

Profile information current as at 09/07/2025 08:32 pm

All details in this unit profile for MDWF12006 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

General Information

Overview

This clinical placement unit is the second of four that provides you with midwifery clinical experience. You will have the opportunity to assess, plan, provide, and evaluate the physiological and psychosocial care of the woman experiencing complex factors. Complexities may arise during the antenatal, intrapartum, and postnatal period and include the fetus and neonate. You will provide care in collaboration and consultation with the intra and interprofessional team utilising the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'. The clinical practicum component of this unit will require you to complete a minimum of 224 hours in addition to Continuity of Care Experiences (COCE).

Details

Career Level: Undergraduate

Unit Level: Level 2 Credit Points: 12

Student Contribution Band: 7

Fraction of Full-Time Student Load: 0.25

Pre-requisites or Co-requisites

Co-requisite: MDWF12005 Foundations of Midwifery 2

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the Assessment Policy and Procedure (Higher Education Coursework).

Offerings For Term 2 - 2024

• Mixed Mode

Attendance Requirements

All on-campus students are expected to attend scheduled classes – in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

Website

This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.

Class and Assessment Overview

Recommended Student Time Commitment

Each 12-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 25 hours of study per week, making a total of 300 hours for the unit.

Class Timetable

Regional Campuses

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

Metropolitan Campuses

Adelaide, Brisbane, Melbourne, Perth, Sydney

Assessment Overview

1. **Poster Sessions** Weighting: 40%

2. **Portfolio**Weighting: 60%

3. Professional Practice Placement

Weighting: Pass/Fail

Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the <u>University's Grades and Results Policy</u> for more details of interim results and final grades.

CQUniversity Policies

All University policies are available on the CQUniversity Policy site.

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the CQUniversity Policy site.

Previous Student Feedback

Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

Feedback from SUTE

Feedback

I find the amount of work involved in these incredibly time consuming and somewhat irrelevant to my practice. As an experienced RN we reflect daily on our practice as it is, having to write upwards of 70 reflective journals over the course of midwifery, and needing to research some aspect of the encounter with the COCE woman, 70 different topics in midwifery care is far too many. I personally believe it would be more beneficial for my midwifery practice and allow for a deeper understanding of multiple topics if just ONE reflective journal was written per woman after her continuity of care experience was complete. giving an overview of all the appointments, her labour and birth and her PN period, and then reflecting on the entire process of her care, would be more beneficial.

Recommendation

Assessment 1: Reflective Portfolio Continuity of Care models of care and woman centred care are essential components of midwifery but may be new concepts to Bachelor of Midwifery (postgraduate) students. They are asked to provide a reflective discussion of their learning development and personal and professional trajectory of their 10 Continuity of Care Experiences needed to meet Ahpra requirements for registration. Students are asked to recruit 3 Continuity of Care Experiences and complete 3 in term 2 comprising of approximately 17-20 portfolio entries of 400 words each. There is an awareness that developing their reflective portfolio can be time consuming and as such it is weighted at 60% of the total assessment marks. Students are provided with instructions on potential topics relevant to their Continuity of Care women and an exemplar of portfolio entries. This assessment and workload will be further reviewed by the midwifery team. Students will be made aware of the weighting and further strategies to support the assessment submitted in week 12 of the term. These include students deepening their knowledge and analysis of one topic rather than choosing different topics for each entry and writing up journal entries after each clinical experience rather than at the end of term.

Feedback from SUTE

Feedback

As external/online students it can be somewhat difficult to organise the assessment due to different work, clinical practice, and home schedules. A group poster and groups based on clinical placement location rather than randomly may work better.

Recommendation

Students are provided with the topics and group allocation for the poster and presentation as soon as Moodle access is available at the start of term. This is to enable them time to meet and develop their assessment within their group of 3 or 4 students. In term 1, they are allocated to a group with their peers at the same clinical placement unit where possible. In term 2, they are allocated to work with a variety of students to share practices across clinical placement units. They are asked to develop their assessment through email and Zoom/Teams meetings. Future group allocation will partner students from nearby clinical placement units to ensure student-focused assessments.

Feedback from Feedback in student emails and recognition of errors in assessment submissions in SONIA

Feedback

Students commented that they were confused as to the documents to upload in the Record of Hours assessment document submitted at the end of term

Recommendation

Wording within the Record of Hours online assessment documentation has been amended to ensure clarity and accuracy.

Unit Learning Outcomes

On successful completion of this unit, you will be able to:

- 1. Assess, plan, provide, and evaluate physiological care of the woman and her baby experiencing complex factors using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.
- 2. Assess, plan, provide, and evaluate psychosocial care of the woman experiencing complex factors during the childbearing continuum using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.
- 3. Critically reflect on clinical learning and midwifery practice related to the care of the woman and her baby experiencing complex factors during the childbearing continuum
- 4. Demonstrate developing midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) Midwife Standards for Pracrice (2018) requirements.

The proposed changes to learning outcomes and the unit will meet the following:

The draft ANMAC Midwifery Education Standards (2020).

Standard 1: Safety of the public.

Standard 3: Program of study.

Standard 4: Student experience.

Standard 5: Student assessment.

NMBA Midwife Standards for Practice (2018).

Standard 1: Promotes evidence-based maternal health and wellbeing.

Standard 2: Engages in respectful partnerships and professional relationships.

Standard 3: Demonstrates the capability and accountability for midwifery practice.

Standard 4: Undertakes comprehensive assessments.

Standard 5: Develops plans for midwifery practice.

Standard 6: Provides safe and quality midwifery practice.

Standard 7: Evaluates outcomes to improve midwifery practice.

The Nursing and Midwifery Board of Australia (NMBA) Code of Conduct for Midwives (2018).

Principle 1. Legal compliance.

Principle 2. Woman-centred practice.

Principle 3. Cultural practice and respectful relationships.

Principle 4. Professional behaviour.

Principle 5: Teaching, supervising and assessing.

Principle 7: Health and wellbeing.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives (2014).

- 1. Midwifery Relationships.
- 2. Practice of Midwifery.
- 3. The Professional Responsibilities of Midwives.
- 4. Advancement of Midwifery Knowledge and Practice.

National Safety and Quality Health Service Standards (2017).

Clinical Governance Standard.

Partnering with Consumers Standard.

Preventing and Controlling Healthcare-Associated Infection Standard.

Medication Safety Standard.

Comprehensive Care Standard.

Communicating for Safety Standard.

Blood Management Standard.

Recognising and Responding to Acute Deterioration Standard.

The Nursing and Midwifery Digital Health Framework.

