conveyed through social media. This includes any reference to a healthcare facility, dates and shifts of a Practice placement, photos taken whilst on Practice placement and any incidents or issues while on Practice placement. It contravenes Queensland Health and Griffith University policies regarding confidentiality if students discuss the University, clients, staff or other students on

social media sites such as Facebook. **The School of Nursing and Midwifery will take breaches of these policies seriously.**

See Griffith's [Social Media Guidelines](#), and NMBA [Social Media Guidelines](#)

Health and Safety

The University requires those responsible for all University activities whether on or off campus to comply with relevant Health and Safety legislation, codes of practice, advisory standards and established good practice including Australian Standards as well as University policies and procedures.

All staff and student are expected to:

- Comply with University health and safety policies and procedures.
- Conduct their activities in a manner which prevents personal injury or injury to others, and damage to property.
- Cooperate with and actively participate in the University's safety management system.
- Report any incidents, unsafe conditions or acts that come to their attention.

See the website for more details: [Health, Safety and Wellbeing](#)

Work Health and Safety inductions are conducted prior to commencement of clinical practicum and your allocated health care facility.

Accidents and Injuries – Incident Reporting

In the event of an accident, incident, or injury you should, where able, initiate first aid treatment if required and/or report to a First Aid Officer who will initiate first aid treatment if required. As outlined in the [Guidelines for the Prevention and Control of Communicable and Notifiable Diseases](#), this includes exposure to blood or body substances.

Accidents, incidents, or injuries that occur whilst on placement should be reported to:

- 1) Your Preceptor and procedures of the healthcare facility followed, including completion of any workplace health and safety forms;
- 2) Your Practice Lecturer and the BMid Placement Officer; and
- 3) Griffith University via the Gsafe system for reporting incidents.

Student Concerns Whilst on Practice Placement

Generally, practice placement is both inspiring and rewarding and most students value the experience and opportunities presented to them. However, there can be situations that arise where a student feels there are issues of concern. In


every situation there are channels of communication, and it is important that these are adhered to in a professional manner.

If concerns have not been resolved after discussion firstly with your Preceptor, the Practice Lecturer should be contacted. If there are still unresolved concerns, please contact the Midwifery Practice Director.

See the websites: [Student Support](#) and [Workplace Discrimination, Harassment and Bullying](#)

Griffith Urgent Midwifery Phone

Whilst undertaking midwifery practice experience of a CoCE outside of normal working hours (8-5pm) there may be times when you cannot contact your Practice Lecture. If there is an **urgent** situation that you require support, you are encouraged to speak with the supervising midwife or Team leader. Additionally, you can call the Griffith Urgent Midwifery Phone. A midwife from the academic team will be on call and able to offer remote assistance.

 Phone: (07) 5552 9050

Professional Dress Requirements Whilst on Practice Placement

- University photo identification at all times.
- Hospital identity badge where provided should be worn at all times.
- No nail polish or acrylic nails as they can be a source for infection and cross infection.
- No unnecessary jewellery - jewellery is a source for infection and interferes with procedures.
- A watch with a second hand.
- Students can choose to wear a formal skirt, slacks, or long shorts in navy blue or black.
- Students can wear a blue jacket or cardigan to and from clinical areas and a navy blue vest may be worn over shirts in colder months - students must ensure however that their forearms are uncovered during clinical practice.
- Socks or stockings with no obvious logo or patterns are acceptable.
- Safe shoes which are fully enclosed with non-slip sole in blue or black.
- It is important that the shoes are not cloth, multi coloured or open toe.
- Midwifery clinical uniform polo shirt can be purchased the from the [School Locker](#).

Care of the Woman

Students are required to provide woman centred care and should ensure that the comfort and needs of the woman and her baby are always the primary focus. All components of communication are essential elements of midwifery care. Each student should be committed to developing these skills and be sensitive to women's needs. It is an expectation that each student provides adequate information to facilitate informed decision making and consent prior to the commencement of any procedure or activity. The woman has the right to change her mind and the student should discontinue at once if this occurs.

Attendance on Midwifery Practice Experience Placement

There is an **80% mandatory attendance to MILE**, students that cannot meet this will need to speak with their practice course convenor to discuss how they can meet the learning. Failure to attend MILE may result in students failing the course. It is up to the student to read the midwifery academic calendar to ensure they will be present for MILE.

