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Welcome

Welcome to the clinical placement component of the Charles Darwin University (CDU) Bachelor of Midwifery Course.

This manual is essential reading. It sets out the general requirements for the clinical teaching blocks and clinical placements that students must abide by in order to successfully complete the course.

The clinical placement units are core units in the Bachelor of Midwifery degree. Many students report that their clinical practice units are the most challenging yet the most rewarding component of the course. It is during this time that you can contextualise the clinical skills learnt in the Clinical Teaching Blocks and integrate the knowledge obtained in the theory units to the practice setting. By taking time to read and understand this manual, we hope that you will be able to engage fully in your placement to maximise your learning opportunities.

The success of clinical placement is a result of collaborative efforts by the clinical staff in our Health Facility, academic staff, the Clinical Placement Office and yourself.

At CDU, Bachelor of Midwifery students are required to complete clinical placements of varying length from two to six weeks, following a compulsory one week Clinical Teaching Block for each year level. Essential clinical skills are modelled and practised in the clinical teaching block (CTB) and will provide an introduction to the skills you need to develop whilst on placement.

This manual provides important information and frequently asked questions for CDU midwifery students who are about to undertake, or are already undertaking clinical placements.

Again, welcome to the clinical placement component of your degree, we hope it will be a rewarding and positive experience,

Kathleen Blair
Director of Clinical Education
08 8946 6236
kathleen.blair@cdu.edu.au

Dr Virginia Skinner
BMID Course Coordinator
Phone: 08 8946 6596
Email: virginia.skinner@cdu.edu.au

This manual is current at the date of publication and is updated each year. If you see an omission or error, it would be greatly appreciated if you would advise the Course Coordinator or Director of Clinical Education to ensure correction for the following year’s edition.
<table>
<thead>
<tr>
<th>Placement Office:</th>
<th>CDU switchboard</th>
<th>08 8946 6666</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ask for Placement Office for Bachelor of Midwifery students in relevant state or territory.</td>
<td>Email: <a href="mailto:Midwifplac@cdu.edu.au">Midwifplac@cdu.edu.au</a></td>
</tr>
<tr>
<td>Placement Office:</td>
<td>Pre Clinical Coordinator</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Phone: 08 8946 7035</td>
<td>Email: <a href="mailto:Preclinical@cdu.edu.au">Preclinical@cdu.edu.au</a></td>
</tr>
</tbody>
</table>

**Bachelor of Midwifery Course Coordinator**
Dr. Virginia Skinner
Phone: (08) 8946 6596
Email: virginia.skinner@cdu.edu.au

**Bachelor of Midwifery Lecturer**
Mrs Angela Bull
Phone: (08) 8946 7391
Email: angela.bull@cdu.edu.au

**Bachelor of Midwifery, Midwifery Clinical Facilitators Darwin**
Phone: Royal Darwin Hospital: (08) 8922 8888  
Email: CDUMid.DoH@nt.gov.au

**Director Clinical Education**
Kathleen Blair
Phone: (08) 8946 6236
Email: kathleen.blair@cdu.edu.au
Overview of Clinical Placement

A clinical placement is defined as an authorised block of time (hours) in which students attend a clinical setting for a structured clinical experience as part of a specific unit. The unit information, set out on the Learnline site, describes the purpose and assessments associated with each clinical placement. Many students report this as the most rewarding and challenging part of the degree. CDU is very proud of its placement program and CDU endeavours to ensure students have a positive learning experience while on placement. There are however, a number of policies and requirements that must be addressed prior to attending practicum. This manual is designed to help students familiarise themselves with the requirements needed to maintain the student and the public’s safety while the student in the clinical field.

There are eight clinical placement units in the Bachelor of Midwifery course that require specific clinical placements. These are outlined below.

Summary of clinical placement units

<table>
<thead>
<tr>
<th>Title of Clinical Placement Unit</th>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>MID101: Introduction to Professional Midwifery Practice</td>
<td>Theory 40 hours clinical teaching block (RN’s exempt) 80 hours clinical placement</td>
</tr>
<tr>
<td>MID102 Fundamental Skills for Midwifery Practice</td>
<td>Theory 40 hours clinical teaching block 120 hours clinical placement</td>
</tr>
<tr>
<td>MID202 Professional Midwifery Practice 1</td>
<td>Theory 40 hours clinical teaching block (4 days only RN’s &amp; Endorsed Enrolled Nurses) 160 hours clinical placement</td>
</tr>
<tr>
<td>MID204 Professional Midwifery Practice 2</td>
<td>Theory 240 hours clinical placement</td>
</tr>
<tr>
<td>MID301 Women’s Health</td>
<td>Theory 80 hours clinical placement</td>
</tr>
<tr>
<td>MID303 Professional Midwifery Practice 3</td>
<td>Theory 40 hours clinical teaching block (4 days only RN’s) 240 hrs clinical placement</td>
</tr>
<tr>
<td>MID306 Professional Midwifery Practice 4</td>
<td>Theory 240 hrs clinical placement</td>
</tr>
<tr>
<td>MID307 Specialist Neonatal Care</td>
<td>Theory 120 hours clinical placement</td>
</tr>
</tbody>
</table>

Students are required to nominate and enrol in these units using the processes at http://www.cdu.edu.au/health/undergraduate-nursing Students cannot attend a CTB or placement unless this process is followed correctly.

Prior to attending practicum the student must

- Be enrolled in a clinical unit of study;
- Meet all pre-clinical requirements;
- Attend the 5 day clinical teaching block (CTB) prior to 1st year, 2nd year and 3rd year placements and successfully meet all CTB assessment requirements;
- 1st, 2nd and 3rd year students must successfully complete an online medication test.

There are 4 mandatory Clinical Teaching Blocks (CTB) across the course and each these must be successfully completed prior to students attending clinical placement.
Overview of Clinical Teaching Blocks
Please read the requirements for the clinical placement unit carefully. Students will find further information about assessment and requirements on the unit’s Learnline site. Each CTB is a five day intensive program which provides students with an opportunity to practice specified midwifery interventions, integrate theory into practice and develop an understanding of the requirements of professional midwifery practice according to the NMBA Competency Standards (2006). It is also a great opportunity for students to meet each other, form friendships and study groups and get to know the lecturers who teach in the CTB.

Appendix A outlines the Scope of Practice for 1st, 2nd and 3rd year CDU midwifery students. Students should become very familiar with this table; it is an essential guide to student practice and expectations. This table is linked directly to the core theory units at CDU and the clinical skills which will be taught and assessed in the CTB. Students must only perform midwifery interventions in a clinical setting when the linked theory has been assessed and the student has had the opportunity to perform that skill in a CTB.

Allocation of Clinical Teaching Block
The directions for enrolling in a clinical placement unit, nominating for attendance at a Clinical Teaching Block, and also requesting a clinical placement are located at the School of Health clinical practicum web page. Students must closely follow the processes set out on this web page.

http://www.cdu.edu.au/health/undergraduate-midwifery#

The Unit Coordinator will not accept unauthorised attendance at the CTB or clinical placement as part of unit assessment. Unauthorised attendance may lead to a Fail grade and may also be considered to be a breach of the student misconduct by-law (See www.cdu.edu.au/ses/student-conduct.html for student misconduct).

Location of Clinical Teaching Blocks
CTBs are held in Darwin and Alice Springs. The number of students per CTB is limited. Please refer to the CTB timetable on the practicum web page for current information on CTB vacancies.

Preparation prior to attending Clinical Teaching Block
Prior to attending the CTB all students must access the relevant unit’s Learnline site where you will find the essential pre-readings, expectations and assessments associated with the CTB. The Discussion Board will also provide valuable information from fellow students. For 1st (MID102) 2nd (MID202) and 3rd (MID303) year students the medication calculations test must be completed successfully prior to CTB.

It is expected that all students complete the pre-readings prior to the CTB as the content of the CTB (and assessments) are directly linked to the readings.

Assessment and requirements of the Clinical Teaching Block
Throughout the CTB a variety of assessments determine student readiness to undertake the clinical placement. Students must achieve a Pass grade in these assessments. Please refer to the flow chart for CTB (See Appendix B which this outlines the pathway to a Pass/Fail).

1. Medication Test: Prior to their CTB students in 1st (MID102 only), 2nd (MID202) and 3rd (MID303) year must successfully complete at Medication Calculations’ test. Students must gain 100% in order before progressing to the CTB.

2. Objective Structured Clinical Assessments (OSCAs): These assessments are designed to assess student competence in specified midwifery skills based on the Scope of Practice at each year level.
3. Attendance: Students must attend the entire CTB. They must be prepared to start on time and remain until the end of each day’s session. A 100% attendance record is required. All CTBs start at 8:30 and finish at 16:00hrs.

4. Dress: Students must present to CTBs professionally attired and in uniform as per page 22 of this manual each day of the CTB. If a student’s dress doesn’t meet these standards the student will not be permitted to complete the CTB.

The CTB is an integral component of four clinical units: MID101, MID102, MID202 and MID303.

| Students who do not have completely enclosed hard covered shoes (this does not include sandshoes/ runners) will not be permitted to enter the clinical laboratory and participate in the SB. | There will be no exceptions. |

**Additional skills practice**

Students who self-identify or are referred by clinical supervisors/teachers or academic staff as needing more clinical skills practice prior to attending placement can be booked into practice sessions by the Course Co-ordinator at Alice Springs or Casuarina. These sessions will be scheduled outside the timetabled SB’s.

**Process:** The relevant unit coordinator must be notified of the intention for further clinical skills practice so that suitable supervision is provided and continued liaison with the Course Co-ordinator and the student.
Pre-Clinical Documentation Requirements

All students who plan to enrol in to a clinical placement unit must meet all the documentation requirements set by CDU. This ensures compliance with State / Territory legislation and health facility, School of Health requirements. This is a strict process and tightly monitored by CDU. Students that do not complete all required pre-clinical documentation by the given deadline will not be assigned to a CTB and will be unable to enrol in to a placement unit.

Pre-clinical documentation prior to placement
The Pre-Clinical Coordinator assists students with this process (see page 6 for contact details). Students will not attend placement unless all requirements are met. Students should not assume they meet the requirements. In some cases documentation / evidence takes some months to organise and may expire during the course. It is a student’s responsibility to ensure their documents are correct, current and provided to CDU.

All mandatory documentation is to be submitted prior to nominating for a placement unit.

Documents to be submitted and checked;

- CDU Checklist;
- CDU Student Placement Agreement;
- National Police Check; valid for 12 months from date of issue. Note: this may be reduced to six months for some health facilities and may be required to be issued within the current calendar year;
- First Aid Certificate, valid for 3 years from date of issue;
- CPR Competency Certification - valid for 12 months from date of issue;
- State/Territory specific criminal history checks and forms;
- Completed Evidence of Immunity Form with certified copies of supporting documentation.
- Specific requirements mandated by an individual Health Facilities if CDU is notified officially of this being a requirement.