Alignment of Learning Outcomes, Assessment and Graduate Attributes



Introductory



Intermediate



Level

Professional

Advanced

Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks		Learning Outcomes								
		1	L		2		3		4	1
1 - Poster Sessions - 40%							•			
2 - Portfolio - 60%			•		•		•			
3 - Professional Practice Placement - 0%		(•		•				•)
Alignment of Graduate Attributes to Learni	ng Out	cor	nes							
Graduate Attributes			L	earn	ing C	Outco	mes			
				1		2		3		4
1 - Communication				•		•		•		•
2 - Problem Solving				•		•		•		•
3 - Critical Thinking				•		•		•		•
4 - Information Literacy				•		•		•		•
5 - Team Work				•		•				•
6 - Information Technology Competence				•		•				
7 - Cross Cultural Competence				•		•		•		•
8 - Ethical practice				•		•		•		•
9 - Social Innovation				•		•		•		•
10 - Aboriginal and Torres Strait Islander Cultures										
Alignment of Assessment Tasks to Graduat	e Attri	but	es							
Assessment Tasks	Gra	duat	e Att	ribut	es					
	1	2	3	4	5	6	7	8	9	10
1 - Poster Sessions - 40%	•	•	•	•	•	•	•	•		
2 - Portfolio - 60%	•	•	•	•	•	•	•	•	•	
3 - Professional Practice Placement - 0%	•	•	•	•	•	•	•	•	•	

Textbooks and Resources

Textbooks

MDWF12006

Prescribed

Myles Textbook for Midwives

17th edition (2020)

Authors: Jayne Marshall; Maureen Raynor

Elsevier

Edinburgh , United Kingdom ISBN: 978-0-7020-7642-8 Binding: Paperback MDWF12006

Supplementary

Midwifery: Preparation for Practice

5th edition (2022)

Authors: Pairman, Sally, Tracy, Sally K, Dahlen, Hannah and Dixon, Lesley

Elsevier Australia Sydney , NSW , Australia ISBN: 978-0-7295-4314-9 Binding: Paperback

View textbooks at the CQUniversity Bookshop

IT Resources

You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)
- Headphones or speaker, and a microphone
- Zoom
- MS Teams
- Lap top or Computer

Referencing Style

All submissions for this unit must use the referencing style: <u>American Psychological Association 7th Edition (APA 7th</u> edition)

For further information, see the Assessment Tasks.

Teaching Contacts

Kelly Haynes Unit Coordinator

k.a.haynes@cqu.edu.au

Schedule

Week 1 - 08 Jul 2024

Module/Topic

Chapter

Events and Submissions/Topic

Welcome to Midwifery Practice 2 your clinical unit.

This clinical placement unit is the second of four that provides you with midwifery clinical experience.

You will have the opportunity to assess, plan and provide physiological and psycho-social care to women experiencing complex factors. This may occur during pregnancy, labour and in the postnatal period and includes the fetus and neonate. This care will be provided in collaboration and consultation with the multidisciplinary team utilising the Australian College of Midwives 'National Midwifery Guidelines for Consultation and Referral'.

This unit is to be undertaken in conjunction with Foundations of Midwifery 2.

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery

The Nursing and Midwifery
Board of Australia: Code of
Conduct for Midwives and the
Midwife Standards for Practice.
The International Confederation

of Midwives (ICM) International
Code of Ethics for Midwives.
Queensland Health State-Wide
Maternal and Neonatal Clinical
Guidelines.

The Australian Midwifery
Standards Assessment Tool
(AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

CQUniversity Social Media Profile

Ongoing Clinical Placement

Week 2 - 15 Jul 2024

Module/Topic

Chapter

Rules.

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u>
Standards for Practice.

The International Confederation of Midwives (ICM) <u>International</u> <u>Code of Ethics for Midwives.</u> <u>Queensland Health State-Wide Maternal and Neonatal Clinical</u> Guidelines.

The Australian Midwifery Standards Assessment Tool (AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

<u>CQUniversity Social Media Profile</u> Rules.

Events and Submissions/Topic

Ongoing Clinical Placement

Week 3 - 22 Jul 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience

Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and

Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u> <u>Standards for Practice</u>.

The International Confederation of Midwives (ICM) <u>International</u> <u>Code of Ethics for Midwives.</u> <u>Queensland Health State-Wide</u> <u>Maternal and Neonatal Clinical</u>

Guidelines.

The Australian Midwifery
Standards Assessment Tool

(AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet

your obligations under the

National Law.

CQUniversity Social Media Profile

Rules.

Ongoing Clinical Placement

Week 4 - 29 Jul 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife

Midwives and the Midwif Standards for Practice.

The International Confederation of Midwives (ICM) <u>International</u> <u>Code of Ethics for Midwives.</u> <u>Queensland Health State-Wide</u> <u>Maternal and Neonatal Clinical</u>

Guidelines.

The Australian Midwifery Standards Assessment Tool (AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

CQUniversity Social Media Profile Rules.

Ongoing Clinical Placement

Week 5 - 05 Aug 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u>

Standards for Practice.

The International Confederation of Midwives (ICM) <u>International</u> <u>Code of Ethics for Midwives.</u>

Queensland Health State-Wide Maternal and Neonatal Clinical

Guidelines.

The Australian Midwifery
Standards Assessment Tool

(AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the

National Law.

<u>CQUniversity Social Media Profile</u> Rules.

Ongoing Clinical Placement

Vacation Week - 12 Aug 2024 Chapter Module/Topic **Events and Submissions/Topic** CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book. The Australian College of **Midwives National Midwifery Guidelines for Consultation and** Referral. 4th Edition. The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife Standards for Practice. The International Confederation of Midwives (ICM) International Ongoing Clinical Placement Code of Ethics for Midwives. **Queensland Health State-Wide** Maternal and Neonatal Clinical Guidelines. **The Australian Midwifery Standards Assessment Tool** (AMSAT). CQUniversity Student Charter.

NMBA Social Media: How to meet

CQUniversity Social Media Profile

your obligations under the

National Law.

Rules.

Week 6 - 19 Aug 2024

Module/Topic Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u> Standards for Practice.

The International Confederation of Midwives (ICM) <u>International</u> <u>Code of Ethics for Midwives.</u> <u>Queensland Health State-Wide Maternal and Neonatal Clinical</u> <u>Guidelines.</u>

The Australian Midwifery Standards Assessment Tool (AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

CQUniversity Social Media Profile

Ongoing Clinical Placement Formative AMSAT Submission.

Week 7 - 26 Aug 2024

Module/Topic

Chapter

Rules.

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u> Standards for Practice.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives.

Queensland Health State-Wide Maternal and Neonatal Clinical Guidelines.

The Australian Midwifery
Standards Assessment Tool
(AMSAT).

Rules.

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

CQUniversity Social Media Profile

Ongoing Clinical Placement

Week 8 - 02 Sep 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience

Record Book.

The Australian College of **Midwives National Midwifery Guidelines for Consultation and** Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife Standards for Practice.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives. **Queensland Health State-Wide** Maternal and Neonatal Clinical

Guidelines.