- Practice experience is an essential component of the BMid program and accounts for almost 50% of the learning including Continuity of Care Experiences (CoCE) relationships. Minimum practice attendance requirements are documented in the Course Profiles and in your M@GIE. Students must be aware of the theoretical and practice requirements to pass each course. It is the student's responsibility to participate in the practice placement setting actively and appropriately.
- The immersive learning activities in the midwifery laboratories provide the opportunity to apply midwifery knowledge to clinical scenarios. Students develop confidence, capability, and capacity with essential midwifery practice skills (including critical thinking and reflective practice) and this experience represents a significant aspect of clinical learning within the curriculum. Attendance at Short MILE is compulsory for all students enrolled in a practice course. To facilitate this, special consideration is provided for students that have CoCE commitments. Students who do not attend at least 80% of MILE sessions are required to meet with the course convenor to discuss how this missed learning can be gained.
- CoCEs take precedence over rostered clinical shifts. However, students undertaking Continuity of Care visits/births with women need to make up these hours if they undertake them in their rostered shift time.
- The clinical hours and mandatory practice experiences in each clinical course are located in M@GIE. At the end of each trimester, the student is responsible for advising their Practice Lecturer of completion or any challenges in completing clinical requirements. In addition, the Practice Lecturer regularly monitors student achievement by accessing M@GIE via check points throughout the trimester and at least two individual meetings with the student.

- All required hours identified in each course need to be completed. If a student fails to complete all their midwifery practice requirements, extra hours may be organised by the Practice Lecturer. Any extra hours worked to achieve mandatory experiences are not transferable to another course.

Roster Guidelines

These roster guidelines have been developed to reflect the expectations of students attending practice placement whilst undertaking a Bachelor of Midwifery. The ability to work with an allocated roster demonstrates your professional accountability to future employers which is important when you apply for a graduate position. Individual hospitals will have additional guidelines to adhere to.

All shift changes/swaps/cancellations are managed within the BMid Roster team and closely monitored by Practice Lecturers and Hospital sites. The BMid Roster team can be contacted at the below email. When emailing the BMid Roster team please include your hospital site and year level either in the subject line, email, or your signature block.

 Roster enquiry emails: bmidroster@griffith.edu.au

Office Hours: 8am to 4pm Monday to Friday (excl Public Holidays)

Absences

Please notify your Practice Lecturer, the BMid Roster team and the hospital Team Leader of any absences that are less than 24 hours away. Hospital contact details can be found in the hospital's orientation guide.

Students must inform the team leader of the health agency and the Practice Lecturer if they are unable to undertake scheduled practice placement. It is the student's responsibility to negotiate with their Practice Lecturer and facility to make up lost time in order to complete the minimum number of clinical practice hours for each clinical course. Continued student absence from MILE or Practice placement may result in course failure.

Any absences of 3 or more consecutive days may require a medical certificate or a statutory declaration to be emailed to the BMid Roster team and your PL if requested.

Shift Cancellations

Students must notify their Practice Lecturer and the BMid Roster team of any cancellations with a minimum of 48 hours' notice. If emailing over the weekend the 48 hours will commence on Monday. Please notify us if there are any extenuating circumstances which explain the late cancellation. Repeated cancellations (> 3) with less than 3 business days' notice will trigger a conversation with your Practice Lecturer. This may also involve an informal AMSAT.

Shift Requests/Swaps

We encourage all students to swap shifts amongst your year level cohort rather than cancelling a shift wherever possible. Please email your Practice Lecturer and the BMid Roster team with any shift requests/swaps providing a

minimum of 48 hours' notice. If emailing over the weekend the 48 hours will commence on Monday. If requesting a swap, the student requesting the shift swap must copy the other student into the email.

Midwifery@Griffith Interactive ePortfolio (M@GIE)

All students are provided with their own electronic portfolio (M@GIE) during the first long MILE period in which they are undertaking a practice course. This is the place where an ongoing record of all midwifery practice activities will be stored throughout entire degree program. It is the student's responsibility to maintain accurate, contemporaneous records and update their M@GIE on a regular basis. It is expected that students record all experiences in M@GIE within 48 hours of the experience. It is vital that all students have regular reliable internet access and only use Chrome and Firefox web browsers and the M@GIE app to access the M@GIE system.