Important points to remember

- All documents are to be submitted as certified copies by post or in person by the given deadline date;
- It is the student’s responsibility to be aware of expiry dates of all pre-clinical documents and update and forward certified copies to the Pre-clinical Coordinator prior to expiry;
- Students who conscientiously object to having immunisations or health screening are required to sign a Conscientious Objection Form. Note: Health Facilities will be advised of Conscientious Objection and may withdraw the placement;
- Clinical placements will be cancelled if students fail to meet all pre-clinical requirements, this can result in a Fail grade being awarded for that unit.
Pre-clinical documentation requirements during clinical placement

Students must be able to produce evidence of meeting pre-clinical documentation requirements to the health facility on request. Therefore, students must present pre-clinical documents to the appropriate health facility representative of the first day of placement.

The Health Facility has the right to suspend or cancel the placement if the student cannot produce evidence of meeting their pre-clinical requirements upon request. Students who do not bring all their preclinical documents with them on the first day of placement may be sent home and not be able to continue the placement. Students may be awarded a fail grade for the unit.

EMAIL

All pre-clinical correspondence is to be directed to a central pre-clinical email address.

Preclinical@cdu.edu.au

Ensure you know the contact details for the Midwife Clinical Facilitator position at your hospital for any queries and support while on placement.

PRE-CLINICAL STATUS

It is a student’s responsibility to maintain the currency of their pre-clinical documentation.

To assist this process, students can access their pre-clinical status and check expiry dates by going to http://www.cdu.edu.au/health/undergraduate-nursing

Click the Pre-clinical status button and log in with the usual log in and password to view the traffic lights.

Green- all pre-clinical requirements have been met and are current.

Amber- not all pre-clinical requirements have been met AND/OR, not all pre-clinical requirements are current.

Red- no preclinical documentation has been submitted.
If documentation has been submitted and the status has not been adjusted within two weeks, please contact the Pre-clinical Coordinator at Preclinical@cdu.edu.au

Clinical Placement

Organisation of Clinical Placement

Several processes are involved in the organisation of clinical placements. Administrative processes are managed by the Placement Office. Academic processes are managed by the Midwifery Course Coordinator in consultation with the Clinical Coordinator and the Director of Clinical Education. The Placement Office and the academic team work together very closely to ensure students have a quality clinical experience.

Placement Office

The Placement Office is responsible for all administrative aspects of arranging clinical placements. The role of the Placement Office is to negotiate and arrange clinical placements for students in their allocated states, liaise with health facilities, and act as a first point of contact for students and health facilities for administrative matters and maintain the practice agreements between health facilities and CDU.

It is important to understand that the Placement Officers are the only people authorised to negotiate clinical placements. Students must always contact the Placement Office to request to arrange or modify a placement. Preceptors, academic staff, Clinical Supervisors and Midwifery Unit Managers organise placements through the Placement Office. A clinical placement is not confirmed until the Placement Office provides the student and the health facility with a confirmation notice.

Any change to a clinical placement requires written confirmation by the Placement Office (See section page 24 for information on requests to change rosters or placement timing).

Note: Placement Officers are not academic staff and therefore questions about assessment requirements or problems on placement must be directed to the Unit Coordinator.

Students are not permitted to arrange their own placements (or make up shifts). If a health facility offers a student (as an employee) a placement, the student should thank them, seek a contact name and email address and provide this to their Placement Officer to follow up.

Academic Clinical Team

Unit (Subject) Coordinator: This is the academic staff member who has responsibility for the delivery quality and assessment of specific units. This is the first point of call for queries about the academic objectives for a clinical placement, assessment, general placement questions and feedback. Contact details can be found on the relevant Learnline site.

Clinical Coordinator: The academic staff member responsible for the organisation and management of the clinical placement units. The Clinical Coordinator is the contact person for problems which cannot be resolved at a health facility level, or resolved with the Unit Coordinator.

Director of Clinical Education: The academic staff member responsible for the overall direction and management of the clinical component of the course and the strategic management of the placement program at CDU.

Bachelor of Midwifery Program Coordinator: The academic staff member who has responsibility for the coordination of the Bachelor of Midwifery degree.

Allocation and Acceptance of Clinical Placement

Many resources are directed towards sourcing high quality clinical placements for students. All students are allocated clinical placements by the Placement Officer who manages a specified State or Territory. Clinical placements are sought to meet the learning objectives of the unit of study and year level. Students are expected to attend the negotiated clinical placement. If a student is unable to attend an organised placement, the student must follow the procedure outlined in the Extenuating Circumstances Guidelines, available on the
CDU website, and provide evidence as to why they are refusing the placement. Non-acceptance of a placement (or failure to attend the placement) may result in a Fail grade.

Students are notified by email approximately four weeks prior (CDU’s official channel of communication) of the details of the clinical placement and when / how the student is to contact the health facility prior to placement. Students are reminded they must ensure they regularly check their student email account.

All students have been informed they may have to travel outside their home state in order to complete placement units. This is clearly outlined in the Terms and Conditions of Enrolment. More information about enrolment conditions can be found at:


Students can apply for ‘special consideration’ to be exempt from the requirement to travel for placement. However, students are reminded that Health Facilities offer placements at their discretion and in some locations there may be long delays waiting for a placement.

More information on special consideration can be found at:


If a practicum or placement unit is not completed within the semester of enrolment a Practicum Ongoing (PO) grade can be awarded. This grade is applicable for two (2) admission periods (one year) to allow a placement opportunity to be sourced. Placements may be arranged outside of semester dates. The length of the course may be extended due to an inability to source placements within the course timeframe. Students can assist the process by ensuring that they have current pre-clinical documents at all times and update these as required, must be prepared to travel and consider requesting third year placements in less popular facilities.

If a placement opportunity is declined prior to the end of this time and a grade therefore not awarded by the Faculty the PO grade will automatically convert to a Fail (F) grade unless the PVC EHSE approves in writing an extension of the PO grade. Extensions may be granted when the Placement Office is unable to secure a placement for the student.

The assessment rules regarding all grades is located at;


Any refusal of a negotiated placement is likely to result in protracted delays to secure further placement. This may jeopardise planned progression and hence extend the length of the course. CDU does not accept liability for students who delay or refuse a placement.

Failure to submit required pre-clinical documentation does not meet the criteria for provision of a PO grade.

Refusal of a negotiated placement does not meet the criteria for provision of a PO grade. Please refer to the Extenuating Circumstances Guidelines that can be located on the CDU Undergraduate Nursing webpage


A student cannot apply for an intermission from the Bachelor of Midwifery while they have a PO grade for a placement unit. Intermissions from this degree will not be approved until the PO grade has been finalised.
Responsibility of Student, University and Health Facility

Responsibility of the Student
- Ensure all preclinical documentation requirements are met prior to placement and ensure documents remain current during all placements;
- Read the University and Facility Charters and Student Manuals;
- Familiarise themselves with all documentation, handbooks and assessments related to each unit of study (these are correlated to practice placements and will include assessment of practice documentation);
- Recognise the purpose of the placement experience and ensure you are clear about the expectations of the placement provider;
- Explore the placement’s history, values, mission and location including instructions about parking, uniforms etc.;
- Comply with the CDU student Code of Conduct;
- Ensure all assessment documentation for clinical placement is complete and accurate;
- Contact the placement and mentor/preceptor prior to starting the placement (if requested to do so in the confirmation email provided by Placement Office);
- Notify preceptor of any support needs;
- Act professionally with regard to punctuality, attitude and behaviour and display a professional image and dress according to CDU uniform policy;
- Maintain confidentiality at all times in relation to woman and health facility information including patient records;
- Maintain effective professional communication with women, preceptors, and link personnel from both the health facility and Charles Darwin University;
- Do not engage in full time employment whilst on placement.

Responsibility of the University
Charles Darwin University has a responsibility to ensure support is put in place for the student, and preceptor through allocated roles. Charles Darwin University will;
- Ensure Practice Agreements are in place with the health facility providing the placement;
- Provide adequate insurance cover for students on placement;
- Organise the administrative requirements of the placement;
- Work collaboratively to support clinical staff;
- Support the health facility with regular contact via phone, in-person or via e-mail;
- Ensure a communication system is in place to deal with student issues or questions;
- Communicate any changes about the course or assessment in a timely manner to placement staff;
• Put an effective evaluation system in place to assess the student’s and facilities experiences.

**Responsibility of the Health Facility**

• Ensure that preceptors are prepared appropriately for the role;
• Provide a safe placement environment for the student;
• Allow time for preceptors to meet with their students to undertake and record assessment activities and outcomes;
• Perform formative and summative assessments and provide regular constructive feedback to students about their progression;
• Allocate preceptors time to reflect, give feedback and keep records of student achievement;
• Ensure that preceptors have appropriate and ongoing support in practice;
• Work collaboratively with the University;
• Provide learning opportunities for students that reflect the nature of the service.
**Overview of Assessment**

While on clinical placement the student’s ability to meet the Australian Nursing and Midwifery Board of Australia Competency Standards (2006) is assessed. The Clinical Assessment Portfolio records these assessments and guides student and assessors through aims and objectives of the placement. Students will need to print a copy of the Clinical Assessment Portfolio prior to beginning the placement and familiarise themselves with the objectives and requirements of the placements.

The relevant sections of the Portfolio must be signed by a Registered Midwife who directly observes the student’s practice. This is usually the Preceptor, Clinical Supervisor or Midwifery Unit Manager. It is the responsibility of the Registered Midwife who signs the Portfolio to provide a professional judgement on the student’s current level of competence. The Registered Midwife who completes the Portfolio is responsible for providing an accurate reflection of student competency and professional behaviour throughout the entire placement. All signatures on the Portfolio must be that of a Division One Registered Midwife. Other clinical or administrative staff must not sign the Portfolio.

The Clinical Supervisor or Preceptor is responsible for ensuring that any problems encountered during the clinical placement are reported to the Unit Manager and to Charles Darwin University. If health facility staff hold any concerns about student behaviour or documentation they must consult the Unit Coordinator.

The Clinical Assessment Portfolio is graded upon return to CDU and forms part of the overall grade assigned to the clinical unit of study. Students are reminded that each clinical unit has a number of assessments that must be completed in order to pass the unit. Passing or Failing the unit can only be determined by the Unit Coordinator. In arriving at a decision to pass or Fail a student, the Unit Coordinator relies heavily on the judgment reported in the Clinical Assessment Portfolio by Preceptors and/or the Supervisor.