The Australian Midwifery **Standards Assessment Tool**

(AMSAT).

CQUniversity Student Charter. NMBA Social Media: How to meet your obligations under the

National Law.

CQUniversity Social Media Profile

Rules.

Ongoing Clinical Placement

Written Assessment / Group Presentation Due: Week 8 Friday (6 Sept 2024) 11:55 pm AEST

Week 9 - 09 Sep 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u>

The International Confederation of Midwives (ICM) International

Standards for Practice.

Code of Ethics for Midwives.

Queensland Health State-Wide

Maternal and Neonatal Clinical
Guidelines.

The Australian Midwifery Standards Assessment Tool (AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

CQUniversity Social Media Profile Rules.

Ongoing Clinical Placement

Week 10 - 16 Sep 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: <u>Code of Conduct for Midwives</u> and the <u>Midwife</u>

Standards for Practice.

The International Confederation of Midwives (ICM) <u>International Code of Ethics for Midwives.</u>
Queensland Health State-Wide

Maternal and Neonatal Clinical

<u>Guidelines.</u>

The Australian Midwifery
Standards Assessment Tool

(AMSAT).

CQUniversity Student Charter.

NMBA Social Media: How to meet your obligations under the National Law.

<u>National Law</u>.

<u>CQUniversity Social Media Profile</u> Rules. Ongoing Clinical Placement

Week 11 - 23 Sep 2024

Module/Topic

Chapter

Events and Submissions/Topic

COUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of **Midwives National Midwifery** Guidelines for Consultation and Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife Standards for Practice.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives. Queensland Health State-Wide Maternal and Neonatal Clinical Guidelines.

The Australian Midwifery Standards Assessment Tool

(AMSAT).

CQUniversity Student Charter. NMBA Social Media: How to meet your obligations under the

National Law.

CQUniversity Social Media Profile

Rules.

Ongoing Clinical Placement

Week 12 - 30 Sep 2024

Module/Topic

Chapter

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience

Record Book.

The Australian College of Midwives National Midwifery **Guidelines for Consultation and** Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife

Standards for Practice. The International Confederation

of Midwives (ICM) International Code of Ethics for Midwives. Queensland Health State-Wide Maternal and Neonatal Clinical

Guidelines.

The Australian Midwifery **Standards Assessment Tool**

(AMSAT).

CQUniversity Student Charter. NMBA Social Media: How to meet

your obligations under the

National Law.

CQU Social Media Profile Rules

Events and Submissions/Topic

Ongoing Clinical Placement

Reflective Journals Due: Week 12 Friday (4 Oct 2024) 11:55 pm AEST

Review/Exam Week - 07 Oct 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience

Record Book.

The Australian College of **Midwives National Midwifery** Guidelines for Consultation and

Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife Standards for Practice.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives. Queensland Health State-Wide Maternal and Neonatal Clinical

Guidelines.

The Australian Midwifery Standards Assessment Tool

(AMSAT).

CQUniversity Student Charter. NMBA Social Media: How to meet your obligations under the

National Law.

CQU Social Media Profile Rules

Ongoing Clinical Placement

Exam Week - 14 Oct 2024

Module/Topic

Chapter

Events and Submissions/Topic

CQUniversity Australia Bachelor of Midwifery (Graduate Entry) Student Clinical Experience Record Book.

The Australian College of Midwives National Midwifery **Guidelines for Consultation and** Referral. 4th Edition.

The Nursing and Midwifery Board of Australia: Code of Conduct for Midwives and the Midwife Standards for Practice.

The International Confederation of Midwives (ICM) International Code of Ethics for Midwives.

Queensland Health State-Wide Maternal and Neonatal Clinical

Guidelines.

The Australian Midwifery Standards Assessment Tool

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CQUniversity Student Charter. NMBA Social Media: How to meet your obligations under the

National Law.

CQUniversity Social Media Profile

Rules.

Ongoing Clinical Placement

Assessment Tasks

1 Written Assessment / Group Presentation

Assessment Type

Poster Sessions

Task Description
MDWF12006
MIDWIFERY PRACTICE 2

Assessment 1 - Poster Sessions

Type:

Part One: Individual written assessment

Part Two: Group poster design **Part Three:** Group presentation

Due date: 2355 (AEST) Friday 6th September 2024 - Week 8

Weighting:Part One: 20%
Part Two: 10%

Part Three: 10% (40% in total)

Length:

Part One: Individual written assessment 1500 words +/- 10% (excluding reference list).

Part Two: Group poster design - no limit.

Unit Coordinator: Kelly Haynes

Aim

The aim of this assessment is for you to review, research and analyse current evidence that guides maternity healthcare care for women experiencing conditions complicating pregnancy. This assessment provides you with an opportunity to research and read widely to demonstrate your understanding of the disease, treatment and multidisciplinary care of women and infants experiencing complexities. This assessment will provide you with an opportunity to disseminate your findings.

Instructions

Please follow the steps below to complete the task. There are three parts to this assessment task:

Part One: Individual written assessment

Part Two: Group poster design Part Three: Group presentation

Part One - Individual Written Assessment (20%)

Please follow the steps below to complete Part One of this assessment task:

For your individual written assessment, choose one of the following complex midwifery practice topics below:

- ABO incompatibility in pregnancy
- Cardiovascular disease in pregnancy
- Preeclampsia
- Thyroid issues in pregnancy
- Hyperemesis Gravidarum

You may use the following steps as a guide to your written assessment:

- Introduction
- **Explain** the pathophysiology of the chosen condition.
- **Identify** the associated consultation and referral level according to the Australian College of Midwives' National Midwifery Guidelines for Consultation and Referral 4th edition (2021).
- Assess the current, evidence-based care for women who are diagnosed with the chosen condition and describe a

suitable multidisciplinary team care plan. This plan should demonstrate an understanding of multidisciplinary collaboration and appropriate referral pathways.

- **Evaluate** how the midwife would work with the woman to promote woman-centred care and optimise her experience of pregnancy, labour/birth and the postnatal period.
- Conclusion

Part two - Group Poster Design (10%)

Students will be required to work in groups to design a poster on one of the topics above related to complications in pregnancy. The target audience will be your student peers. The unit coordinator will assign students to groups of 2-3, which will be published on the Moodle discussion board and the Assessment 1 Moodle page for Midwifery Practice 2.

Please follow the steps below to design your poster:

- **Define** the chosen pregnancy complication.
- **Outline** the potential consequences/ outcomes of the pregnancy complication.
- Explore the evidence-based recommendations and multidisciplinary involvement required.

Part Three: Group Poster Presentation (10%)

Groups will be required to present their poster to their peers at one of the two scheduled Zoom sessions on **Friday 6th September (Week 8) 2024** at:

10.00 am - 12.00 pm

10

12.30 pm - 2.30 pm

Please follow the instructions below to present the group poster:

Each group will have 10 minutes to explain their understanding of their topic and the associated information presented on the poster: In your discussion, you are advised to follow the same format as when designing your poster:

- **Define** the chosen pregnancy complication.
- **Outline** the potential consequences/ outcomes of the pregnancy complication.
- Explore the evidence-based recommendations and multidisciplinary involvement required.