Students are required to demonstrate the development of midwifery practice competency throughout the progression of the midwifery program. M@GIE is used to document practice achievements that are linked to each practice course. M@GIE will be monitored and viewed by the student's Practice Lecturer throughout the year to monitor progress and assist the student in required areas.

Please note that information recorded in M@GIE will undergo a random auditing process. It is imperative that the information recorded is accurate and reflects clinical skills completed. **Consent forms cannot be signed by anyone other than the woman partaking in the CoCE.** Any incorrect entries will be managed on a case-by-case basis and could result in exclusion from the Bachelor of Midwifery.

Responsibilities of the Practice Lecturer (PL)

The Practice Lecturer's (PL) role is to support students clinical learning on Practice placement. There are three key areas of responsibility:

- Student support in practice placement to achieve their clinical learning objectives.
- Support Preceptors in the facilitation of student learning.
- Promote partnership between the University and Health Service.

Student Support in Practice Placement to Achieve their Clinical Learning Objectives

The PL works proactively to provide learning opportunities for students that achieve their learning need and objectives. The PL plays a pivotal role in assisting the integration of theory and practice and supporting the progress of the students' journey in the program. The PL acts as an academic mentor and is fully involved in any factors that may impact

on the students' progression during the program. The PL provides advice regarding appropriate resources to support the student within the University and clinical environment.

Support Preceptors in the Facilitation of Student Learning

The PL advises preceptors and students on matters related to practice requirements and ensuring learning opportunities are provided to support achievement of midwifery knowledge, skills, and mandatory clinical experiences. The PL provides education to support Preceptor's facilitation of students at practice partner site.

Promote Partnership between the University and Health Service

Practice Lecturers are involved at the interface of education and maternity service. They are responsible for working in partnership with practice partners to build relationships that support achievement of student learning in clinical practice. PLs work collaboratively with practice partners to resolve any midwifery knowledge and skills issues that may affect student achievement in the practice environment, including the audit of clinical areas to ensure the students are placed within a quality learning environment. The PL role is included in more detail in Appendix 3.

Responsibilities of Supervising Midwives/Practice Partners

- Actively engage in teaching students.
- Explore with students their learning goals.
- Give informal contemporaneous feedback to students regarding their progress and advice on how improvements can be made to facilitate learning - this feedback is usually oral, but it may also be written or a combination of both.
- During any assessment give comments to indicate:
 - The student's strengths;
 - Areas that need improvement; and
 - Suggestions for making improvements.

If the supervising midwives/practice partner has a concern with a student, they will attempt to address the situation with the student as soon as possible and contact the student's Practice Lecturer in the first instance to discuss the issue. The NMBA Midwife standards for practice are used to guide competency development. This document can be found [online](#).

The Formative Review Process

The Student Formative review process allows the Practice Lecturer to provide the student with written feedback addressing any concerns regarding the student's knowledge, skills, or attitude on practice placement. It is important that a student is informed about the concerns and a plan is agreed to support improvement.

Formative Review -This represents a formalised process that occurs as a response to concerns related to clinical performance or professional behaviour. The formative process should be initiated following discussion with the student, Preceptor, Practice Lecturer, and practice course convenor and documented in the formative plan.

The Formative Review will link to the NMBA Midwife standards of practice. Ideally, the Formative Review is administered early in the practice placement to provide a plan of student support for the trimester. The Formative Review outlines a written plan that clearly describes to the student the course of action required to develop their knowledge, skill and/or attitude and includes an agreed timeframe. The Formative Review is completed and updated in line with student progress and the student should continue to receive feedback and direction as necessary in order to successfully complete their practice course.

Professional Practice

Continuity of Care Experiences (CoCE)

Continuity of Care Experiences are the ongoing midwifery relationship between the student and the woman from initial contact in early pregnancy through to the weeks immediately after the woman has given birth across the interface between community and hospital settings. Throughout the program students will be required to complete 20 CoCEs.

Students will be supported by the University and in the clinical learning environment in seeking/recruiting women for CoCEs over the duration of the Bachelor of Midwifery program. Students develop a professional relationship with women who agree to participate in the CoCE and will provide care to their level of experience. Students must attend a minimum of 5 antenatal assessments with the continuity of care woman and attend the labour and birth (this will require being 'on call'). Students are also required to attend a minimum of 3 postnatal assessments with the woman and her baby including the assessment of the woman and baby at 4 - 6-weeks post-partum.