It is the student’s responsibility to show the Clinical Supervisor / Preceptor the Clinical Assessment Portfolio on the first day and ensure that it is filled out correctly and in a timely manner. It is their responsibility to make sure the documentation is complete and that they take it on placement each day.

The Clinical Assessment Portfolio is designed to facilitate regular feedback between Preceptor / Clinical Supervisor and the student. The earlier problems are identified the greater the opportunity the student has to understand deficits and meet expectations. This is facilitated if the student asks the Preceptor / Supervisor to give both positive and negative feedback. It can be difficult to hear negative feedback, and many Preceptors / Supervisors find it very difficult to do this. Nonetheless, in order to learn, students need to receive both positive and negative feedback.

**Special note on assessment and maintaining records:** The Clinical Assessment Portfolio is the assessment document CDU uses to ensure all clinical hours are complete and the student has met all the NMBA Competency Standards (2006). If the Clinical Assessment Portfolio is lost, the student will have to complete the practicum again.

Students must keep a certified copy for their own records as CDU will not return this document. When students apply for graduate positions this document is often required by the facility as part of the application.
Submission of Assessment Documents
The Clinical Assessment Portfolio is due 10 working days after the last shift has been completed. If the student cannot achieve this, they must apply for an extension through the Unit Coordinator. Late submissions will follow the Midwifery Theme's late submission penalty policy.

Via mail: In person:
External Student Support Darwin: Faculty drop box in Blue Building 5
Charles Darwin University Alice Springs: Faculty drop box at the Info Shop
Darwin NT 0909
## Scope of Practice

Students are expected to be familiar with their Scope of Practice for each year level of study. This is based on the theory and skills taught in the CTB and theory units. The table below describes the general progression by year level; Appendix A describes the detail of the CDU Scope of Practice.

### Expected student knowledge and skill progression through year levels

<table>
<thead>
<tr>
<th>Clinical Placement</th>
<th>Progression</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st year</strong></td>
<td></td>
</tr>
<tr>
<td>MID101: 80 hours. Primary health care setting-Community Midwifery Practice/MGP</td>
<td>Primary Health Care Scope of Midwifery Practice Midwife-woman relationships</td>
</tr>
<tr>
<td>MID102. 120 hours. Post and antenatal inpatient units.</td>
<td>Application of midwifery knowledge and skills in the area of general hygiene, vital signs, antenatal assessment, provision of midwifery care to women post caesarean section and following normal birth, well baby care. Mainly well women, application of midwifery knowledge and skills in the assessment and care of antenatal, labour and birth and postnatal care. Introduction to some more complex situations.</td>
</tr>
</tbody>
</table>

| **2nd year**       |             |
| MID202: 160 hours. Antenatal outpatient/labour & birth/postnatal inpatient/community | Demonstrates clinical reasoning and the application of evidence-based midwifery in the care of well women and women experiencing complexities. |
| MID204: 240 hours Antenatal outpatient/labour & birth/postnatal/inpatient/community | maintains earlier competencies. |

| **3rd Year**       |             |
| MID301: 80 hours. Women’s Health centres | |
| MID303: 240 hours: Community/ inpatient antenatal. Birthing, postnatal. | |
| MID306: 240 hours: Complex inpatient, antenatal, birthing, postnatal. | |
| MID307: 120 hour. Special care nursery-Level 2. | |

By the end of third year, students are expected to be able to integrate all of the skills and knowledge developed throughout the course. Whilst there are some specific skills students are not expected to achieve until reaching third year, students must **continue** to demonstrate competency in skills achieved earlier.

It is expected that at the completion of each year level students will be ready to build on their knowledge and ability. Students should progress from novice in first year, to advanced beginner by the end of third year.

The Clinical Assessment Portfolio provides details of the expectations required of students for each clinical unit. (see page 16 for information on assessment).
**Code of Conduct**

Students are required to comply at all times with the Student Code of Conduct in addition to the conduct requirements of the Health Facility.

All Registered Midwives must adhere to the Australian and Nursing Midwifery 'Code of Professional Conduct for Midwives' and ‘The Code of Ethics for Midwives’. Students should be familiar with both documents as it guides all midwifery practice and helps students understand the professional and ethical responsibilities of a Registered Midwife. They can be found at [http://www.anmc.org.au/](http://www.anmc.org.au/)


While on clinical placement and at Clinical Teaching Blocks, students are required to:

- Be respectful, courteous and professional all times to colleagues, clients, Health Facility staff, CDU academic staff, administrative staff, Placement Office staff, patients, and the public;
- Follow the policies and procedures of the Health Facility; if doubt exists, consult with the preceptor and/or clinical supervisor for the purpose of interpretation of the health agency’s policies and procedures;
- Obtain an orientation to emergency and evacuation procedures;
- Practice under the supervision of clinical staff;
- Be fit for undertaking clinical practice, including maintaining own health and ensuring adequate rest;
- Practice within competence and Scope of Practice as a student nurse;
- Be proactive in seeking out learning opportunities;
- Be punctual arriving for an allocated shift at least 15 minutes prior to its commencement and returning from meal breaks on time;
- Speak English at all times as this is the language of business;
- Wear the CDU uniform (as per page 22) and the CDU name badge above the waist in a location easily visible unless specifically directed otherwise by the Health Facility;
- Maintain confidentiality of peers, colleagues and client information at all times;
- Maintain accurate, comprehensive, objective records of nursing care given as required by the health agency;
- Inform the nurse responsible for client care in the area when leaving the area;
- Use equipment and supplies for client care in accordance with their defined purpose and the rules and regulations of the health agency;
- Respect the Mission Statement of the Health Facility;
- Report any malfunction or breakage of equipment to the Registered Nurse responsible for client care in the area;
- Facilitate client’s physical and cultural safety;
- Ensure that external work commitments do not conflict with any placements.
Insurance

Charles Darwin University has personal accident and public liability coverage which extends to cover the legal liability of students while engaged on authorised university-sponsored activities. This includes practical experience activities, provided the student is not engaged as an employee in receipt of remuneration. In assisting CDU with the provision of clinical practice experience, it is understood that the student will be under supervision at all times and practice within their Scope of Practice and level of competence.

If a student is involved in an accident or sustains an injury while on clinical placement students are required to inform their Preceptor or Supervisor immediately. Appropriate first aid should be provided to the student. A senior RN or clinical supervisor should then inform the Clinical Coordinator as soon as practicable and will be forwarded a current CDU Accident and Injury reporting form (Appendix E). It is a CDU requirement that students complete this form and return it to CDU via the Unit Coordinator or Clinical Coordinator. The Health Facility may be asked to supply a copy of their own accident and injury paperwork for the student’s CDU records.

Students must also comply with the accident and injury reporting guidelines and procedures of the Health Facility. If necessary the student should attend the Emergency Department or be seen by a Medical Officer. Students are responsible for the costs involved for any accident or injury and where possible, should obtain receipts to provide to CDU for insurance claims.

Students can also contact Student Administration and Equity Services for counselling and additional advice if this is needed. If urgent contact with University is needed, any of the contacts on page 6 may be contacted.

Note: Students are not covered by CDU insurance when travelling to and from clinical placements.
CDU Occupational Health and Safety

Charles Darwin University is committed to a healthy, safe work environment, and takes seriously its obligation to provide guidelines and training in safe work practices and information on control measures for hazards in the workplace. The University recognises that success in achieving a healthy and safe environment depends on the commitment and cooperation of staff, students and other persons throughout its areas and activities.

Each member of staff and each student is responsible for carrying out the following functions to ensure their own work environment is safe and without risk to health by:

- Complying with all health and safety instructions;
- Taking action to avoid, eliminate or minimise hazards;
- Making proper use of all safety devices and personal protective equipment;
- Not wilfully placing at risk the health or safety of any person within the workplace;
- Seeking information or advice where necessary before carrying out new or unfamiliar work;
- Wearing appropriate dress for the work being carried out including, where required, protective clothing and footwear at all times while on duty;
- By consuming or storing food and drink only in those areas designated; and
- Be familiar with emergency and evacuation procedures and the location of, and if appropriately trained, the use of emergency equipment.
**Dress Requirements**

CDU's dress code is designed to be practical for delivering client care, minimise potential cross infection, promoting safety for students and clients, functionality, cultural and religious sensitivity, institutional rules and expectations and regard for the image of the University. Students are required to attend clinical placement and CTBs in the prescribed Charles Darwin University or ACIKE/BITE uniform unless otherwise advised by the Health Facility. The student uniform policy is as follows:

- Navy or black ‘dress' trousers or knee length shorts/culottes/skirt;
- CDU midwifery student polo shirt;
- Current student ID card in a holder with clip where it is visible to staff and patients;
- Fully “closed in/hard covered” shoes in black, navy or brown with sturdy strong soles;
- Shoes are to be clean and if required, polished. “sandshoes /runners, soft coverings and ballet style ” shoes are unacceptable;
- At least two pairs of ‘dress' trousers/skirt/shorts and two polo shirts are required so as to permit laundering between shifts. Denim trousers/low cut/shorts/skirts are not acceptable. Shirts must be adequate length, no midriff or underwear showing.
- Garments are to be ironed or free of creases/wrinkles, and neat and tidy;
- Hair is to be worn off the collar, face and neck and appropriately contained/secured. If hair is long there is a risk that students will be infected by pediculi or trauma if women grab the student’s hair;
- Facial hair must be clean shaven or a neatly trimmed beard is acceptable;
- Fingernails are to be short with no sharp edges. Long nails are a potential risk to patients’ skin integrity and an infection control risk;
- No jewellery, apart from a plain, non-engraved ring is to be worn. Engraved rings and jewellery containing stones are a potential risk to patient skin integrity and contribute to the transmission of infection. Likewise nail polish and /or artificial nails are not to be worn;
- Wrist watches are not be worn when undertaking patient care or aseptic procedures. They are an infection control risk and a potential risk to patient skin integrity;
- Students must have a watch with a second hand which can be worn away from the wrist, such as a nurse’s fob watch;
- Religious headwear, where worn, should complement uniform colour;
- Students must pay attention to their own personal hygiene and use deodorant. They should avoid the use of heavy make-up and perfume as some people are allergic or sensitive to strong perfumes;
- It is recommended only studs or sleeper earrings are worn as other earrings can be grabbed by patients and potentially cause damage to ear lobes. Students must ensure any other body piercing does not pose an infection control risk.

**IMPORTANT:** Many Health Facilities have strict guidelines in relation to body piercing and coloured hair. The Health Facility retains the right to ask students to leave if the student does not meet their requirements.
Medication Administration

Medication administration is an important component of the midwife’s role. Students progressively increase their Scope of Practice in relation to medication administration based on the theory taught throughout the degree. Students must successfully complete assessments conducted by CDU prior to administering medication.