Please note:

As this is a group learning exercise, all students must be present for the duration of the scheduled Zoom session. You are required to make appropriate roster requests to ensure availability.

Literature and references

In this assessment use at least 5 contemporary references (<5 years) for the individual written task, and at least 5 contemporary references (<5 years) for the group poster design task to support your discussion. You may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites. When sourcing information, consider the 5 elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Grey literature sourced from the internet must be from reputable websites such as from

government, university, or peak national bodies: for example, the Australian College of Midwives. Note, that websites such as Stat Pearls, Life in the Fastlane, and Wikipedia are not suitable for this assessment task. Lecture notes are not primary sources of evidence and should not be used in this assessment.

Requirements

Written Assessment

- Use a conventional and legible size 12 font, such as Times New Roman, with 2.0 line spacing and 2.54 cm page margins (standard pre-set margin in Microsoft Word).
- Include page numbers on the top right side of each page in a header.
- Use formal academic language.

• Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online CQU APA Referencing Style Guide.

The word count excludes the reference list but includes in-text citations (i.e., paraphrasing, or direct quotations). Note. Paraphrasing is required.

Poster

- Your poster should be presented on one page.
- Use language appropriate to the target audience: your professional peers.
- There is no word count for the poster but ensure that you use a legible font size and text is clear and to the point.
- Use bullets, numbering, and headlines to make it easy to read.
- In-text referencing should be included in the poster. The reference list can be presented on an additional page to the poster.

Presentation

- 10 minutes in length.
- All students within the allocated group must be available to present their poster.

Resources

- You can use unit-provided materials and other credible sources (e.g., journal articles, books) to reference your argument. The quality and credibility of your sources are important.
- We recommend that you access your discipline-specific library guide: the nursing and midwifery guide. You may like to manage your citations and reference list. Information on how to use academic referencing software (EndNote) is available at the CQUniversity Library website should you wish to learn how to use it.
- For information on academic communication please go to the <u>Academic Learning Centre Moodle site</u>. The Academic Communication section has many helpful resources including information for students with English as a second language.
- Submit a draft before the due date to review your <u>Turnitin Similarity Score</u> before making a final submission. Instructions are available here.
- For information on using PowerPoint please go to the <u>Academic Learning Centre Computing Basics section</u> How to use PowerPoint.
- For information on using Zoom to present your assessment please go to Zoom web conferencing.

The use of Generative Artificial Intelligence (Gen-Al) tools, including Al-driven writing assistants and content generators, is not permitted in this assessment. The Nursing and Midwifery Board of Australia [NMBA] (2018), Midwifery Standards of Practice requires students to demonstrate essential human capacities, skills, knowledge, and integration of theory into practice, crucial for midwifery practice. Midwifery practice relies on human interaction, empathy, ethical decision-making, and effective communication—skills that cannot be adequately assessed through Al-generated content. To ensure the integrity and development of these capabilities, students must verify that any grammar or writing enhancement programs used do not incorporate Al components. Compliance with midwifery practice standards is vital for meeting AHPRA/NMBA graduate attributes and preparing for professional practice.

Submission

- Submit your written assessment via the unit Moodle site in Microsoft Word format by the submission time and date: 2355 (AEST) Friday 6th September 2024.
- The poster should be formatted as a PDF file and also submitted via the unit Moodle site at this time/date. Please do not edit this after the presentation.
- You will be presenting live to your lecturer and fellow students using Zoom, a video conferencing program. Your lecturer will help you with using Zoom. With your permission, your presentation may be recorded for marking purposes. Only your lecturer will have access to this video which will be stored securely.

Marking Criteria

Refer to the marking rubric on the Moodle site for more details on how marks will be assigned. Assessment re-attempt is not available for Assessment 1.

Learning Outcomes Assessed

Critically reflect on clinical learning and midwifery practice related to the care of the woman and her baby experiencing complex factors during the childbearing continuum.

Assessment Due Date

Week 8 Friday (6 Sept 2024) 11:55 pm AEST

This will be the submission date of your written assignment and your poster design to be presented to the cohort via Zoom

Return Date to Students

Week 10 Friday (20 Sept 2024)

Weighting

40%

Assessment Criteria

Written Assessment - individual (20%)

	HD 100-85%	D 75-84%	C 65-74%	P 50-64%	F 46-49%	Low Fail >45%
Structure (10%)	Content is very well organised. Consistently accurate with spelling, grammar, and punctuation. Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. 10.00 - 8.41 (10%)	Content is well organised. Mostly accurate with spelling, grammar, and punctuation (1-2 errors). Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. 8.40 - 7.41	Content is adequately organised. Some inaccuracies with spelling, grammar, and punctuation (3-4 errors). Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. 7.40 - 6.41	Content is somewhat organised. A few inaccuracies with spelling, grammar, and punctuation (4-5 errors). Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. 6.40 - 4.91	Content is mostly disorganised. Many inaccuracies with spelling, grammar, and punctuation (>5 errors). Content is not the student's own work and has been previously submitted. Gen Al agents used during this assessment. 4.90 - 4.50	Content is disorganised. Many inaccuracies with spelling, grammar, and punctuation (>6 errors). Content is not the student's own work and has been previously submitted. Gen A agents used during this assessment. 4.49 - 0.0