Students are required to recruit women for CoCE who are birthing at the student's practice placement site. Recruitment may occur through several mechanisms but is mainly through practice partner sites in the antenatal clinic. Midwives are encouraged to ask women if they are interested in involving a student in their care. Expression of interest details are collected and distributed to students by a variety of processes (slips or a CoCE book). Please clarify the process for accessing contact details for CoCE women at your practice placement site with your Practice Lecturer. Practice Lecturers are available to support students with recruitment if required. Students may also recruit women they meet in antenatal

clinic or other clinical areas. Once the woman agrees to be involved the woman is asked to sign an electronic consent form in the students' M@GIE portfolio.

Consistent with the Midwifery@Griffith Metavalues and the recognition of the relational skills required by the midwife to develop a partnership relationship with the woman, we do not sanction recruitment of women for CoCE via social media. This policy also addresses student safety concerns when sharing personal details via social media. For professional relationship and boundary reasons, is not appropriate for students to recruit family members or close personal friends for CoCE.

It is the student's responsibility to develop and maintain a relationship with each woman. The student's Practice Lecturer will support the student's learning throughout the CoCE experience and will have access to their M@GIE to monitor the recording and reflection on these experiences. These experiences are attached to practice courses to show progression throughout the program.

Continuity of Care experiences will continue throughout the full calendar year and across the traditional university trimester breaks. Progress through each year of the program depends on the completion (i.e., antenatal assessments, labour and birth and postnatal care to six weeks) of a minimum number of CoCEs. Students should be cognisant of the minimum number of CoCE required to successfully complete each year level. The process for recruitment for CoCEs will be ongoing to reflect the completion of CoCEs and the need to recruit for the following year. The woman's consent to participate in CoCEs must be sought and she may choose not to have a student attend her (as any woman can) without jeopardising the care she receives from the hospital or privately practicing midwife.

Women may also choose to withdraw consent and terminate the partnership with the student. The woman can complete the consent form directly into the M@GIE platform.

Please refer to the individual practice course sites for specific continuity of care experience guidelines. There are some overarching principles to guide recruiting and managing CoCEs. However, a degree of flexibility is possible to manage workloads. If you would like to discuss an alternative strategy to undertake the 20 CoCE required for the Program, please discuss with Director of Midwifery Practice Experience Karen McDonald-Smith. When recruiting it is recommended to stagger the dates the women are due to avoid extra pressure. It is also important to note that a break between semesters or over the summer period to rest is advised where possible.

All CoCEs require five (5) antenatal assessments, birth and three (3) postnatal assessments, any variation to this must be discussed with your Practice Lecturer and a special approval form may be uploaded if the experience is still considered eligible for the Program.

From 2025

Year 1

Students should recruit and undertake care for six (6) women. These experiences should be completed prior to Long MILE commences for year 2. If a student completes 6 CoCEs, they may recruit additional women to be considered for the following year, after discussing with their PL.

Year 2

In first trimester in Year 2 the focus is undertaking placement hours. In trimester 2 students will commence recruiting CoCE women to facilitate the completion of 14 CoCEs by the end of trimester 1, Year 3.

Year 3

In first trimester students will focus on completing a total of 20 CoCEs across the program. In trimester 2 students will focus on undertaking placement hours.

Due to insurance restrictions the midwifery student is not permitted to visit the woman in the woman's home unless with a qualified clinician. If the midwifery student arrives at the woman's home prior to the midwife arriving they must wait for the midwife to attend before entering the woman's house. The student can meet with the woman at the antenatal clinic, midwifery practice, GP surgery or Child Health centre. When the woman is in labour the student should ensure that the woman is aware to contact them at the same time as she contacts the hospital, and that the student will meet the woman at the hospital or the home (if attending with a private practice midwife). Do not enter the woman's house without the presence of the registered midwife. The woman will need some way of contacting students who are on call for their CoCE woman (i.e., mobile phone or pager). For postnatal visits, it would be preferable for the student to visit the woman in the hospital and at least once at home with a midwife or child health nurse present. Students may meet up with women when they visit child health services. The student will need to make arrangements with the woman to have final contact at the six-week postnatal visit with a clinician. Generally, it is expected that students will make their initial contact with the woman they are recruiting into a CoCE as early in the pregnancy as possible.