Even if a student is deemed medication competent and a qualified Endorsed Enrolled Nurse or Registered Nurse, students enrolled in CDU’s BM course must not administer medications (S2, S4, S8) until they have passed the CDU drug administration and medical calculations’ test. Students can only administer medications within their Scope of Practice for the Unit in which they are enrolled. A RM must ensure that the student undertakes the 6 Rights of drug administration and directly supervise all medication administration. Students should be able to explain the pharmacokinetics and pharmacology of the drug they intend to administer.

Students are only permitted to work within their Scope of Practice for year level. Please refer to the table below which outlines what students can and cannot administer based on the unit of study the student is completing.

This table is not intended to override or be a substitute for the facility’s policies. Students must be familiar with the local policy on medication administration by student midwives.

<table>
<thead>
<tr>
<th>Year</th>
<th>Non-prescription topical</th>
<th>PO</th>
<th>PR or PV</th>
<th>SC or IMI</th>
<th>SL</th>
<th>Topical or Transdermal</th>
<th>Inhalation</th>
<th>Intranasal</th>
<th>Telephone orders</th>
<th>Intravenous</th>
<th>Immunisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>YES</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
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<td>X</td>
</tr>
<tr>
<td>2</td>
<td>YES</td>
<td>YES, S2 and S4 only</td>
<td>YES, S2 and S4 only</td>
<td>YES, S2 and S4 only</td>
<td>YES, S2 and S4 only</td>
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<td>YES, S2 and S4 only</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>YES</td>
<td>YES, S2, S4 and S8</td>
<td>YES, S2, S4 and S8</td>
<td>YES, S2, S4 and S8</td>
<td>YES, S2, S4 and S8</td>
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<td>YES, S2, S4 and S8</td>
<td>YES, S2, S4 and S8</td>
<td>YES, S2, S4 and S8</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Prime lines or change bags (no additives)</th>
<th>Saline flush</th>
<th>Infusion with the additive Oxytocin</th>
<th>Additives including IV AB &amp; S8</th>
<th>Parenteral excluding TPN</th>
<th>Blood products and blood</th>
<th>S8 bolus &amp; IV</th>
<th>PCA</th>
<th>CVC</th>
<th>PICC</th>
<th>Epidural</th>
<th>Telephone orders</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>X</td>
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<td>YES</td>
<td>X</td>
<td>X</td>
<td>YES</td>
<td>YES, S2, S4 &amp; S8</td>
<td></td>
</tr>
</tbody>
</table>
Double checking of medications prior to administration

This process is an essential stage of medication administration to decrease the risk of potential harm to the patient. The process of double checking medication should be performed by 2 authorised health care professionals (Registered Midwife or Endorsed Enrolled Nurse). The CDU midwifery student should be a third party when checking medications.

Medications that require checking by 2 authorised heath care professionals (within the scope of medication administration for CDU midwifery students) are as below:

- Medication administered as an additive to an IV infusion bag, burette or syringe driver
- Medication administered by direct IV injection
- Medications administered by intramuscular or subcutaneous
- Medications given to babies and children
- Controlled drugs
- Warfarin

Any questions regarding medications administration should be referred to the Unit Coordinator.
Attendance and rosters

- Students must attend all shifts as rostered by the Health Facility. If directed by the Health Facility, students contact the Health Facility prior to their first shift to gain their roster. It is requested that the students receive at least the first two weeks of their placement roster prior to placement commencing;

- Extending shifts beyond the ordinary start and finish time for the roster is generally not permitted unless authorised by the Unit Coordinator. Students may work a shift in excess of 8 hours in relation labouring/birthing women. If the student works longer than 8 consecutive hours, he/she must take a 10 hour break before commencing another clinical shift.

- The Health Facility may roster students to weekend and night shifts where the Facility deems there is an appropriate level of senior supervision. Students are expected to be available throughout the duration of the allocated placement across a 7 day roster attending a variety of shifts. Students are not permitted to request changes to rosters without permission from CDU;

Note:

- First Year (MID102 & MID102) students are not generally expected to work weekends or night shifts;

- Second Year (MID202 & MID204) students are generally not expected to do more than one week (40 hours) of night duty in any one placement; however they can be on call for labouring/birthing women;

- Third year students are required to carry a small caseload and will be required to be ‘on call’ at times.

- Rosters should not exceed an average of 40 hours per week for the placement;

- Students must have a copy of the Clinical Assessment Portfolio while on placement. It must have the “Clinical Placement Agreement” signed prior to the first shift;

- The required attendance for clinical placement is measured in hours.

- Clinical placement attendance only includes clinical experience and clinical debriefing sessions. While valuable, library time and doing other written university work on clinical placement is not included in calculation of ‘clinical time’ and students should attend to these activities outside of shift time;

- Students are to take the same shift breaks as ordinarily provided to the preceptor. Lunch or dinner breaks are not included in the calculation of attendance hours;

  Example: 7:00hrs – 15:30hrs = 8.5 hours with a 30 minutes allocated to break, therefore 8 hours of placement is recorded on attendance record.

- 100% attendance is required for all shifts throughout the placement Students are required to notify both the Health Facility and the Clinical Placement Office of all absences (Please read section regarding process for reporting and documenting absences). Absence may range from one or more days to one or more hours.

Clinical placements are for 40 hours per week and often include shift work. Students who attend additional paid employment beyond the placement 40 hours a week during placement present a high risk of harm to patients. The clinical placement will be withdrawn until student’s overall hours are reduced. It is unprofessional behaviour and may result in a Fail grade for the unit.
Absences
To achieve a Pass Grade 100% of the clinical placement hours must be completed. Students must notify the Health Facility of absence prior to the shift commencing and the Clinical Placement Office as soon as possible. Therefore, students should identify on the first day of placement the number to call and process to follow should they be absent or late. It is their professional responsibility to inform the Health Facility if they are unable to attend a rostered shift. Failure to do so indicates that the student is not meeting the Australian Nursing and Midwifery Board Competency Standards (2006).

Students must not put patients at risk due to illness. This is a professional responsibility so students should not attend placement if unwell. If student does not attend placement due to illness or other reason, the student must;

- Notify the Health Facility prior to shift commencing;
- Contact Clinical Placement Office as soon as possible;
- Ensure a Medical Certificate or Statutory Declaration is obtained to account for missed hours; this must be attached to Clinical Assessment Portfolio for grade to be allocated.
- The Clinical Placement Office will liaise with student and Health Facility to secure appropriate make up time.

Public Holidays
Sometimes student placements will occur when a Public Holiday is scheduled. The student should attend the placement on a public holiday if the Health Facility deems there to be adequate supervision for the student and the Health Facility is open.

If the Health Facility cannot support a student placement on a public holiday, the student must notify the Clinical Placement Office and make up time will be requested for the student following the process outline under ‘Absences’.

Severe weather events
The personal safety of students is the primary factor in determining attendance at placement in the event of a cyclone or other severe weather event. Other factors that may prevent a student attending placement may include the following:

- Obligations in relation to closures of schools and child care centres, and/or the need to care for children at home, elderly relatives and visitors;
- Environmental factors such as local flooding;
- Issues such as cancellation of/interruption to public transport; and
- The requirement to take shelter, including the need to evacuate.

If students do not attend placement for the reasons above they must inform both the Health Facility and the clinical placement office as soon as possible.

Students undertaking placement in the local Darwin area should not attend placement if the decision has been made to close CDU Casuarina and Palmerston Campuses. The student should contact the Health Facility and advise that they are under instruction not to attend placement until the University re-opens.

Students will need to make up any shifts missed due to the above circumstances. The CDU placement office staff will prioritise the organisation of these shifts to minimise any inconvenience to students.
Supervision of Placement
Students may encounter up to three different models of clinical supervision on clinical placements.

The Preceptor Model
This model involves supervision of one student by a Preceptor. The Preceptor is a Registered Midwife. It is common for students to have more than one Preceptor on clinical placement.

The relationship between student and Preceptor is an important aspect of the clinical placement experience. Students should remember that almost all clinical settings are stressful. The Preceptor will do their best to help reduce this stress impacting on the student’s learning experience but the needs of the patients are paramount.

The value of the clinical placement experience can be influenced by the student’s ability to negotiate a positive and constructive relationship with Preceptors and the wider health care team. This is a skill students will need to develop throughout their career.

The Professional Development Model
This model involves a more experienced clinician or midwife educator working with a number of Preceptors and students in a specific clinical area. This nurse is sometimes called a Clinical Liaison Midwife. They are able to act as a resource person and will assist students to solve problems.

The Clinical Supervisor Model
This model involves either a CDU Lecturer, an experienced midwife educator contracted by CDU or Health Facility to oversee up to eight - ten students at a time on placement in a Health Facility. The Clinical Supervisor works with individual students and the Registered Midwives they are assigned to on each shift. It remains the responsibility of ward staff to observe and complete assessments with the student. However, Clinical Supervisors are there to assist with problems that may be encountered.

At times (e.g. first-year placements) Enrolled Nurses or other professionals may provide students with direct supervision. However, students will also have a designated Registered Midwife who is accountable at all times for the conduct of student supervision. The named Registered Midwife also remains accountable for evaluating and signing the assessment documentation.

Only Registered Midwives can sign the clinical assessments. It is acceptable for the RM to evaluate the information provided by others in the assessment of student practice.

Unit Coordinators
The Unit Coordinator is a support person during placement no matter which supervision model is being utilised. If students are experiencing problems with placement they should contact the Unit Coordinator as soon as possible. Students can also let them know when things are going well.
Glossary of Terms

Different models of clinical supervision, support and teaching are used during clinical placement. The model selected is dependent upon factors such as the clinical context, the number of students on placement and their level of experience. The terminology used is often jurisdiction (state) specific. Charles Darwin University employed clinical supervisors are called clinical teachers. Health facility employed clinicians who work alongside students are called preceptors. Health facilities often utilise their own clinical nurse educators (CNE) to oversee student placements and support their own staff who works as preceptors.

Preceptee: A student learning within a clinical area which may be attached to a primary, secondary or tertiary agency including primary health care, community, acute, mental health, aged care.

Preceptor: A preceptor is a registered nurse, a clinician working in practice, who is prepared for the role of supervision, clinical teaching, assessment and the provision of feedback to students (Heffernan, Heffernan, Brosnan, & Brown, 2009).

Preceptorship: Preceptorship is clinical supervision model in which clinicians have a direct clinical teaching role and undertake student assessment. The role focuses on the development of clinical and professional skills as well as work-place orientation and socialisation.