Approach & Argument (80%)	Content is clearly relevant to the topic; the approach comprehensively answers the question, and the argument proceeds logically and is within the set word limit. 10.00 - 8.41 (10%)	Content is relevant to the topic; the approach clearly answers the question, and the argument proceeds logically and is within the set word limit. 8.40 - 7.41	Content is appropriate and answers the question and the argument for the most part proceeds logically and is within the set word limit. 7.40 - 6.41	Content answers the question, but the argument is at times repetitive or lacks cohesion. It is within the set word limit with a 10% allowance (under or over the set limit). 6.40 - 4.91	Content is frequently off topic and only partially answers the questions in relation to current midwifery practice. The discourse frequently lacks cohesion. The word limit has not been adhered to and is marginally over or under the 10% allowance. 4.90 - 4.50	Content is irrelevant and or does not answer the question in relation to current midwifery practice. The discourse lacks cohesion. The word limit has not been adhered to, the word limit is well over or under the 10% allowance. 4.49 - 0.00
	An articulate and comprehensive explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral (25%) 25.00 - 21.01	Insightful and well-developed explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral 21.00 -18.51	A logical explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral 18.50 - 16.01	A disjointed explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral 16.00 - 12.26	An inadequate explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral 12.25 - 11.26	No explanation of (a) the pathophysiology of the chosen condition and (b) the consultation and referral level according to the National Midwifery Guidelines for Consultation & Referral 11.25- 0.00
	A comprehensive examination of the current, evidence-based care for the chosen condition, succinctly identifying a highly appropriate multi-disciplinary team care plan and demonstrating a very high understanding of the multidisciplinary collaboration and referral pathways. (25%) 25.00 - 21.01	A well-developed examination of the current, evidence-based care for the chosen condition, clearly identifying an appropriate multi-disciplinary team care plan and demonstrating a high understanding of the multidisciplinary collaboration and referral pathways. 21.00 -18.51	A broad examination of the current evidence-based care for the chosen condition, broadly identifying a multi-disciplinary team care plan and demonstrating a broad understanding of the multidisciplinary collaboration and referral pathways. 18.50 - 16.01	A minimal examination of the current evidence-based care for the chosen condition, with minimal identification of a multi-disciplinary team care plan and demonstrating a minimal understanding of the multidisciplinary collaboration and referral pathways. 16.00 - 12.26	An inadequate examination of the current evidence-based care for the chosen condition, with poor identification of a multi-disciplinary team care plan and demonstrating a poor understanding of the multidisciplinary collaboration and referral pathways. 12.25 - 11.26	No examination of the current evidence-based care for the chosen condition, with poor identification of a multi-disciplinary team care plan and demonstrating a poor understanding of the multidisciplinary collaboration and referral pathways. 11.25 - 0.00
	A thorough & coherent outline of how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth and the postnatal period. (20%) 20.00 - 16.81	A clear & relevant outline of how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth and the postnatal period. 16.80 - 14.81	A logical outline of how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth and the postnatal period. 14.80 - 12.81	Satisfactory outline of how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth, and the postnatal period. 12.80 - 9.81	Poor understanding of the topic. Content inadequately outlines how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth and the postnatal period. 9.80 - 9.01	No evidence of understanding of the topic. Content does not outline how the midwife would work with the woman to promote her wellbeing and optimise her experience of pregnancy, labour/birth and the postnatal period. 9.00 - 0.00

	Consistently integrates up-to-date references to support and reflect all ideas, information, and quotations. 5.00 - 4.21 (5%)	Generally, integrates up-to-date references to support and reflect ideas, information, and quotations, with 1 or 2 exceptions. 4.20 - 3.71	Frequently integrates up-to-date references to support and reflect ideas, information, and quotations, with 3 or 4 exceptions. 3.70 - 3.21	Occasionally integrates up-to-date references to support and reflect ideas, information, and quotations, with 5 or 6 exceptions. 3.20 – 2.46	Infrequent attempts (>7 errors) to integrate up-to- date references to support and reflect ideas, information, and quotations. 2.45 - 2.26	Failure to integrate up-to-date references to support and reflect ideas, information, and quotations. 2.25 - 0.00
Referencing (10%)	Consistently accurate with APA referencing. A minimum of 5 references used including journal articles and relevant high-quality websites. 5.00 - 4.21 (5%)	One or two consistent APA referencing errors identified. A minimum of 5 references used including journal articles and relevant high-quality websites. 4.20 - 3.71	Three or four consistent APA referencing errors identified. A minimum of 5 references used including journal articles and relevant high-quality websites. 3.70 - 3.21	Three or four inconsistent APA referencing errors identified. A minimum of 5 references used including journal articles and relevant high-quality websites. 3.20 – 2.46	Many inaccuracies with APA referencing (>5). Less than 5 references used. Journal articles not sourced. Relevant high-quality websites not included. 2.45 - 2.26	Many inaccuracies with APA referencing (>6). Less than 5 references used. Less than 2 journal articles not sourced. Relevant high-quality websites not included. 2.25 - 0.00
	Total: 100% 100.00 - 84.50	84.49 - 74.50	74.49 - 64.50	64.49 - 49.50	49.49 - 45.1	45.00 - 00.00
	Comments: /100 Percentage for written assessment: /20%					

Poster Sessions - group (20%) POSTER: 10%

	HD	D	C	P	F	Low Fail
	100-85%	75-84%	65-74%	50-64%	49-0%	>45%
Structure (20%)	Content is very well organised, highly engaging, and aesthetically appealing. Images are of high quality and highly relevant to the content. Language is appropriate for the target audience. Consistently accurate with spelling, grammar, and punctuation. 20.00 - 16.81 (20%)	Content is well organised, engaging and aesthetically appealing. Images are of high quality and are relevant to the content. Language is appropriate for the target audience. Mostly accurate with spelling, grammar, and punctuation (1-2 errors). 16.80 – 14.81	Content is adequately organised, engaging and aesthetically appealing. Images are of good quality and are relevant to the content. Language is generally appropriate for the target audience. Some inaccuracies with spelling, grammar, and punctuation (3-4 errors). 14.80 - 12.81	Content is somewhat organised, engaging and aesthetically appropriate. Images are of good quality and are somewhat relevant to the content. Language is at times inappropriate for the target audience. A few inaccuracies with spelling, grammar, and punctuation (4-5 errors). 12.80 - 9.81	Content somewhat disorganised, unengaging, and not aesthetically appealing. Images are of poor quality and/or not relevant to the content. Language is generally inappropriate for the target audience. Inaccuracies with spelling, grammar, and punctuation (>5 errors). 9.80 - 9.01	Content is disorganised, unengaging, and not aesthetically appealing. Images are absent or not relevant to the content. Language is inappropriate for the target audience. Many inaccuracies with spelling, grammar, and punctuation. 9.00 – 0.00