The student must be aware of their scope of practice and can only provide care and/or advice to the woman and her family under the direct supervision of a midwife or medical practitioner. Students must record the practice components of the care episodes within the CoCE template in their M@GIE and reflect on these experiences in their reflective journal.

Please be aware that Griffith University does not provide any insurance for damage to your own or a third-party vehicle when driving to and from CoCE appointments or placement activities.

Missed Appointments/Births within CoCE Relationships

There will be occasions when a student fails to meet minimum requirements within the CoCE relationship. Where the student believes their non-attendance was beyond their control for example the baby birthed before arrival of student,

or transfer of woman's care to another facility. The student is advised to complete a special approval request via the online form located in M@GIE. The Practice Lecturer will consider this request and may consult the practice Course Convenor and/or Director Midwifery Practice Experience. Each case will be considered on an individual basis and if approved the student will be given permission to include the woman within the mandated CoCE requirements.

Log of Practice Placement Hours

Throughout the program students will spend approximately 1426 hours engaged in clinical activity working with women and their families. A significant amount of this time will be the time students spend within their CoCEs. Additionally, students are required to maintain a log of the hours undertaking midwifery practice within the hospital and community whilst undertaking clinical shifts or non- Continuity of Care mandated experience related work with caseload midwives. Within each course a minimum number of practice placement hours will be specified which students must complete. These hours do not include the main meal break (30 minutes), however if the student misses the meal break this should be identified. The student is expected to maintain a log of practice hours contemporaneously and record their hours in their M@GIE within 48 hours of completion.

Students are permitted to attend practice for a maximum of 12 hours, you may in consultation with your PL or supervising midwife continue to provide emotional support to the woman but must not continue to provide care to meet fatigue leave considerations. This includes during the labour and birth of a CoCE. On occasions students will be required to undertake additional clinical hours to that prescribed in each course to achieve the mandated clinical experiences ascribed to the course. Any extra hours worked within a course must be recorded within that course and are not transferrable to any other course.

Mandatory Experiences/Activities

Throughout the program students are required to demonstrate clinical skills in order to gain competency as a midwife. Students will build on skill development progressively throughout the program in order to demonstrate competency at the completion of the degree. On completion of the program all students will have achieved the mandated clinical requirements as determined by the Australian Nursing and Midwifery Accreditation Council (ANMAC) (2021).

Bachelor of Midwifery -Completed Clinical Requirements Over Three Years

Mandated Number of Experiences for Registration
Student has completed 20 Continuity of Care experiences
Student has undertaken 100 pregnancy assessments
Student has undertaken 100 postnatal assessments
Student has undertaken 100 well baby assessments
Act as the primary accoucheur for 30 women who experience a spontaneous vaginal birth Provide direct and active care to an additional 10 women throughout the first stage of labour and where possible, during birth
Student has experience of caring for 40 women with complex needs Student has completed 10 Vaginal Examinations in labour Student has completed 20 full examination of the newborn
Experiences in supporting women to feed their babies and promote breastfeeding Experience in women's health and sexual health Experience in the care of the neonate with special care needs Experiences in assessing the mother and baby at four to six weeks postpartum Student has performed a minimum of 4 Perineal Repair (including 2 simulation)

* Acting as the primary accoucheur also involves:

- providing direct and active care in the first stage of labour, where possible
- managing the third stage of labour, including the student providing care as appropriate if a manual removal of the placenta is required
- facilitating initial mother and baby interaction, including promotion of skin-to-skin contact and breastfeeding in accordance with the mother's wishes or situation
- assessment and monitoring of the mother's and baby's adaptation for the first hour
- post-birth including, where appropriate, consultation, referral, and clinical handover (ANMAC, 2021).

Within each practice course students will be required to maintain a contemporaneous log of all clinical activity. The student is expected to complete, in their M@GIE, a cumulative log of hours worked within clinical shifts after each shift worked. The student is simultaneously required to record, within their M@GIE, a cumulative log of ongoing clinical achievement.

Skill Assessment Tools (SATs)

Within each practice course throughout the program, students will be required to demonstrate competence in a range of specific midwifery skills. Each practice course will have skills requirements attached which are a mandatory component of the course. The SATs will be described in detail within each course. SATs will be completed by the student with the practice partner, other midwives, or their Practice Lecturer.