Clinical supervisor/teacher: Clinical supervisors/teachers are employed by educational institutions to support, teach and assess groups of students. The clinical supervisor/teacher works in conjunction with the preceptor to support teach and assess the student.

Clinical nurse educator: The clinical nurse educator is a senior nurse employed by the health facility who acts as a role model, preceptor and or / mentor to inexperienced nurses to facilitate the development of clinical expertise and decision making in a speciality area. A component of their role may be oversight of undergraduate nursing placements. Their primary role is the professional development of the staff in their area of specialty.
Problems on Placement
During a clinical placement a number of problems may arise. The majority of these can be resolved by a discussion between the preceptor and student and/or a phone call to CDU and / or Health Facility. Occasionally more action may need to be taken to manage the issue.

Problems that cannot be resolved between student and preceptor

In the event staff or student issues that cannot be resolved informally, the Health Facility and/or the student should contact the Unit Coordinator to discuss problems and to develop strategies to resolve the issues. When a student is identified as "at risk of Failure", the Unit Coordinator must be contacted as soon as possible. The process on the "Flowchart for Clinical Placement Units" (Appendix B) will be initiated.

The Unit Coordinator will generally follow the process for addressing a Failure to achieve the NMBA Competency Standards (2006) as follows. (Note: The information provided by Registered Midwives who have observed student practise is critical to identifying the best approach for resolution.)

The Preceptor or Clinical Supervisor provides specific and documented comment via the Clinical Assessment Portfolio (or separate report) to the Unit Coordinator. Depending on the level of identified issues the following choices are available to the Unit Coordinator:

i. Further discussion with Preceptor / Educator / Supervisor and student;

or

ii. A Learning Agreement may be offered to the student; this can include additional placement time, focussed support (if placement is still underway), or both;

or

iii. A Fail grade is issued and student removed from placement

Withdrawal of placement by clinical staff

The unit co-ordinator may wish to withdraw a student from a placement in the event of unprofessional behaviour. Unprofessional behaviour includes misconduct, unethical or unsafe behaviour, or any breach of client confidentiality. Withdrawal of a placement is a last-resort process and should only occur after consultation with the Unit Coordinator. This usually does not occur without warning and before remedial actions having been implemented.

It is important to note that once the Unit Coordinator is informed of withdrawal, an information-gathering process is necessary before making any decisions about the placement. This can take a number of days.

Withdrawal of placement also occurs when the Health Facility notifies CDU it cannot adequately manage the placement. All Registered Midwives have a professional responsibility to assure safety and well-being of patients, staff, the student and the public. Wherever possible, consultation with the Unit Coordinator at CDU should occur prior to withdrawal

If the situation is viewed as urgent, Health Facilities reserve the right to terminate placements immediately. This includes if a student presents to placement under the influence of drugs or alcohol. Sometimes withdrawing a placement is an unfortunate consequence of operational priorities and does not reflect on a student’s competence.
If placement is terminated, the student should receive a brief explanation from senior clinical staff and be asked to contact the Unit Coordinator to arrange for an initial meeting (or telephone discussion) within 24 hours if possible. The student also needs to notify the Clinical Coordinator and Placement Office as soon as practicable.

The Unit Coordinator will have a brief initial discussion with the student. Notes should be taken and these should be available to the student and then arrange for a longer appointment time with the student and Health Facility. The timing of this meeting will be organised depending on when assessment documentation from the student and the Health Facility arrives at CDU. The student will also need to provide all the clinical assessment documentation from placement. Minutes of all meetings should be recorded and made available to the student, facility and unit co-ordinator.

Appeals against withdrawal of placement by the Health Facility
The Unit Coordinator and the Clinical Coordinator and a nominated person from the Health Facility will negotiate a process for dispute resolution. This process shall be cognisant of provisions in the contract between CDU and the Health Facility in addition to the CDU Assessment Rules and principles. That is, two processes are to be satisfied: 1) the contract between the Health Facility and CDU, and 2) the CDU Assessment Rules and Principles of Assessment.

The review shall occur as soon as practicable.

The outcome of this process will be reported to the Director of Nursing/Midwifery of the Health Facility (or equivalent), to the BM Programmed Coordinator and others as required.
Access and Disability

Fitness to Practice

The Bachelor of Midwifery program prepares students to meet the criteria for registration described by the Nursing and Midwifery Board of Australia. It is a requirement of the Australia Health Practitioners Regulatory Agency (under which the CDU Bachelor of Midwifery degree is accredited) to ensure that students have the physical and psychological capacity to competently perform the role of a student midwife.

CDU therefore, has a responsibility to ensure that all midwifery students are made aware of, and understand, their obligation to report any physical, psychological or other condition that might impede their 'fitness to practice' during clinical placements. As with all student matters, confidentiality is assured and no disclosure of information will be made outside that necessary for the administration of the student’s progress in the course. However students must note the mandatory reporting guidelines described under 'Student Registration' (page 31).

Students must therefore meet the following requirements:

- **Students with a physical, psychological or other condition that may impact on their ability to undertake clinical placement** must make a self-declaration stating the nature of the condition and what accommodations are needed for them to practise safely in a clinical venue;

- **Where there is a pre-existing illness or disability such that their ability to practice is impaired**, the student must advise Support and Equity Services to discuss the development of an Access Plan to support their clinical placement.

Pregnancy

Pregnancy does not preclude students from attending clinical placement; however some clinical placements may be potentially harmful to the developing fetus and to the pregnant student.

Pregnant students are expected to notify the Clinical Coordinator of their pregnancy if:

- Student is allocated to attend a placement in area where there may be particular health and safety issues, e.g. radiation, working with infectious disease, cytotoxic drugs and anesthetic gases.

And / or

- **Student is in the third trimester of pregnancy or within the first 8 weeks after birth.**

Students who want to continue to complete practicum during third trimester or within the first 8 weeks of birth are required to produce a Medical Certificate stating the student is fit to attend midwifery placement. Students must also comply with Health Facilities’ guidelines and recommendations when undertaking placements.

Students with Disabilities

CDU is committed to providing an accessible, supportive, safe, and inclusive environment for students with a disability; ensuring that prospective and current students with a disability are afforded appropriate opportunities to enter and participate fully in the life of the University; that reasonable adjustments will be made to provide access, participation, retention and success for students with a disability, including assistance to staff to help meet the students’ learning and support needs.

If a student has a disability or medical condition that may impact on ability to undertake study, the student facilitator at Disabilities and Equity Services can be contacted to discuss developing an access plan.
Disability and Disclosure
Choosing to disclose a disability is an individual matter and is a choice that can only be made by the student. It is not always necessary for a student to disclose their disability but this is an important topic to consider especially if adjustments are to be implemented. Supports cannot be implemented if CDU is not informed of student needs.

There is no legal obligation to disclose a disability to CDU staff unless it is likely to affect student performance and ability to meet the requirements of the course. Depending on the disability, course requirements may have an impact on student ability to undertake and fulfil the Clinical Placement and Clinical Teaching Block components of the course.

Students should also note the information provided under ‘Student Registration’ regarding mandatory reporting.

Student Administration and Equity Services
Student Administration and Equity Services provide counselling and other support services for students. A full description of these services and contact details are at
http://www.cdu.edu.au/studentservices/
Student Registration
Australian Health Practitioners Regulatory Agency (AHPRA)

From March 2011 all students enrolled in an approved program of study will be registered with AHPRA. Students do not have to register themselves. This is the role of the education provider (CDU) in conjunction with AHPRA at no cost to the student.

The National Law limits the role of the National Board to:
- Register students
- Maintain a student register that is not publicly available
- Deal with notifications about students – whose health is impaired to such a degree that there may be a substantial risk of harm to the public, or
- Have been charged with an offence, or have been convicted or who are found guilty of an offence punishable by 12 months imprisonment, or
- Who have or may have contravened a condition of the student’s registration or an undertaking given by students to the AHPRA.

Students are strongly advised to review the Student Registration page of the AHPRA website and the Fact Sheet and FAQ sheet as this answers many commonly asked questions.


The full legislation can be found at


A student register kept by a National Board must include the following information for each student whose name is included in the register;

(a) the student’s name; (b) the student’s date of birth; (c) the student’s gender; (d) the student’s mailing address and any other contact details; (e) the name of the education provider that is providing the approved program of study being undertaken by the student; (f) the date on which the student was first registered, whether under this law or a corresponding prior Act; (g) the date on which the student started the approved program of study; (h) the date on which the student is expected to complete the approved program of study; (i) if the student has completed or otherwise ceased to be enrolled in the approved program of study, the date of the completion or cessation; (j) if a condition has been imposed on the student’s registration, details of the condition; (k) if the Board accepts an undertaking from the student, details of the undertaking; (l) any other information the Board considers appropriate.

When a student ceases to be a student of the CDU program, CDU must notify AHPRA and the registration will be suspended.

Mandatory Reporting
CDU has a legal responsibility to mandatorily report students based on the following legislation;

Division 2 Mandatory notifications: 143 Mandatory notifications by education providers
(1) An education provider must notify the National Agency if the provider reasonably believes—
   (a) a student enrolled in a program of study provided by the provider has an impairment that, in the course of the student undertaking clinical training as part of the program of study, may place the public at substantial risk of harm; or
(b) a student for whom the education provider has arranged clinical training has an impairment that, in the course of the student undertaking the clinical training, may place the public at substantial risk of harm;

**Student's requirement to report**
Students are required to report the following to AHPRA;
- have been charged with an offence, or have been convicted or who are found guilty of an offence punishable by 12 months imprisonment or more;
- had their registration suspended or cancelled under the law of another country that provides for the registration of students.
Frequently Asked Questions

The following is a list of the most common frequently answered questions. It is recommended all students click on the link below that will take you to all of the frequently asked questions about pre-clinicals, placement and clinical teaching blocks http://www.cdu.edu.au/health/undergraduate-nursing

What is a CTB?

A Clinical Teaching Block (CTB) is a compulsory one week study block where students learn and practice their clinical skills in a simulated environment prior to clinical placement. These blocks are held in Darwin and Alice Springs.

When I am assigned to a CTB does this mean I am enrolled into the unit?

No. Students are responsible for enrolling themselves in the associated placement unit. Students need to enrol once they have successfully completed any pre-requisite units and been confirmed in to a CTB.

How do I nominate and what is the deadline for nominating a CTB?

There is an ‘Online Placement Nomination’ button on the ‘Enrolment Conditions & Clinical Placements page’. http://www.cdu.edu.au/health/undergraduate-nursing Click on the link and follow the prompts. The nomination dates and deadlines can also be found here.