	Content is clearly relevant to the topic; the approach comprehensively answers the question, and the argument proceeds logically. The chosen topic is clearly identifiable. 10.00 - 8.41 (10%)	Content is relevant to the topic; the approach clearly answers the question, and the argument proceeds logically. The chosen topic is clearly identifiable. 8.40 - 7.41	Content is appropriate and addresses the topic for the most part proceeds logically. The chosen topic is identifiable. 7.40 - 6.41	Content addresses the topic but is at times repetitive or lacks cohesion. The chosen topic is somewhat clear. 6.40 - 4.91	Content is mostly irrelevant or does not address the topic and the script lacks cohesion in many places. The chosen topic is not clear.	Content is irrelevant and or does not address the topic and the script lacks cohesion. The chosen topic is unclear.
Approach & Argument	An articulate, succinct, and comprehensive definition of the chosen complication. 20.00 - 16.81 (20%)	A well-developed definition of the chosen complication. 16.80 – 14.81	A logical definition of the chosen complication. 14.80 - 12.81	A disjointed and limited definition of the chosen complication. 12.80 - 9.81	A poor definition of the chosen complication. 9.80 - 9.01	An inadequate definition of the chosen complication.
(70%)	A comprehensive and insightful outline of the potential consequences of the chosen complication. 20.00 - 16.81 (20%)	A well-developed and thoughtful outline of the potential consequences of the chosen complication.	A broad outline of the potential consequences of the chosen complication. 14.80 - 12.81	A minimal and/or limited outline of the potential consequences of the chosen complication. 12.80 - 9.81	An inadequate outline of the potential consequences of the chosen complication. Understanding of the topic is poorly demonstrated. 9.80 - 9.01	No outline of the potential consequences of the chosen complication. Failure to demonstrate understanding of the topic. 9.00 - 0.00
	A comprehensive and concise exploration of the evidence-based care recommendations and multidisciplinary involvement. 20.00 - 16.81 (20%)	A clear and relevant exploration of the evidence-based care recommendations and multidisciplinary involvement. 16.80 - 14.81	A logical exploration of the evidence-based care recommendations and multidisciplinary involvement. 14.80 - 12.81	Satisfactory but limited exploration of the evidence-based care recommendations and multidisciplinary involvement. 12.80 - 9.81	An inadequate exploration of the evidence-based care recommendations and multidisciplinary involvement Understanding of the topic is poorly demonstrated. 9.80 - 9.01	No exploration of the evidence-based care recommendations and multidisciplinary involvement. Failure to demonstrate understanding of the topic. 9.00 - 0.00
	Consistently integrates up-to-date references to support and reflect all ideas, information, and quotations. 5.00 - 4.21 (5%)	Generally, integrates up-to-date references to support and reflect ideas, information, and quotations, with 1 or 2 exceptions.	Frequently integrates up-to-date references to support and reflect ideas, information, and quotations, with 3 or 4 exceptions. 3.70 - 3.21	Occasionally integrates up-to-date references to support and reflect ideas, information, and quotations, with 5 or 6 exceptions.	Infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas, information, and quotations. 2.45 - 2.26	Failure to integrate up-to-date references to support and reflect ideas, information, and quotations. 2.25 - 0.00
Referencing (10%)	Consistently accurate with referencing. A minimum of 5 references used including journal articles and relevant high-quality websites. 5.00 - 4.21 (5%)	1 or 2 consistent referencing errors identified. A minimum of 5 references used including journal articles and relevant high- quality websites. 4.20 - 3.71	3 or 4 consistent referencing errors identified. A minimum of 5 references used including journal articles and relevant high- quality websites. 3.70 - 3.21	3 or 4 inconsistent referencing errors identified. A minimum of 5 references used including journal articles and relevant high-quality websites. 3.20 - 2.46	Many inaccuracies with referencing (>5). Less than 5 references used. Journal articles not sourced. Relevant high-quality websites not included.	Many inaccuracies with referencing (>6). Less than 5 references used. Less than 2 journal articles not sourced. Relevant high- quality websites not included. 2.25 - 0.00
	Total: 100% 100.00 - 84.50	84.49 - 74.50	74.49 - 64.50	64.49 - 49.50	49.49 - 45.1	45.00 - 00.00

1-		
	Comments:	
	/100	
	Percentage for poster: /10%	

PRESENTATION - 10%

	HD 100-85%	D 75-84%	C 65-74%	P 50-64%	F 49-0%	Low Fail >45%
Presentation (10%)	A concise, yet comprehensive explanation of the poster's subject matter. The explanation insightfully extends upon the information presented on the poster. The poster is referred to when explaining the topic. 10.00 - 8.41 (10%)	A clear and relevant explanation of the poster's subject matter. The explanation extends upon to the information presented on the poster. The poster is referred to when explaining the topic. 8.40 - 7.41	A general explanation of the poster's subject matter. The explanation somewhat extends upon to the information presented on the poster. The poster is referred to when explaining the topic. 7.40 - 6.41	An explanation of the poster's subject matter is provided. Lacks depth and detail. The explanation pertains only to the information presented on the poster. The poster is inconsistently referred to when explaining the topic. 6.40 - 4.91	An inadequate explanation of the poster's subject matter. The explanation is inadequate or absent. The poster is not referred to when explaining the topic.	Absent explanation of the poster's subject matter. The explanation is absent. The poster is not referred to when explaining the topic. 4.90 - 0.00
	Comments: /10 Percentage for poster presentation: /10%					

Referencing Style

• American Psychological Association 7th Edition (APA 7th edition)

Submission

Online

Submission Instructions

Your written assessment will be submitted via Moodle but your poster presentation will be via Zoom

Learning Outcomes Assessed

• Critically reflect on clinical learning and midwifery practice related to the care of the woman and her baby experiencing complex factors during the childbearing continuum

Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Information Technology Competence
- Cross Cultural Competence
- Ethical practice

2 Reflective Journals

Assessment Type

Portfolio

Task Description
MDWF12006
MIDWIFERY PRACTICE 2

Assessment 2
Type: Portfolio

Due date: 2355 (AEST) 4th October 2024, Week 12

Weighting: 60%

Length: Each journal entry should be approximately 300 words; however, labour and birth reflections can be longer

(approximately 400 words).

Unit Coordinator: Kelly Haynes
Learning Outcomes Assessed

Assess, plan, provide, and evaluate physiological care of the woman and her baby experiencing complex factors using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.

Assess, plan, provide, and evaluate psychosocial care of the woman experiencing complex factors during the childbearing continuum using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.

Critically reflect on clinical learning and midwifery practice related to the care of the woman and her baby experiencing complex factors during the childbearing continuum.

Aim

The aim of this assessment is to provide you with the opportunity to reflect on your approach to provide continuity of care and the underpinning frameworks that underpin that approach. Reflective practice is a key element that contributes to the Nurses and Midwives Board of Australia's Midwife Standards for Practice (2018). Through reflective processes, students and registered midwives can identify and explore diverse values, beliefs, learning needs, and sociocultural structures.

Instructions

To facilitate your reflective skill development, you are required to complete a reflective piece of writing for each of the three (3) 'continuity of care experience' (COCE) women you recruited in term 1 and for the further 3 women recruited in term 2 (six in total).

A reflective journal documents the development of a therapeutic midwifery relationship between midwifery students, women and their families and can encompass interpersonal aspects of the interaction. Reflective writing is a deeper cognitive process that demonstrates what has been learned about the midwifery profession, in addition to one's development as a practicing midwife. You will continue to develop and build upon your reflective skills after the submission of your reflective portfolio in term 1 and the feedback you received. This process is designed to elevate the CoCE experience from merely ticking off appointments and completed women, to demonstrating active cognitive learning.

Reflective writing is more personal than other kinds of academic writing and is an exploration and analysis of events, not just a description of them. This involves analysing an experience, assessing what you have learned from it, what you could have done differently, realising new approaches to your care, and ultimately, how you felt about the whole experience. As a midwifery student, it identifies how different aspects of your work interconnect. It can be very useful for identifying gaps in knowledge and ethical dilemmas or situations that need further thought.

Please use the framework below to structure each reflective journal entry.