- The Practice Lecturer or supervising/ midwife/ practice partner may use any of the Skill Assessment Tools to facilitate clinical learning.
- Students may have more than one attempt at a Skill Assessment Tool - the goal is to continue developing skills until competent.
- The student reflection section on the Skill Assessment Tools must be completed.
- All SATs must be signed by the student and the supervising midwife. The supervising midwife's name must also be printed for further reference if required. Written feedback must also be provided by the supervising midwife.
- All completed SATs must be uploaded into the M@GIE as a single document under the folder designated for the SAT.

Australian Midwifery Standards Assessment Tool (AMSAT)

The students' Practice Lecturer will assess student performance against the Midwife standards for practice using the AMSAT Tool. The purpose is to assess overall performance as a developing midwife. Following a discussion between the student and the Practice Lecturer, the student will be graded against this scale. AMSATS are conducted once during the trimester, towards the end of the placement in conjunction with a Mid Trimester Check In. The AMSAT template can be found in M@GIE. For each midwifery standard, students are required to grade themselves using a scale, with the expected grade being Satisfactory or above. Students will also need to provide an example of how they have demonstrated one of the criteria within each of the standards. The student will need to complete this prior to meeting with their Practice Lecturer for the AMSAT discussion. The Practice Lecturer will also provide a grade based on feedback and information during the discussion. Students can find information and resources about the [AMSAT tool](#) online.

Failure to achieve the required minimal level of competency will result in a non-graded fail grade being awarded for the practice course.

Critical Thinking Development and CACTiM Tool

As part of your end of trimester AMSAT for each year, you are required to also complete the CACTiM (Carter Assessment of Critical Thinking in Midwifery) tool in trimester two. This tool evaluates the application of critical thinking to midwifery practice. Critical thinking development is essential in midwifery practice where clinical decisions are made continuously and sound judgement is crucial in the provision of safe, evidence based and woman centred care.

The tool provides examples of critical thinking in midwifery practice, and we ask you to be honest in your responses about your own practice. You are also asked to provide an email address of your Preceptor (or a midwife you have worked with during the trimester) for them also to complete the tool. Your responses to this tool and responses from your Preceptor will be used with your Practice Lecturer during your AMSAT discussion. The tool and guidelines on how to complete the tool are available in M@GIE. Please complete the tool at least 1-2 weeks prior to your end of year AMSAT meeting with your PL to allow time for your Preceptor to complete.

Holistic Reflection

The ability to reflect on practice is a requirement of all practicing midwives as detailed within the NMBA Code of Conduct for midwives. Students are introduced to the Bass Holistic Model of Reflection as a means of thoughtful engagement with the Bachelor of Midwifery program.

Reflection upon experience throughout the program is an essential aspect of personal and professional development as a midwife. Reflection provides the student with an opportunity to explore an experience and develop new insights. The aim is to identify what happened, what their role in the experience was and to evaluate and formulate a plan for the future.


Reflection on midwifery practice and other learning opportunities helps students to understand the impact of their actions and the actions of others. Ultimately it helps them to learn from events and situations they are involved in and facilitate the improvement of their professional skills. By maintaining a reflective journal, the student will acquire the skills required to develop a reflective approach to midwifery. Reflective writing enables students to keep a record of their experiences, thoughts, questions, ideas, and conclusions that will signpost their learning journey. The skills acquired in maintaining a reflective journal throughout the midwifery program will enable students to be in a position to sustain reflective practice and contribute to personal development throughout their professional lives. Each year you will undertake a reflection in relation to your clinical course including COCE, part of this process is to undertake the Holistic Reflections Self-assessment tool (HRSA) embedded in M@GIE. Your PL will mark the reflection using the Holistic reflection assessment tool (HRAT). Further details of this process are embedded in the associated Learning@Griffith sites.

Clinical Placement Office

Within the School of Nursing and Midwifery Clinical Placement Office a Clinical Placement Officer (CPO) is designated to coordinate Practice placements for Bachelor of Midwifery students. The CPO will organise your practice placement at one of our partner hospital sites and provide detailed information and support on:

- Hospital site placement and orientation
- Keeping up to date with your FFPP compliance
- Hospital rostering
- How to use M@GIE
- Providing M@GIE maintenance and troubleshooting support.