I can't attend the CTB I have been allocated to, how do I request another CTB?

Contact the Placement Office at as soon as possible, via email Midwifplac@cdu.edu.au and attention this to the Placement Team Leader. Students must provide a reason for their request. There is no guarantee that students will be allocated to a preferred CTB.

I have to go to Alice Springs/Darwin/Melbourne for my CTB and or placement, is accommodation supplied?

Travel and accommodation arrangements associated with CTBs and placements are solely the responsibility of the student. On campus accommodation may be available at Darwin and Alice Springs. Please see details at www.cdu.edu.au/nfh/ or http://www.cdu.edu.au/campuses-centres/ailicesprings-campus

Can I arrive late/leave early for my CTB so I can catch a more suitable flight there/home?

No. 100% attendance is required at CTBs in order to successfully complete the CTB.

If I don't pass the CTB am I still able to attend my placement?

No. Students must successfully complete the CTB in order to attend placement.

I am repeating a placement unit; do I have to redo the CTB?

Yes. If a student fails a unit and then re-enrols in that unit they must redo all components of that unit, including the CTB.

Can I do just 2 or 3 days a week for my placement?

No. placements are not offered on a part time basis. Part time placement does not provide students with the best opportunity to consolidate their practice.

I have an exam during placement, what should I do?

Examinations should be discussed with the Unit Coordinator and Placement Office prior to attending placement. If the Placement Office has advance notice from the student, they can try to negotiate with the healthcare facility so that the student can have that day off placement (and make the missed shift up later). If
the health facility is unable to offer a makeup day, the Placement Office will assist the student in applying for a Special Exam. NOTE: makeup shifts and rostered days off are all issued at the discretion of the healthcare facility.

If I nominate a facility as one of my preferences, does this mean I will go to that facility?

Not necessarily. Placements are in very high demand throughout Australia, and all placements are issued at the discretion of healthcare facilities. These facilities may have placement requests from many education providers and may have preferred providers whose placement requests they prioritise. Therefore, CDU students may need to attend placements at facilities that they did not nominate preferences for.

If I know dates when I am unavailable for placement what should I do?

A student may email a request to the Placement Office to not go on placement during certain dates however; the Placement Office cannot guarantee that they will be able to meet this request. Students are expected to be available to attend placement once they are enrolled in their placement unit. Placements are in short supply Australia-wide and students who are unavailable for placement will delay their course progression, as it could be difficult to secure alternative placements.

Can I refuse a placement that is assigned to me by the Clinical Placement Office staff?

The student must follow the procedure outlined in the Extenuating Circumstances Guidelines, available on the CDU website, and provide evidence as to why they are refusing the placement. Non-acceptance of a placement (or failure to attend the placement) may result in a Fail grade.

Are all placements during semester time?

Placements are confirmed at the discretion of individual health facilities. If a placement unit is not completed within the semester of enrolment, because a placement has not yet been found or not yet been completed, a Practicum Ongoing (PO) grade can be awarded. This grade is applicable for two (2) admission periods (one year) to allow a placement opportunity. PO grades are issued with the approval of the Unit Coordinator.

Where will I go on placement?

Students will be advised via their CDU student email account of their placement. CDU endeavours to source placement within a student’s home state and as close as possible to where the student lives, however, as placements are all given at the health facilities discretion this does not always happen. Students may need to travel outside of their local area and possibly outside of their home state in order to attend placement.

How far will I have to travel from my home to attend placement?

The Placement Office tries to secure placements for students in their home state, though students may need to travel some distance to attend placement. All students have been that informed they may have to travel outside their home state in order to complete placement units. More information about enrolment conditions can be found at: http://www.cdu.edu.au/health/undergraduate-nursing

Is my lunch break counted towards my placement hours?

As in any workplace breaks are not included in working hours. Therefore an 8 hour shift will mean an 8 ½ hour day. (Students get half an hour for lunch).

Am I part of the work-force?

No. All Bachelor of Nursing students have supernumerary status while on clinical placements. This means students are additional to the workforce requirement and staffing ratios. Students are present in the placement setting as a learner and not as a member of staff.
I am an EN; will this make a difference to my clinical placements?

No. There are significant and complex differences in the role and responsibilities as a student on placement to that of paid employment as an Enrolled Nurse. Firstly, students on placement are not covered by an employment contract or employee insurance while on placement. Instead, students must comply with the policies of Charles Darwin University. Students are on placement as an undergraduate student. Students who work out of the student scope of practice will fail the clinical unit.

Do I get paid while on placement?

No. Students will be on placement as a student, not an employee. Students are not covered under an employment contract while on an authorised clinical placement and payment for students on placement does not apply.

Can I organise my own placement with a facility?

No. Students are not permitted to contact health facilities to organise placements. However, students can provide the Placement Office with information about potential placement opportunities. Cold calling health facilities to see whether they have available placements or whether they take CDU students is not a lead and will be considered as arranging your own placement(s).

Can I organise my own shifts and rosters?

No. All rosters are drawn up by the health facility staff who need to take staffing and preceptoring requirements into account. Students are not permitted to negotiate or make roster requests to the facility. If a student is concerned about a roster they are given, they need to direct their request through to the Placement Office at Midwifplac@cdu.edu.au

What should I expect of those supervising me?

Your Preceptor is generally appointed by the ward manager. Usually, preceptors have worked with many students and have experienced many different working relationships with them. In addition to providing preceptorship, your Preceptor also has to complete their usual workload. You can expect your preceptor to:

- Become familiar with the course and unit objectives related to the relevant academic unit in which the placement rests;
- Assist students to seek out relevant learning opportunities within a safe and appropriate environment;
- Provide regular constructive feedback; in particular, to identify areas of weaknesses and strengths;
- Provide constructive guidance and direction for students throughout the placement;
- Demonstrate professional role modelling;
- Be aware of, and comply with, relevant legislation underpinning practice;
- Conduct tutorials (if appropriate) and debriefing sessions on a regular basis during the placement;
- Provide reliable, valid and fair assessment of student performance;
- Be professional and ethical in their conduct toward you. This includes honesty in constructive feedback about expected performance;
- Provide support that contributes to your learning objectives commensurate with your level of progression within the programme (i.e. 1st, 2nd or 3rd year);
- Encourage you to develop safe, competent and professional practice; including in particular, orientation to local emergency procedures;
• Provide documented assessment of competency, both formative and summative.

Can I work outside my scope of practice? Can I perform procedures that require a learning package to ensure competency?

No. Students who work outside their scope of practice will be withdrawn from clinical practice and may fail the clinical unit. Please contact your Unit Coordinator if you or your preceptor is unsure and refer to your scope of practice table for the year level.
APPENDIX A:

SCOPE OF PRACTICE FOR CDU DIRECT ENTRY BACHELOR OF MIDWIFERY STUDENTS

The following table summarises the scope of practice for each year level for the CDU direct entry BM students. It indicates the level of midwifery skills and knowledge students should be able to demonstrate at the beginning and those they must achieve on completion. All students uphold the philosophy of midwifery practice as stated by the Australian College of Midwives and provide evidence-informed rationales for all midwifery actions. They must demonstrate professional accountability and responsibility for their actions & behaviour, according to their scope of practice & the ANMC Competency Standards, Code of Ethics and Practice. CDU’s BM students are ‘learners’ and are not part of the workforce (as distinct from the RN in an Employed Midwifery Student Program). Irrespective of past experience they work with close supervision from a RM.

<table>
<thead>
<tr>
<th>Year 1: Unit MID101</th>
<th>Year 2: Unit MID202</th>
<th>Year 3: Unit MID301; MID303; MID306; MID307</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novice: frequent or continuous cues. No client load; continuous supervision.</td>
<td>Novice-advanced beginner; frequent or occasional cues. Under the direct supervision of a midwife, and in collaboration with women clients, implement clinical decision making that is formed in consultation with other health care providers</td>
<td>Advanced-beginner. Minimal cues; minimal supervision Under the direct supervision of a midwife or equivalent, and in collaboration with the woman and where appropriate, other health care providers, form and implement own clinical decisions. Manage a small caseload of women (6-8)</td>
</tr>
<tr>
<td>May initiate 2 continuity of care journeys.</td>
<td>Demonstrate timely &amp; accurate communication, documentation and evidence informed decision-making which addresses cultural safety &amp; awareness. Discuss evidence-informed rationales for implementing designated midwifery care;</td>
<td>Demonstrate professional communication, conduct and evidence-informed decision-making in all aspects of midwifery practice across a range of cultural settings &amp; acuity levels.</td>
</tr>
<tr>
<td>Observe the role and scope of practice of the midwife; Communicate and collaborate appropriately with colleagues, women/ families • Actively listen • Observe a first antenatal visit • Observe a subsequent visit Establish and maintain an ongoing partnership with 2 women who are beginning their childbearing journey. Meet the 2 women through the supervising midwife.</td>
<td>With supervision conduct a first antenatal visit: • History taking • DV screening • Explain screening tests • Explain care options • Nutrition advice • Breastfeeding advice • Discuss childbirth education needs • Health assessment • Weigh/BMI • Urinalysis Conduct an abdominal examination Auscultate fetal heart rate Assist CTG Conduct scheduled antenatal assessments, Including discussion of birth options;</td>
<td>Confidently provide accurate, logical, concise and appropriate recording and reporting of client/patient data (oral &amp; written) to the health care team. Manage a small caseload of women (6-8) under the direct supervision of a midwife or equivalent. Assessment, planning, evidence-informed intervention, rationales and evaluation) for women/patients requiring medication: • Further develop skills in the safe administration of medicines via the oral, topical and parental routes • Manage medication regimes across varying modalities • Intra-venous therapy regimes including IV antibiotics; narcotic infusions, epidurals &amp; PCAs • Demonstrate knowledge about the storage and use of Schedule 2, 4 and 8 medications according to facility, statutory, State and Commonwealth Law</td>
</tr>
<tr>
<td>Year 1: Unit MID102</td>
<td>Year 2: MID204</td>
<td>Year 3: MID307. Specialist neonatal care</td>
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</tr>
<tr>
<td>Novice: frequent or continuous cues. No client</td>
<td>Novice-advanced beginner; frequent or occasional cues.</td>
<td>Advanced-beginner. Minimal cues; minimal supervision</td>
</tr>
</tbody>
</table>

Refer to the ACM guidelines for referral

Demonstrate knowledge of stages of labour and evidence for care;
- Vital signs
- Abdominal examination
- Assessment of progress
  - Contraction pattern
  - State of membranes
  - Descent of PP
  - FHR
  - VE

Assist with the birth of the baby

Assist with third stage

Assist the fourth or transition phase

Observe newborn examination

Administer IMI Vitamin K1 to newborn

Assist with initiation of breastfeeding

Assist with medication administration
- Articulate knowledge of legislation, charting and e-scribe medication administration contexts
- Safely administer S2 and S4 medications
- Explain the pharmacokinetics of the above medications

Work collaboratively with allied health workers & other team members.

- Discuss the pharmacology & pharmacokinetics of medications administered by the student

Discuss evidence-based collaborative management of women/patients who require the above interventions.

Recognise and assist with collaborative management of women experiencing challenges during their childbearing episode:
- Women with mental health problems
- Withdrawal syndrome and/or dependency behaviours (including working with AOD team)
- Cognitively impaired patients
- Medical/surgical complications
- Sexually transmitted infection/s
- Perinatal loss - early and late
- Birth of a baby with a congenital disorder

Perform and interpret CTG

Assist with family planning options

Provide evidence-based midwifery care for women experiencing the following complications:
- Antepartum haemorrhage
- Hypertension/preeclampsia/eclampsia
- Shoulder Dystocia'
- Breech Birth'
- Multiple pregnancy and birth
- Cord presentation and prolapse
- Cardiac disease
- Renal disease
<table>
<thead>
<tr>
<th>Task</th>
<th>Task</th>
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<tbody>
<tr>
<td>Load/ work with a RM and share the care under continuous supervision;</td>
<td>Under the direct supervision of a midwife, and in collaboration with women clients, implement clinical decision making that is formed in consultation with other health care providers</td>
<td>Under the direct supervision of a midwife or a registered nurse, and in collaboration with women clients, implement clinical decision making that is formed in consultation with other health care providers</td>
</tr>
<tr>
<td>May provide midwifery care under the direct supervision of a midwife and based on the clinical decision making of others.</td>
<td>Discuss evidence-informed rationales for implementing designated midwifery care;</td>
<td>Demonstrate timely &amp; accurate communication, documentation and evidence informed decision-making which addresses cultural safety &amp; awareness.</td>
</tr>
<tr>
<td>Provide midwifery care to post caesarean women and their infants;</td>
<td>Discuss evidence-informed rationales for implementing designated midwifery care;</td>
<td>Assess and care for well preterm infants</td>
</tr>
<tr>
<td>Assess woman’s/patients’ input/output (direct &amp; indirect observation, fluid balance &amp; food/diet charts);</td>
<td>Demonstrate timely &amp; accurate communication, documentation and evidence informed decision-making which addresses cultural safety &amp; awareness.</td>
<td>- incubator care</td>
</tr>
<tr>
<td>Recognise &amp; report significant fluid balance fluctuations;</td>
<td>Assess women in pre/early labour</td>
<td>- vital signs</td>
</tr>
<tr>
<td>With continuous support implement midwifery interventions for well women post caesarean sections that require some assistance with their care;</td>
<td>Provide evidence-based information to women in early labour;</td>
<td>- monitor for hypoglycaemia</td>
</tr>
<tr>
<td>• Vital signs;</td>
<td>Assess and care for labouring and birthing women:</td>
<td>- hygiene</td>
</tr>
<tr>
<td>• Positioning &amp; mobility</td>
<td>• Recognise the different stages of labour</td>
<td>• supplemental oxygen</td>
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<tr>
<td>• Personal hygiene</td>
<td>• Prepare the birthroom for birth</td>
<td>- oral/IV medications</td>
</tr>
<tr>
<td>Use safe manual handling techniques and equipment;</td>
<td>• Assist the birth of the baby</td>
<td>- phototherapy</td>
</tr>
<tr>
<td>With support promote patient comfort &amp; body alignment including:</td>
<td>• Assess newborn using the Apgar score</td>
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<tr>
<td>• Bed making – occupied and unoccupied</td>
<td>• Assist with newborn resuscitation</td>
<td></td>
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<tr>
<td></td>
<td>• Assist third stage</td>
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<tr>
<td></td>
<td>• Assess blood loss</td>
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<tr>
<td></td>
<td>• Assist in management of excessive blood loss</td>
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<tr>
<td></td>
<td>Use different pain management techniques when caring for women in labour &amp; birth.</td>
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<td></td>
<td>Assist with intrapartum CTG</td>
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<td></td>
<td>- apply</td>
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<td></td>
<td>- interpret</td>
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<td></td>
<td>Transfer of woman/baby care to postnatal area – verbal handover;</td>
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<td></td>
<td>Assist with discharge preparation as appropriate for women going home from the birth suite;</td>
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<td></td>
<td>Assist to care for women undergoing cervical ripening and/or induction of labour;</td>
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<td></td>
<td>Explain Prostaglandin gel uses and pharmacokinetics;</td>
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<tr>
<td></td>
<td>-- Assist with Prostaglandin gel insertion</td>
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<tr>
<td></td>
<td>- Apply the CTG monitor as appropriate</td>
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<tr>
<td></td>
<td>Assist in the preparation of the IVI</td>
<td></td>
</tr>
</tbody>
</table>
- Assist women requiring mobility support
- Apply TED stockings

Help with elimination management (insertion and care of indwelling catheters; bedpans) in relation to women post caesarean section and perineal toilet.

Assist woman with basic baby care:
- Bathing/skin care
- Buttock hygiene
- Cord care /eye care
- Daily observations
- Weighing

Use safe and effective infection control measures & standard precautions including:
- Hand hygiene
- Use of personal protective equipment
- Appropriate disposal of waste materials

With support assist with wound healing by primary intention:
- Dry wound dressing
- Assess wound healing

With supervision assess and supporting respiratory function through body positioning and primary care planning and implementation:
- Post caesarean section breathing/coughing exercises

Discuss student's role

Syntocinon:
- Select appropriate IV fluid
- Prime line
- Explain the pharmacokinetics of Syntocinon
- Explain the side effects of IV Syntocinon when used for induction of labour
- Add Syntocinon to IV bag

Assist with preparation for ARM
- Explain the reasons for an ARM

Assist with the preparation of women for LUSCS.

Accompany women to operating room and observe the handover procedures.

Attend the LUSCS and
- assist with preparations for receival of baby
- assist with baby care at birth
- assist with initiation of breastfeeding
- provide ongoing post operative postnatal care

Provide ongoing postnatal care for mother and baby;
- conduct postnatal assessment of mother
  - Vital signs
  - Breasts
  - Fundal height
  - Lochia
  - Perineum
  - Mental wellbeing
  - Interaction with baby

Provide education as required to postnatal women
- Breast care
- Perineal wound care
- Lochia patterns
- Baby feeding behaviours
- Immunisations
- Child family health nurse role
- Support groups in community

Administer S2 and S4 medications

Assist with education and milk preparation for women who choose to use a breastmilk substitute

Provide newborn care
- daily care of the newborn
- examination of the newborn
- collect newborn screening blood test on day 3

Using a simulator, demonstrate the steps in resolving shoulder dystocia and

Explain the rationale for the manoeuvres
<table>
<thead>
<tr>
<th>Emergency Codes (Blue, Green, Red etc)</th>
</tr>
</thead>
<tbody>
<tr>
<td>With support conduct an assessment of patient pain.</td>
</tr>
<tr>
<td>Falls assessment in relation to women post – epidural/spinal anaesthetic;</td>
</tr>
<tr>
<td>Provide basic care to antenatal women;</td>
</tr>
<tr>
<td>- Blood Pressure</td>
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<tr>
<td>- Weighing</td>
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<tr>
<td>- Urinalysis</td>
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<tr>
<td>- Auscultate fetal heart with Pinard or Doppler</td>
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</tbody>
</table>
APPENDIX B
FLOWCHART FOR CLINICAL PLACEMENT UNITS
MID101, MID102, MID202, MID204, MID301, MID303, MID306, MID307
For the reference of Midwifery Academics, Preceptors, and Bachelor of Midwifery Students.

COMMENCE PLACEMENT

CLINICAL APPRAISAL

Progress determined as satisfactory by Agency/Facility clinical supervisors, educators, preceptors and Unit Coordinators

Placement Finished
Clinical Portfolio completed and submitted to appropriate CDU unit co-ordinator within two weeks of completion of clinical placement

All elements graded as satisfactory and a grade is recorded

Student proceeds to the next level of study or if course complete grade transcript signed and forwarded to Nursing & Midwifery Board of Australia.

Assessment elements graded as unsatisfactory

Learning Agreement achieved

One Learning Agreement opportunity for the remainder of placement, or additional placement arranged as per Learning Agreement

Learning Agreement NOT achieved by set date

FAIL recorded for unit

Student to meet with the BM Program Manager/Theme Leader to discuss course progression

UNSAFE PRACTICE reported – student working outside identified scope of practice

Student removed from clinical placement

Progress determined as unsatisfactory by Agency/Facility clinical supervisors, educators, preceptors and Unit Coordinators i.e.
- Not achieved year level standard
- Not achieving scope of practice
- Not demonstrating professional conduct
Feedback provided to student

Placement Finished

Clinical Portfolio completed and submitted to appropriate CDU unit co-ordinator within two weeks of completion of clinical placement

All elements graded as satisfactory and a grade is recorded

Student proceeds to the next level of study or if course complete grade transcript signed and forwarded to Nursing & Midwifery Board of Australia.
APPENDIX C:

CLINICAL TEACHING BLOCK AND PROGRESSION INTO CLINICAL PLACEMENT UNITS: MID101, MID102, MID202, MID303.

Student successfully completes CTB pre-requisites as outlined by the Pre Clinical Coordinator and Clinical Placement Office and are enrolled in the unit.

Student accesses Learnline and completes the medication calculation exam and relevant pre-reading and critical thinking exercises for that unit.

Student attends allocated CTB

Student demonstrates competency in OSCA.
Student demonstrates professional behaviour and participates and contributes to all CTB sessions

Student demonstrates 100% attendance at CTB

Successful completion of CTB

Progression to placement determined by student providing pre-requisite documents

Refer to Clinical Placement Flow Chart

Student attends allocated CTB

Student fails to demonstrate competency in OSCA.
OR Unprofessional behaviour or lack of participation and contribution to CTB sessions noted

Feedback and revision time provided

Student given opportunity to demonstrate competency OSCA OR Demonstrate professional behaviour and CTB participation

Student fails to demonstrate competency in 2nd chance OSCA OR no change in professional behaviour or CTB participation.

Meeting with Unit Coordinator and BN Program Manager to discuss CTB performance/ progress

Student may be permitted to continue with the CTB and commence placement with a Learning Agreement with a focus on the area that was not successfully demonstrated during the CTB. Additional learning materials and assessments will be identified and provided with the support of the Unit Coordinator.