Action	Reflection
Description	What is it? What happened? Why am I talking about it?
Interpretation	What is important and relevant? Look through your description and try to find words or phrases that require further exploration. Include the rationale for what was done or why it was done. Where there is controversy about what was done or found, provide the rationale and sources of evidence for both sides of the argument. How can it be explored and explained using contemporary theories?
Outcome	What have I learned from this? How will it influence my future work?

Please note that you must use the template provided on the MDWF12006 Moodle page for each Continuity of Care Experience (COCE).

Requirements

- Each COCE woman must have their own individual journal in Word Document format, which is to be uploaded as individual files to the relevant Moodle assessment page. You will therefore submit six separate documents for this assessment.
- Each COCE woman must be de-identified within the journal.
- Ensure your name and the pseudonym for your woman at the centre of your COCE are documented on each page.
- Each journal entry in the portfolio must adhere to the template provided on the MDWF12006 Moodle page.

- When you are preparing your term submission, please enter a red line under the completed entries for this term's marking in each journal.
- Use a conventional and legible size 12 font, such as Times New Roman, with 2.0 line spacing and 2.54cm page margins (standard pre-set margin in Microsoft Word).
- You may write in the first-person perspective.
- Use formal academic language.
- Use the seventh edition American Psychological Association (APA) referencing style. The CQUniversity Academic Learning Centre has an online APA Referencing Style Guide.

Literature and references

Use at least one reference for each journal entry. Where references are used to support your discussion, they should be contemporary references (<5 years) sourced from the CQUniversity library in this assessment to support your discussion. You may also use seminal scholarly literature where relevant. Suitable references include peer-reviewed journal articles as well as textbooks and credible websites. When sourcing information, consider the 5 elements of a quality reference: currency, authority, relevance, objectivity, and coverage. Grey literature sourced from the internet must be from reputable websites such as government, university, or peak national bodies, for example, the Australian College of Midwives or the Royal Australian and New Zealand College of Obstetricians and Gynaecologists. Websites such as Stat Pearls, Life in the Fastlane, and Wikipedia are unsuitable for this assessment task. Lecture notes are unsuitable for this assessment task.

Resources

- You can use unit-provided materials and other credible sources (e.g. journal articles, books) to reference your argument. The quality and credibility of your sources are important.
- We recommend that you access your discipline-specific library guide: the Nursing and Midwifery Guide;
- We recommend you use EndNote to manage your citations and reference list. More information on how to use EndNote is available at the CQUniversity Library website.
- For information on academic communication please go to the Academic Learning Centre Moodle site. The Academic Communication section has many helpful resources including information for students with English as a second language.
- The use of Generative Artificial Intelligence (Gen-Al) tools, including Al-driven writing assistants and content generators, is not permitted in this assessment. The Nursing and Midwifery Board of Australia [NMBA] (2018), Midwifery Standards of Practice requires students to demonstrate essential human capacities, skills, knowledge, and integration of theory into practice, crucial for midwifery practice. Midwifery practice relies on human interaction, empathy, ethical decision-making, and effective communication—skills that cannot be adequately assessed through Al-generated content. To ensure the integrity and development of these capabilities, students must verify that any grammar or writing enhancement programs used do not incorporate Al components. Compliance with midwifery practice standards is vital for meeting AHPRA/NMBA graduate attributes and preparing for professional practice.

Submission

Submit your assessment via the relevant Moodle assessment page (six separate Word documents).

Marking Criteria

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

Assessment Due Date

Week 12 Friday (4 Oct 2024) 11:55 pm AEST

Upload current version into the Midwifery Practice 2 Moodle Assessment 2 page

Return Date to Students

Exam Week Friday (18 Oct 2024)

Weighting

60%

Assessment Criteria

	HD 100-85%	D 84-75%	C 74-65%	P 64-50%	F 49-46 %	Low Fail <45 - %
	Excellent presentation of portfolio. Reflective journals are set out as per the template. Consistently accurate in spelling, grammar, and paragraph structure. 10.00 - 8.45 (10%)	Well-presented portfolio. Reflective journals set out as per template. One or two errors in spelling, grammar, and paragraph structure. 8.44 - 7.45	Well-presented portfolio. Reflective journals are set out as per the provided template. Two or three consistent errors in spelling, grammar, and paragraph structure. 7.44 - 6.45	Well-presented portfolio. Reflective journals are set out per the provided template. Three or four inconsistent errors in spelling, grammar, and paragraph structure 6.44 - 4.95	Poorly presented portfolio. The template provided is mostly not utilised. Many inaccuracies in spelling, grammar, and paragraph structure (> 5 errors). 4.94 - 4.50	Poorly presented portfolio. The provided template is not utilised. Many inaccuracies in spelling, grammar, and paragraph structure (> 6 errors). 4.49 - 0.00
	Comprehensive critical and analytical reflective journals that explore and identify gaps in knowledge. Each reflective journal provides: A description An interpretation An outcome - what was learnt. 40.00 - 33.80 (40%)	Insightful and well-developed reflective journals that explore and identify gaps in knowledge. Each reflective journal provides: A description An interpretation An outcome - what was learnt. 33.79 - 29.80	Provides logical and broadly reflective journals that explore and identify gaps in knowledge. Each reflective journal provides: A description An interpretation An outcome - what was learnt. 29.79 - 25.80	Disjointed reflective journals that explore and identify some gaps in knowledge. Each reflective journal provides some of the following: A description An interpretation An outcome - what was learnt. 25.79 - 19.80	Mostly inadequate reflective journals that do not explore or identify gaps in knowledge. The following mostly have not been included: A description An interpretation An outcome - what was learnt. 19.79 - 18.00	Inadequate reflective journals that do not explore or identify gaps in knowledge. The following have been excluded: A description An interpretation An outcome - what was learnt. 17.99 - 0.00
Approach & Argument (80%) As per template.	6 comprehensive reflective journals.[SC1] [KH2] Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. It includes: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face-to-face/ telehealth visits 20-16.81 (20%)	student's own	6 reflective journals. Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. It includes: - 4 antenatal visits - +/- the labour (Intrapartum care) - 2 postnatal visits - Face-to-face/ telehealth visits 14.8-12.81	6 disjointed reflective journals. Content is the student's own original work without prior submission. No Gen Al agents used during this assessment. It includes: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face-to-face/ telehealth visits 12.8-9.90	6 or less inadequate reflective journals. Content is not the student's own work and has been previously submitted. Gen Al agents used during this assessment. In some cases, it does not meet the expected requirements of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face-to-face/telehealth visits 9.89-9.0	6 or less inadequate reflective journals. Content is not the student's own work and has been previously submitted. Gen Al agents used during this assessment. It does not meet the expected requirements of: - 4 antenatal visits - +/- the labour (intrapartum care) - 2 postnatal visits - Face-to-face/telehealth visits 8.99-0
	Demonstrates an exceptional and insightful reflection on their therapeutic professional relationship with the woman throughout her childbearing continuum. 20-16.81 (20%)	A well-developed reflection on their therapeutic professional relationship with the woman during her childbearing continuum. 16.8-14.81	A satisfactory reflection on their therapeutic professional relationship with the woman throughout her childbearing continuum. 14.8-12.81	Basic reflection on their therapeutic professional relationship with the woman during her childbearing continuum. The reflection includes some relevant aspects of midwifery care but lacks depth and critical analysis. 12.8-9.90	Reflection on their therapeutic professional relationship with the woman is insufficient. The reflection is vague, lacks specific details or examples. 9.89-9.0	Reflection on their therapeutic professional relationship with the woman is absent. A lack of understanding of the principles of midwifery care or the significance of the therapeutic relationship. 8.99-0
	Consistently integrates up-to- date references to support and reflect all ideas, information, and quotations. (5%) 5.00 - 4.23 (5%)	Generally, integrates up-to-date references to support and reflect ideas, information, and quotations, with 1/2 exceptions. 4.22 - 3.73	Frequently integrates up-to-date references to support and reflect ideas, information, and quotations, with 3 or 4 exceptions. 3.72 - 3.23	Occasionally integrates up- to-date references to support and reflect ideas, information, and quotations, with 5 or 6 exceptions. 3.22 - 2.48	Fails to or infrequent attempts (>7 errors) to integrate up-to-date references to support and reflect ideas, information, and quotations. 2.47 - 2.26	Failure to integrate up-to- date references to support and reflect ideas, factual information, and quotations. Warrants academic misconduct referral. 2.25 - 0.00
Referencing (10%)						
(10%)	Consistently accurate with APA referencing. A minimum of 1 reference is used for each journal entry, including journal articles and relevant websites. 5.00 - 4.23 (5%)	One or two consistent APA referencing errors were identified. One or two journal entries missing a reference. Journal articles and relevant websites are included. 4.22 - 3.73	Three or four consistent APA referencing errors were identified. Three or four journal entries missing a reference. Journal articles and relevant websites are included. 3.72 - 3.23	Five or six inconsistent APA referencing errors were identified. Five or six journal entries missing a reference. Journal articles and relevant websites are included. 3.22 - 2.48	Many inaccuracies with APA referencing (>6). Many journal entries lack a minimum of 1 reference. Journal articles not sourced. Relevant websites are not included. 2.47 - 2.26	Many inaccuracies with APA referencing (>7). All journal entries lack the minimum of 1 reference. Journal articles not sourced. Relevant websites are not included. 2.25 - 0.00