The Clinical Placement Office is the central liaison point for practice placements between Bachelor of Midwifery Directors, Course Convenors, Practice Lecturers, hospital sites, Health Placement Support hub and students. All correspondence regarding practice placements should be sent to:

 Phone: (07) 3382 1476

 General enquiry emails: bmidcpo@griffith.edu.au

Office Hours: 8am to 4pm Monday to Friday (excl Public Holidays)

When emailing the CPO, please ensure professionalism in your email correspondence. Please also identify yourself, your Student (S) number, year level and hospital site in your signature block, for example:

Dana Fisher | Bachelor of Midwifery Student Year 2

Griffith University | Logan Campus | Logan Hospital | s1234567

M 0400 123 456 | E dana.fisher@griffithuni.edu.au

Appendices

Appendix 1 – The Bondy Tool

Scale label	Score	Standard of practice	Quality of performance	Level of assistance required	Pathway for student learning
Dependent	1	Unsafe Unable to demonstrate behaviour Lack of insight into behaviour appropriate to context	Unskilled Unable to demonstrate behaviour/ procedure	Required continuous verbal and continuous physical directive cues	Beginning student year 1 trimester 1
Marginal	2	Safe only with guidance Not completely accurate Incomplete achievement of intended outcome	Unskilled Inefficient	Required continuous verbal and frequent physical directive cues	Beginning student year one beginning trimester 2
Assisted	3	Safe Accurate Achieved most objectives for intended outcome Behaviour generally appropriate to context	Proficient throughout most of performance when assisted	Required frequent verbal and occasional physical directives in addition to supportive cues	Student on completion of first year And commencing second year courses
Supervised	4	Safe Accurate Achieved intended outcome Behaviour is appropriate to context	Proficient Confident Reasonably expedient	Requires occasional supportive cues	Level to be reached in context to practice throughout second year of the program
Independent	5	Requires occasional supportive cues	Proficient Confident Expedient	Minimal support or supervision required	Level to be reached in context to practice throughout the third year of the program

Bondy, K.N., (1983) Criterion-referenced definitions for rating scales in clinical valuation. *Journal of Nursing Education*, 22(9), 376-382.

Appendix 2 – Practice Lecturer Role

Student support in clinical placement	
Clinical Placement/Midwifery Practice Experience support	<ul style="list-style-type: none"> • Address any student practice concerns that may arise whilst in clinical site • Ensure student aware of PL availability and how to access PL support • Provide timely response to issues affecting student in clinical area • Facilitate effective communication between students & preceptors • Ensure student access to experience to facilitate achievement mandatory practice requirements • Ensure students are appropriately supervised to reflect scope of practice • As appropriate in consultation with preceptor/ midwife facilitate acquisition practice skills • Monitor & document in M@GIE student progress of clinical experiences
Preceptor/Roster support	<ul style="list-style-type: none"> • Liaise with practice site to ensure rotation reflects clinical requirements • Liaise with Student Roster Support in clinical placement • Identify issues with access to rostered shifts or preceptors & action in timely manner • Arrange extended clinical placement to support student achievement of clinical requirements • Ensure student attends clinical practice site as per roster and follow up
Continuity of Care	<ul style="list-style-type: none"> • Provide advice to student regarding recruiting/ recording continuity of care experience (CoCE) • Provide advice re: establishing, maintaining & concluding a CoCE relationship • Facilitate recruiting of women through ANC/student-led clinics & dissemination of requests for CoCE • Assess special approval request for missed elements of CoCE • Liaise with clinical course convener re: complex special approvals • Advise students re: demands of on-call for CoCE, attending shifts & fatigue breaks • Support students to self-manage on-call & missed CoCE elements

Supporting progression of student	<ul style="list-style-type: none"> • Monitor student's practice development progression throughout the trimester • Address issues related to achievement of clinical requirements ie hours, SAT • Conduct progress meeting with each student midway through trimester & document in clinical eportfolio M@GiE • Provide feedback to student regarding progress in a timely and positive manner • Facilitate remedial support for students identified as unable to fulfil requirements • Inform practice course convener of any issues affecting student progression & agreed action • Initiate formative plan in accordance with agreed process • Provide opportunity for student to debrief practice experience in a safe environment • Promote critical reflection in clinical practice • Resolve student queries related to completion of clinical eportfolio (M@GiE)
Preceptor / midwife facilitation of students	
Facilitating students	<ul style="list-style-type: none"> • Work in partnership with preceptors to provide an effective learning environment • Provide guidance regarding student support & clinical requirements of program • Provide student learning opportunities on placement in consultation with preceptor • Act a conduit between preceptor & student to ensure appropriate lines of communication • Arrange to meet with student when concerns re: clinical performance identified & feedback to preceptor • Support preceptor & student when adverse clinical outcome or concerns relating to student practice arise • Provide Preceptor resource folder re: clinical requirements student names & photos • Provide facility with practice requirements beginning each trimester
Assessing students in practice	<ul style="list-style-type: none"> • Work in partnership to support development & assessment of midwifery clinical skills • Facilitate combined meeting between student & preceptor as appropriate • Encourage preceptor to provide regular & timely feedback to student regarding clinical performance and strategies for improvement • Work in partnership with preceptors to identify & support students not yet achieving clinically • Establish support plan for students failing to achieve clinical requirements • Review student progress against agreed goals

Practice partnership	
Support professional development midwives	<ul style="list-style-type: none"> Promote awareness and understanding of the Bachelor of Midwifery program, Master of Primary Maternity Care program & developments in Midwifery@Griffith Review & advise re: updating learning & teaching resources at practice partner sites Promote culturally safe, contemporary & evidence-based perspectives on midwifery practice
Provide workshops to support practice partners	<ul style="list-style-type: none"> Support midwifery preceptors with skill and knowledge development by: Providing Midwifery Clinical skills update clinical area ie perineal repair, cannulation Work with practice partners to prepare preceptors/ midwives engaged in supervising, supporting and/or assessing students during clinical experience Conduct workshops, informal debriefing and one-on-one assistance to practice partners/supervising midwife to develop skills in documenting student progress, achievements & poor performance
Communication between University & Practice Partners	<ul style="list-style-type: none"> Attend Women's & Newborn education meeting at partner site Act as champions of change to promote evidence-based approaches Provide a timely response to address identified education / student / practice education issues in accordance with agreed local educational strategy
Designated Education Lead role	<p>Practice Lecturer responsible for:</p> <ul style="list-style-type: none"> Fulfil clinical site portfolio role in discussion with Designated Education Lead for GCUH/ Metro-South & Darling Downs HHS Attend Practice lecturer / Education lead meetings & provide feedback re: student experience in placement Provide report re: issues affecting student clinical experience & confirm action taken Develop a roster of PL support to agree PL cover including MILE/ AL Attend monthly Senior Management meeting at Practice Partner site Communication with HoS/Midwifery Professional Lead. PD to ensure quality cycle feedback from Practice Partners Conduct monthly meetings with Practice Lecturer team Provide support to practice lecturers to perform PL roles Provide feedback to Leadership team

Work Integrated Learning	<ul style="list-style-type: none"> • Advise students regarding health & safety / work integrated learning process • Monitor risk management strategies in clinical area & report appropriately • Provide guidance re: procedures for reporting sickness & fit for return to clinical practice • Inform Practice site and Preceptor when student not fit for placement i.e., Blue card expiry
Achievement of Clinical Course Requirements	
Communication Practice Course Convener (PCC)	<ul style="list-style-type: none"> • Verify documentation to demonstrate achievement of mandatory clinical requirements • Undertake AMSAT at completion of trimester • Inform PCC of any concerns related to student progress or achievement of clinical mandatory experiences • Refer student to PCC when extension to clinical is required • Advise convenor of assessment of competence & achievement of clinical requirements
Participate in MILE	<ul style="list-style-type: none"> • Participate in midwifery skills teaching in clinical laboratories as part of MILE • Facilitate integration of theory and practice across the whole of program • Promote reflexive conversations to support the development of critical thinking within MILE and practice
Communication PD / BMid CPO	<ul style="list-style-type: none"> • Inform CPO of any changes affecting student progression within clinical practice • Communicate with Director of Midwifery Practice Experience or PD any concerns related to professional behavior of students • Refer students seeking pathway advice to PD to support student retention & progression

References

ANMAC (2021). Midwife Accreditation Standards. Australian Nursing and Midwifery Accreditation Council, Canberra.

Bondy, K.N., (1983) Criterion-referenced definitions for rating scales in clinical valuation. *Journal of Nursing Education*, 22(9), 376-382.

Griffiths, M., Creedy, D.K, Donnellan-Fernandez, R. & Carter, A.G. (2023). Development and testing of the Midwifery Perceptions and Assessment of Clinical Teaching (MidPaACT) tool, Nurse Education Today, <https://doi.org/10.1016/j.nedt.2023.105948>