Student fails CTB and is required to re-enrol and complete the unit in its entirety

Student fails CTB pre-requisites as outlined by the Pre Clinical Coordinator and Clinical Placement Office and are enrolled in the unit.
This set of criteria is designed to provide feedback on clinical communication skills of students you have preceptored /facilitated / mentored and observed during a clinical placement. Please respond by ticking and initialing the appropriate level obtained. Students are assessed at the time of interim and final assessment. Please refer to Key.

<table>
<thead>
<tr>
<th>Please initial a box for each item</th>
<th>Limited 1</th>
<th>Developing 2</th>
<th>Satisfactory 3</th>
<th>Good 4</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal communication</td>
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<tr>
<td>Ability to communicate with patients and staff at a social level</td>
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<tr>
<td>Ability to communicate with patients and staff about nursing procedures</td>
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<tr>
<td>Ability to communicate with patient and staff about medical procedures</td>
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<td>Ability to participate in discussions with patient and staff</td>
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<tr>
<td>Knowing the right words or terms to express thinking to patients and staff</td>
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<tr>
<td>Written Communication</td>
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<tr>
<td>Ability to write notes about patients in clear English from a verbal shift change</td>
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<tr>
<td>Ability to summarize essential elements of patients’ conditions from a verbal shift change</td>
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<td>Ability to correctly use nursing terminology</td>
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<tr>
<td>Responding to verbal communication</td>
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<tr>
<td>Responds to verbal communication appropriately</td>
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<tr>
<td>Responds to verbal request accurately</td>
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<tr>
<td>Asking another person to repeat what he or she said as required</td>
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</tbody>
</table>

Please provide additional comments in the space below

Student Name: *(please print)*  ______________________ Sign:  __________________ Date:_________

Clinical supervisor/teacher: *(please print)*  ____________ Sign:  ______________ Date:_________

Key: Clinical communication Skills

Students who are assessed as **limited** or **developing** should be referred to their unit coordinator to discuss what remedial practices have been attempted by clinical supervisor/teacher and what further action is required. Students should be reassessed at regular intervals with success or failure of remedial actions noted.

<table>
<thead>
<tr>
<th>Limited</th>
<th>Developing</th>
<th>Satisfactory</th>
<th>Good</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Concerns about being unsafe because of lack of ability and clarity of communication. Continuous verbal cues required. Numerous errors of expression, pronunciation and incorrect terminology (health literacy). Inability to respond to verbal requests, constant requests for explanation or clarification. Social communication or therapeutic communication not established.</td>
<td>Refers to being safe when supervised and supported with communication. Requires some prompts and cues when articulating care and progress. Some errors of expression, pronunciation and use of incorrect terminology (health literacy). Some delay in response to verbal requests, requires some explanation or clarification. Social communication established.</td>
<td>Refers to being safe and knowledgeable most of the time. Requires occasional prompts when articulating patient care and progress. Therapeutic communication and social communication established.</td>
<td>Refers to being safe &amp; knowledgeable; efficient &amp; coordinated; displays confidence with activities of communication. Establishes good therapeutic techniques and interactions with the multidisciplinary team and patient. Able to articulate patient care and progress.</td>
</tr>
</tbody>
</table>
Death, serious illness or injury must be reported immediately to Work Health and Safety (WHS) through HRS Reception: 8946 6904

- **Injured party/ Person involved:** You must complete Section A and forward to your Supervisor for completion. Inform the Work Health and Safety (WHS) unit within The Office of Human Resource Services about the accident, incident or injury **within 24 hours**, preferably by email.
- **Supervisor/ Lecturer:** You must complete Section B and forward to WHS, **within 5 working days**, preferably by email.
- **Staff only:** For possible Workers’ Compensation Claim complete this form without delay and contact WHS for further information on the Workers’ Compensation process, preferably by email.

**NOTE:** This form is to be used for **accident/ incident** report only (unplanned event that has happened and caused immediate or imminent WHS risk exposure or injury). For general WHS concerns/ issues/ hazards, please use the **Hazard report form**.

WHS email: whs@cdu.edu.au
WHS phone no: (08) 8946 6473
Fax: (08) 8946 7211

If you are completing this form on behalf of someone else please complete this section with your details.

<table>
<thead>
<tr>
<th>Surname</th>
<th>Given names</th>
<th>Phone no.</th>
</tr>
</thead>
</table>

## Section A Details of person injured or person involved

To be completed by the person injured or involved and forwarded to the Supervisor / Lecturer without delay.

<table>
<thead>
<tr>
<th>Surname</th>
<th>Given names</th>
<th>Date of birth</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
</table>

Your email address

<table>
<thead>
<tr>
<th>Contact no.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Faculty / Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee no.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student no.</td>
</tr>
<tr>
<td>Course</td>
</tr>
<tr>
<td>Unit no.</td>
</tr>
</tbody>
</table>

If NOT a CDU employee please indicate:  
- Contractor  
- Employed by Contractor  
- Visitor  
- Affiliated

<table>
<thead>
<tr>
<th>Name of contractor/ employing organisation</th>
<th>Contact no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address of employer</td>
<td>Employer’s email:</td>
</tr>
</tbody>
</table>

**Incident details (e.g: CDU sites – campus, building, room, off CDU sites – Address approximate location, Faculty / Office**

<table>
<thead>
<tr>
<th>Date of incident</th>
<th>Time of incident</th>
</tr>
</thead>
</table>

**Location of incident**

**Description of incident** (describe task being performed and list sequence of events)

**Note:** (attach further information if space is insufficient)
Witness details (NOTE: Witness to Accident/Injury Report form needs to be completed and attached)

Name

☐ Staff  ☐ Student  ☐ Visitor/Contractor  Contact no.

………………

Accident, Incident and Injury Report

Human Resource Services
HRS-02-001 Version 3.00
Issued Aug 2014

Nature or Type

☐ Intracranial Injuries
☐ Fractures
☐ Wounds, lacerations, amputation or internal organ damage
☐ Burns
☐ Injury to nerves and spinal cord
☐ Traumatic joint/ligament/muscle/tendon injury
☐ Other injuries
☐ Musculoskeletal and connective tissue diseases
☐ Mental diseases
☐ Digestive system diseases
☐ Skin and subcutaneous tissue diseases
☐ Nervous system and sense organ diseases
☐ Respiratory system diseases

Body Part please indicate the injured part(s)

Mechanism of incident

☐ Falls, slips and trips of a person
☐ Hitting object with a part of body
☐ Being hit by moving object
☐ Sound and pressure
☐ Body stressing
☐ Heat, electricity and other environmental factors
☐ Chemical and other substances
☐ Biological factors
☐ Other and unspecified mechanisms of incident

Agency of injury/disease

☐ Machinery and (mainly) fixed plant
☐ Mobile plant and transport
☐ Powered equipment, tools and appliances
☐ Non-powered hand tools, appliances and equipment
☐ Chemicals and chemical products
☐ Materials and substances
☐ Environmental agencies
Circulatory system diseases
Infectious and parasitic diseases
Neoplasms (Cancer)
Other diseases
Other claims (specify):

Special Follow-up procedures are required for injuries involving contaminated needles or sharps – contact Manager, WHS.

Note: If completing form online…
Go to View on the toolbar, select Toolbars then ‘Drawing’.
The Drawing toolbar appears at the bottom of page.

Medical treatment obtained

Nil  First Aid  Doctor  Admitted to hospital  Other (specify)

Outcome for injured person

Time lost from work?  No  Yes  Hours  or  Not yet returned to work

Days

Human Resource Services
HRS-02-001 Version 3.00

Issued Aug 2014

51
**Placement Students only** (NOTE: Copy of host organisation's Accident, Incident and Injury Report must be attached)

<table>
<thead>
<tr>
<th>Name of CDU Unit Coordinator</th>
<th>Contact no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDU Unit Coordinator's e-mail address</td>
<td></td>
</tr>
<tr>
<td>OHS representative at host organisation</td>
<td>Contact no.</td>
</tr>
<tr>
<td>Host OHS representative e-mail address</td>
<td></td>
</tr>
</tbody>
</table>

Placement Students forward this form along with the Accident, Injury Report from the host organisation to Unit Coordinator.

**Unit Coordinator is NOT required to complete section B,** but must forward this form and the student’s Accident, Incident and Injury Report from the host organisation to the Manager, WHS, Human Resource Services, Orange 12, Level 2.

I give consent for the personal information in this report to be provided to my relevant Workplace Health and Safety Committee (WHSC) and Health and Safety Representative (HSR).

<table>
<thead>
<tr>
<th>Signature of person injured / involved</th>
<th>Date</th>
<th>Contact no.</th>
</tr>
</thead>
</table>

After completion of Section A forward to Supervisor / Lecturer to complete Section B.

## Section B Corrective action

Section B to be completed by CDU Supervisor / Lecturer and forwarded to WHS within 5 working days.

**Recommended Corrective Action**

- [ ] Change process/equipment/substance:  
  - Eliminate (remove)
  - Substitute - less hazardous
  - Isolate (limit access/exposure)
  - Redesign (change equipment/process)
  - Provide/maintain personal protective equipment

- [ ] Repair/modify machinery
- [ ] Provide/modify safe work procedures
- [ ] Install safety signage
- [ ] Changes to work environment
- [ ] Provide training (on the job training, course required)
- [ ] Other (specify)

**Specify details of corrective action recommended** (attach further information if space is insufficient):

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
Action taken to correct procedure/process to prevent incident/accident or to minimise reoccurrence
(attach further information if space is insufficient)
Name of Supervisor/ Lecturer (print) ________________________________
Signature of Supervisor/ Lecturer ________________________________
Contact no. ________________________________
Date ________________________________
Please Note: for the purpose of this report a witness is:

- a person who saw the accident/injury occur
- a person who was present immediately before or soon after the accident/injury and who observed the injured person
- a person told of the event shortly after it occurred

Return completed form to – Manager, Health, Safety and Environment, (HSE), Human Resource Services (HRS) within 24 hours or as soon as possible thereafter.
### Statement of Witness cont...

**From what you saw, what injuries were suffered i.e. indicate left/right, leg/hand, etc?**

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

**What duty was the person performing when the accident/injury occurred?**

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

- [ ]

**Were there any other person(s) present?**

- [ ] Yes  
- [ ] No

If “Yes” please provide details if known below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________________</td>
<td>___________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Contact no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>_________________________</td>
<td>___________</td>
</tr>
</tbody>
</table>

**In your view, given what you have seen or heard, how did the accident/injury occur?** (Give full details)

---
I certify that the above particulars are true and correct.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Name</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</table>

Signed in presence of:

<table>
<thead>
<tr>
<th>Name</th>
<th>Date</th>
</tr>
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<tbody>
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<td></td>
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</table>