This assignment is worth 50% of the total assessment marks for this subject. /100

Referencing Style

• American Psychological Association 7th Edition (APA 7th edition)

Submission

Online

Learning Outcomes Assessed

- Assess, plan, provide, and evaluate physiological care of the woman and her baby experiencing complex factors using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.
- Assess, plan, provide, and evaluate psychosocial care of the woman experiencing complex factors during the childbearing continuum using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.
- Critically reflect on clinical learning and midwifery practice related to the care of the woman and her baby experiencing complex factors during the childbearing continuum

Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Information Technology Competence
- Cross Cultural Competence
- Ethical practice
- Social Innovation

3 Clinical Placement: Hours and Competency Assessment Tool

Assessment Type

Professional Practice Placement

Task Description
MDWF12006
MIDWIFERY PRACTICE 2

Assessment 3

Type: Professional Practice Placement

Due date:

Formative AMSAT, Friday 23rd August, 2355 (AEST) - Week 6

Summative AMSAT and Record of Clinical Hours, Friday 11th October 2355 (AEST) - Exam Week (Week 13)

Weighting: Pass/Fail Length: No word count

Unit Coordinator: Kelly Haynes

Aim

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

Instructions

A minimum of 224 hours of clinical practice experience is required to complete this unit in term 2. This clinical experience will allow you to consolidate knowledge and skills acquired throughout the unit. You are required to meet the clinical requirements listed below, and these requirements need to be documented accurately within your Student Clinical Experience Record Book. Please note that successfully completing this unit is not merely completing requisite clinical hours and skills but also demonstrating midwifery novice competency based upon the NMBA requirements and professional behaviour as per relevant CQUniversity policies.

Please follow the steps below to complete your assessment task:

- 1. Complete 224 hours of clinical practice experience plus COCE hours. Complete the term 1 formative AMSAT face-to-face with your preceptor/facilitator/educator during week 6 and submit via the SONIA online platform by **Friday 23rd August 2355.**
- 2. Complete the term 1 summative AMSAT and the Record of Clinical Hours with your preceptor/facilitator/educator during exam week and submit via the SONIA platform by **Friday 11th October 2355.**
- 3. Complete your three Continuity of Care Experience (COCE) women recruited in term one and the three recruited in term two (six in total). Show evidence of you COCE by scanning and attaching your Record of Continuity of Care Experiences in your Student Clinical Experience Record Book to your Record of Hours document via SONIA by **Friday** 11th October 2355.

Submission

Submit your documents via the SONIA platform.

Marking Criteria

The midwifery educator/manager will review the required clinical experience in conjunction with the Unit Coordinator.

Learning Outcomes Assessed

Assess, plan, provide, and evaluate physiological care of the woman and her baby experiencing complex factors using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.

Assess, plan, provide, and evaluate psychosocial care of the woman experiencing complex factors during the childbearing continuum using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.

Demonstrate developing midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) Midwife Standards for Practice (2018) requirements.

Assessment Due Date

Please upload your documents to SONIA on the dates provided in the assessment instructions

Return Date to Students

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

Weighting

Pass/Fail

Assessment Criteria

This is a pass/fail assessment and therefore no marking rubric applies to this assessment.

Referencing Style

• American Psychological Association 7th Edition (APA 7th edition)

Submission

Online

Submission Instructions

Please submit your documents through SONIA.

Learning Outcomes Assessed

- Assess, plan, provide, and evaluate physiological care of the woman and her baby experiencing complex factors using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for Consultation and Referral and digital health and emerging technologies.
- Assess, plan, provide, and evaluate psychosocial care of the woman experiencing complex factors during the
 childbearing continuum using the latest Australian College of Midwives (ACM) National Midwifery Guidelines for
 Consultation and Referral and digital health and emerging technologies.
- Demonstrate developing midwifery competence based upon the Nursing and Midwifery Board Australia (NMBA) Midwife Standards for Pracrice (2018) requirements.

Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Information Technology Competence
- Cross Cultural Competence
- Ethical practice
- Social Innovation

Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the **Student Academic Integrity Policy and Procedure**. This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

Where can I get assistance?

For academic advice and guidance, the <u>Academic Learning Centre (ALC)</u> can support you in becoming confident in completing assessments with integrity and of high standard.

What can you do to act with integrity?



Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem