Sta ndards a nd Criteria for the Accreditation of Nursing and Midwifery Courses: Re-entry to the Register Standards Midwives

Preamble

The development of the Standards and Criteria for Accreditation of Courses leading to Re-entry to Register (Re-entry to the Register Courses Project) for Nurses and Midwives complements the ANMC Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia (Standards and Criteria), endorsed by the ANMC Board in 2009. The Standards and Criteria Project focused on courses leading to initial registration, enrolment, endorsement and authorisation, consistent with the parameters determined by the ANMC National Framework for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia (2007) (Framework). The Re-entry to the Register Courses Project sits alongside the Standards and Criteria under the existing Framework, in as far as it applies to the Re-entry to the Register Courses Project.

The Re-entry to the Register Courses Project sets standards for the accreditation of courses leading to re-entry to the register for nurses and midwives previously registered in Australia. It excludes internationally qualified nurses and midwives wishing to enter the register in Australia. Nor does it set pathways/admission criteria for re-entry to the register: the regulatory authority determines admission criteria to a course for re-entry to the register. The ANMC Re-entry to the Register Courses Project relates only to where the regulatory authority deems that a course for re-entry to practice is required. Similarly, the Project prescribes no maximum time limit in which the student must complete the course as this needs to be determined by the regulatory authority.

For the purposes of the Project, Re-entry to the Register Courses are those courses accredited by the regulatory authority as preparation for nurses and midwives for re-entry to the register/roll after a lapse in practice and removal from the register/roll for a period exceeding the regulatory recency of practice requirement. The courses contain both a theoretical and a clinical (professional experience) component.

There are nine standards, each underpinned by a set of criteria. Each standard has a ‘statement of intent’ drawing attention to the underlying motivation for the standard or the principles on which it depends. Each standard is expressed as a requirement for the education provider to produce evidence of the arrangements for aspects of quality assurance. The statement of intent is followed by a list of the criteria that are pertinent to demonstrating the overarching standard.

Under the list of criteria is an ‘evidence guide’, providing suggestions on how compliance with each criterion may be demonstrated. Alternate means of demonstrating compliance with criteria may be found and the education provider is free to use other means. In some cases, evidence is mandatory and this is indicated with an (M). Indications in the evidence guide of cross referencing between the standards and criteria point to the potential to cite evidence otherwise provided on related criteria rather than duplicating evidence. They also provide an aid to understanding and navigating the intersections between the standards and criteria.

The explanation of terms clarifies key terminology.
Explanation of Terms

Terms marked with an asterix (*) use definitions in the ANMC (2007 amended 2009) National Framework for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia). Where definitions of terms rely on other sources, these sources are identified.

Agreement
A shared formal agreement between the education provider and any health service providers where students gain their professional experience, based on the policies demonstrated in relation to Standard 1.

ANMC National Competency Standards for the Midwife
Establish the benchmark for midwifery registration. This document refers to the ANMC (2006) National Competency Standards for the Midwife and any subsequent versions of the document.

Assessment
The process of collecting evidence and making judgements as to whether a learning outcome has been met (adapted from ‘assessment’ Nurses Board of South Australia (nbsa) (2005) Standards for Approval of Education Providers and Courses).

Assessment types
Includes *formative assessment (intended to provide feedback for the purposes of future learning, development and improvement) and *summative assessment (that leads to an indication whether or not certain criteria have been met or whether or not certain outcomes have been achieved.)

Assessment tasks
Includes, for instance, written papers or oral presentations

Assessment contexts
Includes the professional practice context and the simulated or laboratory context.

‘Being with’
‘Being with’ a woman refers to a woman-centred approach where the midwifery student is directly and actively involved with the woman as she spontaneously gives birth to her baby vaginally and inclusive of the student attending to third stage and facilitating initial mother and baby interaction. (ACM advice to ANMC National Accreditation Standards project 2008-09)

Competence
Competence is the combination of knowledge, skills, attitudes, values and abilities that underpin effective performance in a profession. It encompasses confidence and capability (from ANMC (2007) National Decision Making Framework – Final Framework).

Consumer
The term consumer is used generically to refer to client (nursing) and to woman (midwifery). Advising consumers of their right to make informed choices in relation to their care, and obtaining their consent, are key responsibilities of all health care personnel.

Woman
The term “woman” includes the woman, her baby (born and unborn), and, as negotiated with the woman, her partner, significant others and community (adapted from ANMC (2007) National Decision Making Framework – Final Framework).

Continuing competence
The ability of midwives to demonstrate that they have maintained their competence in their current area and context of practice (from ANMC (2009) Continuing Competence Framework for Nurses and Midwives).

Continuity of Care experience (formerly ‘Follow-through experiences’)
‘Continuity of care experience’ means the ongoing midwifery relationship between the student and the woman from initial contact in early pregnancy through to the weeks immediately after the woman has given birth, across the interface between community and hospital settings. The intention of the continuity of care experience is to enable students to experience continuity with individual women through pregnancy, labour and birth and the postnatal period, where practicable irrespective of the carers chosen by the woman or of the availability of midwifery continuity of care models. (ACM advice to ANMC National Accreditation Standards project 2009)

Course (Re-entry to the register course)
A Course accredited by the NMRAs as preparation for nurses and midwives for re-entry to the register/roll after a lapse in practice and removal from the register/roll for a period exceeding the regulatory recency of practice requirement. It contains both a theoretical and a clinical component.
Cultural Safety
Cultural safety means “the effective midwifery care of women from other cultures by a midwife who has undertaken a process of reflection on her own cultural identity and recognises the impact of her culture on her practice”. Unsafe cultural practice is “any action that diminishes, demeans or disempowers the cultural identity and well-being of an individual”. Culture includes age or generation; gender; sexual orientation; occupation and socio-economic status; ethnic origin or migrant experience; religious or spiritual belief; and disability. Cultural Safety provides an instrument that allows a woman and her family to judge whether the health service and delivery of health care is safe for them. (Midwifery Council of New Zealand (2007) Competencies for Entry to the Register of Midwives)

Delivery Mode
The range of alternate means by which courses are made available to students: on-campus or in mixed-mode, by distance or by e-learning methods.

*Education Provider
An Australian university; other higher education institution; or registered training organisation (RTO) that is responsible for a course, the graduates of which are eligible to apply for re-registration as a midwife.

Health service provider
Health units or other appropriate service providers, where students undertake a period of supervised professional experience as part of a course, the completing students of which are eligible to apply for midwifery registration. (adapted from definition for ‘clinical facilities’ in the ANMC (2007 amended 2009) National Framework for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia).

International Definition of the Midwife
The midwife is a person who, having been regularly admitted to a midwifery educational programme, duly recognised in the country in which it is located, has successfully completed the prescribed course of studies in midwifery and has acquired the requisite qualifications to be registered and/or legally licensed to practise midwifery. The midwife is recognised as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labour and the postpartum period, to conduct births on the midwife’s own responsibility and to provide care for the newborn and the infant. This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the assessing of medical or other appropriate assistance and the carrying out of other emergency measures.

The midwife has an important task in health counselling and education, not only for the woman, but also within the family and community. This work should involve antenatal education and preparation for parenthood and may extend to women’s health, sexual or reproductive health and child care. (Adopted by the International Confederation of Midwives Council meeting 19th July 2005, Brisbane, Australia. See ACM 2006)

Midwifery Inquiry
Midwifery inquiry entails Page’s 5 steps of evidence-based midwifery:

1. finding out what is important to the woman and her family
2. using information from the clinical examination
3. seeking and assessing evidence to inform decisions
4. talking it through
5. reflecting on outcomes, feelings and consequences

(together with the application and contribution to the broader ongoing inquiry into midwifery practice forged by collaborative evaluation of ongoing practices and research to advance midwifery knowledge (drawing on aspects of definition of ‘Nursing Inquiry’ in Crisp, J and B McCormack ‘Critical inquiry and practice development’ in J Crisp and C Taylor eds. (2008) 3rd edition, Potter and Perry’s Fundamentals of Nursing, Sydney, Elsevier, p. 66.)

Practice
Any midwifery role which the completing student, having become a licensed or endorsed practitioner, undertakes. Practice is not restricted to the provision of direct care only. Being ‘in practice’ includes using midwifery knowledge in a direct relationship with women. It also includes working in midwifery management, administration, education, research, professional advice, regulatory or policy development roles, which impact on midwifery service delivery (adapted from definition in ANMC (2009) Continuing Competence Framework for Nurses and Midwives, itself adapted from Nursing Council of New Zealand 2004).
Explanation of Terms (continued)

Primary health care philosophy
Midwifery education should prepare graduates to work within a primary health care philosophy. Since the Declaration of Alma-Ata in 1978, primary health care principles have influenced all World Health Organisation policies. In relation to maternity services this means an approach that:

- addresses issues related to equity and access;
- encompasses determinants of health such as the influence of culture, education and income;
- develops services based on need that are affordable, sustainable and evidence-based;
- promotes community participation in all aspects of the development, implementation and evaluation of services;
- encourages the development of community-based services;
- fosters collaboration, continuity of care and integrated services;
- uses appropriate technology; and
- encourages self-reliance and the empowerment of community members.

(ACM 2006; 2007)

*Procedural fairness*
Involves the following principles:

- The decision-maker must be impartial and unbiased regarding the matter to be decided, and must have no pecuniary or [proprietary] interest in the outcome
- Those who may be adversely affected by a decision must be given prior notice of the case and a fair opportunity to prepare for and answer the case and present their own case
- The decision must be based on sound argument and evidence
- Those affected must be given the reasons for the decision.

Professional experience placement
The component of midwifery education that allows students to put theoretical knowledge into practice within the consumer care environment. (adapted from ANMC National Accreditation Standards for Registered Nurses). It must include but may not be limited to continuity of care experiences. It excludes simulation.

Quality use of Medicines (QUM)
QUM means:

- Selecting management options wisely;
- Choosing suitable medicines if a medicine is considered necessary; and
- Using medicines safely and effectively.

The definition of QUM applies equally to decisions about medicine use by individuals and decisions that affect the health of the population.

The term ‘medicine’ includes prescription, non-prescription and complementary medicines.


Registered training organisation
(or RTO) an organisation registered by a state or territory recognition authority to deliver training and/or conduct assessments and issue nationally recognised qualifications in accordance with the Australian Quality Training Framework. (from National Centre for Vocational Education Research (2008) VET Glossary.)

Regulation
All of those legitimate and appropriate means – governmental, professional, private and individual – whereby order, identity, consistency and control are brought to the profession. The profession and its members are defined; the scope of practice is determined; standards of education and of ethical and competent practice are set; and systems of accountability are established through these means. (International Council of Nurses (ICN) Regulation Terminology (2005) version 1).

Regulatory authorities / NMRAs
Nursing and midwifery regulatory authorities, including the state and territory nursing and midwifery boards or equivalent authorities (adapted from ‘NMRAs’ in ANMC (2007 amended 2009) National Framework).
**Risk assessment / risk management**

An effective risk management system is one incorporating strategies to:

- Identify risks/hazards
- Assess the likelihood of the risks occurring and the severity of the consequences if the risks do occur and
- Prevent the occurrence of the risks, or minimise their impact. (from DMF)

**Simulation**

A teaching and learning strategy to assist students to achieve direct consumer care skills, knowledge and attitudes in relation to a tool or environment (including skills learned in a laboratory setting) which reproduces aspects of the professional experience environment.

**Student**

Any person enrolled in a course leading to midwifery registration.

**Supervision / support**

Where, for instance, a teaching staff member or midwife supports and/or supervises a student undertaking a course for entry to the midwifery profession on a professional experience placement, including supervision/support provided in relation to the student’s participation in continuity of care experiences.

**Teaching staff**

Education provider employees who meet the requirements established in standard 2 (must be registered and hold a qualification higher than that for which the students they educate are studying) and who are engaged in the teaching/supervision/support/assessment of students in relation to their acquisition of the required skills, knowledge, attitudes, graduate competency outcomes.

**Therapeutic Medicines Management**

The quality use of medicines as per the National Medicines Policy on Quality Use of Medicines (QUM), see above.

**Woman-centred midwifery**

The principles of woman-centred midwifery are identified in the Australian College of Midwives Philosophy Statement: *** Midwife means ‘with woman’. This meaning shapes midwifery’s philosophy, work and relationships. Midwifery is founded on respect for women and on a strong belief in the value of women’s work of bearing and rearing each generation.

Midwifery considers women in pregnancy, during childbirth and early parenting to be undertaking healthy processes that are profound and precious events in each woman’s life. These events are also seen as inherently important to society as a whole. Midwifery is emancipatory because it protects and enhances the health and social status of women, which in turn protects and enhances the health and wellbeing of society. Midwifery is a woman-centred, political, primary health care discipline founded on the relationships between women and their midwives. Midwifery:

- focuses on a woman’s health needs, her expectations and aspirations;
- encompasses the needs of the woman’s baby, and includes the woman’s family, her other important relationships and community, as identified and negotiated by the woman herself;
- is holistic in its approach and recognises each woman’s social, emotional, physical, spiritual and cultural needs, expectations and context as defined by the woman herself;
- recognises every woman’s right to self-determination in attaining choice, control and continuity of care from one or more known caregivers;
- recognises every woman’s responsibility to make informed decisions for herself, her baby and her family with assistance, when requested, from health professionals;
- is informed by scientific evidence, by collective and individual experience and by intuition;
- aims to follow each woman across the interface between institutions and the community, through pregnancy, labour and birth and the postnatal period so all women remain connected to their social support systems; the focus is on the woman, not on the institutions or the professionals involved; and
- includes collaboration and consultation between health professionals.

(ACM 2006; 2007 and ACM 2004. *** THE ACM has drawn on the work and ideas of national and international leaders in midwifery and documents/websites from organisations, including: New Zealand College of Midwives, Nursing Council of New Zealand, Nursing and Midwifery Council, UK (formerly UKCC/ENB), Royal College of Midwives, College of Midwives of British Columbia, College of Midwives of Ontario, ACM (earlier work), Nurses Board of Victoria, Queensland Nursing Council, the World Health Organisation, Guilliland and Pairman (1995), Leap (2004).)
Domain 1: Course Management

**Standard One: Governance**
The course provider demonstrates policies, procedures, processes and practices in regard to: quality assurance and improvement; course design and management; consultation and collaboration; and ensuring resources adequate to course implementation.

**Statement of Intent**
That courses have adequate governance arrangements to produce graduates with the required graduate competency outcomes as detailed in the ANMC National Competency Standards for Midwives.

**Criteria**
The course provider is required to demonstrate or confirm:

1. Current quality assurance and accreditation in the relevant education sector in Australia:
   a. Re-entry courses must show evidence of education sector quality assurance and accreditation;
2. Course development, monitoring, review, evaluation, and quality improvement;
3. Collaborative approaches to course organisation and curriculum design between teaching staff, students, consumers, regulators and key stakeholders;
4. That students are provided with facilities and resources sufficient in quality and quantity to the attainment of the required graduate competency outcomes;
5. The manner in which shared formal agreements between the education provider and any health service providers where students gain professional experience are developed and how the requirements of the formal agreement are justified;
6. How risk assessments of and risk minimisation strategies are developed and managed for any environment where students are placed to gain professional experience;
7. That, where there is provision for credit transfer or the recognition of prior learning (RPL), it is consistent with both Australian Qualifications Framework (AQF) national principles and guidelines and any expected outcomes of regulatory authorities for practice;
8. The equivalence of course outcomes for courses taught in all delivery modes in which the course is offered (courses delivered on-campus or in mixed-mode, by distance or by e-learning methods); and
9. Monitoring of staff performance and ongoing teaching staff development, and of staff having current relevant professional registration.

**Evidence Guide**

<table>
<thead>
<tr>
<th>Criterion</th>
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<tbody>
<tr>
<td>1</td>
<td>Confirmation of successful completion education sector quality assurance and accreditation, including date of expiration of approval (M); listing on the current Australian Qualifications Framework (AQF) Register of Recognised Education Institutions and Authorised Accreditation Authorities (for universities and self-accrediting higher education institutions); state and territory registers for non self-accrediting higher education institutions or evidence of Registered Training Organisation (RTO) status (listing on NTIS site); account of any restrictions on accreditation status (M).</td>
</tr>
<tr>
<td>2</td>
<td>Current template for school course review documentation, such as evaluation, quality improvement plan, reports or descriptions of ways in which these processes have impacted/will impact on course design and delivery; Documentation of need for and viability of the course relative to the jurisdiction in which the course is to be delivered; eg. evidence of consultation with industry and support for course in region(s) where it is to be offered; scoping study.</td>
</tr>
<tr>
<td>3</td>
<td>Collaboration activities – Advisory committee membership; monitoring committee membership; Documentation of collaborative curriculum development: Terms of Reference for committees, Minutes of Meetings.</td>
</tr>
<tr>
<td>4</td>
<td>Evidence of Resources - cross ref Std 8, criterion 1</td>
</tr>
<tr>
<td>5</td>
<td>Guidelines that prescribe content of agreements; meeting minutes of negotiation of agreements.</td>
</tr>
<tr>
<td>6</td>
<td>Guidelines or policies for risk assessments and risk minimisation strategies.</td>
</tr>
<tr>
<td>7</td>
<td>Credit transfer / RPL policies, including description of how curriculum is ‘matched’ to determine RPL and reference to AQF national principles or guidelines (M); Any documentation that identifies process and outcomes for RPL. RPL may be provided on demonstration of ANMC National Competency Standards.</td>
</tr>
<tr>
<td>8</td>
<td>Description of processes to ensure equivalence of course outcomes: documentation of arrangements for online/offshore courses to satisfy requirement that professional experience component of course be delivered in Australia, cross ref Standard 8 (M).</td>
</tr>
<tr>
<td>9</td>
<td>Copies of policies/descriptions of processes for staff performance review; Policies/processes for identifying and dealing with staff non-compliance of requirements for maintaining midwifery registration (or other professional registration where applicable); description of staff professional development activities; policies regarding personal staff performance development plans.</td>
</tr>
</tbody>
</table>
Domain 1: Course Management (continued)

Standard Two: Teaching Staff
The course provider demonstrates policies, procedures, processes and practices to demonstrate that staff are qualified and prepared for their roles and responsibilities in relation to teaching, supervising and assessing students.

Statement of Intent
That staff are qualified and sufficient in number to provide students with the support and the expertise necessary to attain the ANMC National Competency Standards for the Midwife.

Criteria
The course provider is required to demonstrate or confirm:

1. That the Course coordinator or person responsible for midwifery curriculum development is a midwife academic with current registration / endorsement as a midwife and who maintains active involvement in the midwifery profession and demonstrates strong links with contemporary midwifery education and/or research;
2. That teaching staff members are midwives with a current practising certificate;
3. That in cases where an teaching staff member’s qualifications do not include midwifery their qualifications are relevant to the education of the given students (eg. in cross-disciplinary courses);
4. That teaching staff are qualified to fulfil their teaching responsibilities, including current competence in area of teaching.

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<tbody>
<tr>
<td>1</td>
<td>List of Deans, course coordinators and subject coordinators and sample copies of their curriculum vitae.; Position descriptions indicating minimum qualifications and requirement for current practising certificate;</td>
</tr>
<tr>
<td>2</td>
<td>Position descriptions indicating requirement for current practising certificate; description of processes for checking that staff maintain current practising certificate; sample copies of relevant current practising certificates</td>
</tr>
<tr>
<td>3</td>
<td>List of current teaching staff, including teaching experience, qualifications and courses taught. (M). Position descriptions indicating minimum qualifications; This list to be kept up to date over period of accreditation and available on request by Accreditation authority or Nursing and Midwifery Board of Australia.</td>
</tr>
<tr>
<td>4</td>
<td>As per criterion 3</td>
</tr>
</tbody>
</table>
**Domain 1: Course Management** (continued)

**Standard Three: Students**
The course provider demonstrates policies, procedures, processes and practices which establish: that students meet the regulatory authority’s requirements for admission to the course and that that they have equal opportunities to successfully meet the requirements for re-entry to practice as a midwife.

**Statement of Intent**
That courses are underpinned by equal opportunity principles in terms of support of students and that courses establish the eligibility of students to undertake the course and ultimately to meet the requirements for re-entry to practice as a midwife.

**Criteria**
The course provider is required to demonstrate or confirm:

1. That students meet regulatory authority’s criteria for admission to the course;
2. That students are informed of any specific requirements for right of entry to midwifery professional experience placements;
3. Provision for the range of support needs of Aboriginal and Torres Strait Islander students;
4. Provision for the range of support needs of students: from other groups underrepresented in the midwifery profession; from diverse academic, work and life experiences and achievements; of diverse social and cultural backgrounds and of diverse ages; and
5. That all students have equal opportunity to develop and/or renew all graduate competency outcomes regardless of mode of delivery of course.

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<td>1.</td>
<td>Course handbook or equivalent with details of requirements: English language requirements, demonstration of good character, immunisation compliance; and link to Regulatory Authority information and criteria for registration to practice (M).</td>
</tr>
<tr>
<td>2.</td>
<td>Course handbook or equivalent with details of requirements for police checks, vaccination etc. for professional experience placement, including processes for non-compliance (M).</td>
</tr>
<tr>
<td>3.</td>
<td>Description of student support services for Aboriginal and Torres Strait Islander students: university policy and course application (M).</td>
</tr>
<tr>
<td>4.</td>
<td>Description of student support services for students from diverse cultural and linguistic backgrounds, for mature age students etc; disability support services; university policy and course application (M).</td>
</tr>
<tr>
<td>5.</td>
<td>Course handbook or equivalent with details of mode(s) of delivery of courses, including professional experience requirements and IT requirements (M).</td>
</tr>
</tbody>
</table>
Domain 1: Course Management (continued)

**Standard Four: Course Length and Structure**
The course provider demonstrates policies, procedures, processes and practices to establish theoretical and practical learning opportunities for the achievement of the ANMC National Competency Standards for the Midwife.

**Statement of Intent**
That the course structure is sufficient to gain the ANMC National Competency Standards for the Midwife and that substantial midwifery experience is incorporated into the course to promote early engagement and to allow a final preparation for transition to professional midwifery practice.

**Criteria**
The course provider is required to demonstrate:

1. That the total length and structure of the course is sufficient to allow effective development and/or renewal of all the ANMC National Competency Standards for the Midwife;
2. That the course provides for midwifery continuity of care experiences;
3. That the theoretical content of the course prepares students for the timing of professional experience placements; and
4. That provision is made for students to exit the course early on demonstration of competence after having completed minimum requirements of theoretical content and professional experience placement.

**Evidence Guide**

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<tr>
<td>1.</td>
<td>Course handbook or equivalent with details of course length and structure (M). Copy of full course outline (M).</td>
</tr>
<tr>
<td>2.</td>
<td>As per criterion 1</td>
</tr>
<tr>
<td>3.</td>
<td>As per criterion 1</td>
</tr>
<tr>
<td>4.</td>
<td>Documentation of exit processes and standards. Final statements of students having achieved the ANMC National Competency Standards for the Midwife.</td>
</tr>
</tbody>
</table>
Domain 2: Curriculum

**Standard Five: Curriculum Content**
The course provider demonstrates policies, procedures, processes and practices to establish that the curriculum promotes a woman-centred midwifery philosophy as the foundation of practice within a framework of primary health care in order to comprehensively achieve the graduate competency outcomes.

**Statement of Intent**
That the curriculum meets the requirements of midwifery as a practice-based discipline by integrating content and philosophy developed from the International Definition of a Midwife and the ANMC National Competency Standards for the Midwife and relevant midwifery codes and standards.

**Criteria**
The course provider is required to demonstrate:

1. Mapping of the curriculum against the ANMC national competency standards for midwives to demonstrate how the graduate competency outcomes are to be achieved;
2. That selection, organisation, sequencing and delivery of learning experiences provides students with the opportunity to attain all the required graduate competency outcomes;
3. That the central focus of the course is on midwifery and contemporary midwifery practice addressing, across the length of the course, how woman-centred care and primary health care principles underpin the ANMC National Competency Standards for the Midwife across the four domains of:
   - Legal and Professional Practice;
   - Midwifery Knowledge and Practice;
   - Midwifery as Primary Health Care; and
   - Reflective and Ethical practice.
4. Evidence-based approaches to theory and practice; and
5. A variety of practice-based learning opportunities, especially in professional experience areas, which espouse a midwifery philosophy and in midwifery models of care both in the community and in hospitals.

**Evidence Guide**

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<tbody>
<tr>
<td>1.</td>
<td>Map / grid / table of competency standards against specific curriculum content/units, including where applicable cross-ref to Standard 4, criterion 5 (M).</td>
</tr>
<tr>
<td>2.</td>
<td>Rationale / philosophy for course content and organisation of units; Description of how the curriculum addresses specifically Aboriginal and Torres Strait Islander Peoples history, health and culture and incorporates the principles of cultural safety and respect; Identification of Aboriginal and Torres Strait Islander content in the course with explicit reference to ANMC position statement on ‘Inclusion of Aboriginal and Torres Strait Islander Peoples Health and Cultural Issues in Courses Leading to Registration and Enrolment’ (M). Inclusion of the role of Aboriginal female elders and issues of displacement from country in relation to Aboriginal women giving birth in acute care settings.</td>
</tr>
<tr>
<td>3.</td>
<td>Detailed description of course content relative to the requirements indicated, including reference to relevant current reports; identification of contemporary legal, professional and published information sources in support of the content (M).</td>
</tr>
<tr>
<td>4.</td>
<td>Identification of content focused on/related to evidence-based practice across the course (M); Benchmarking against selected examples of national and international best practice; examples of research and evidence-led curriculum.</td>
</tr>
<tr>
<td>5.</td>
<td>Description and examples of range of learning experiences used across the course; lesson plans indicating range of learning experiences used across the course. Cross reference where applicable to standards 6 and 8.</td>
</tr>
</tbody>
</table>
Domain 2: Curriculum (continued)

**Standard Six: Approaches to Teaching and Learning**

The course provider demonstrates policies, procedures, processes and practices to establish that the course is consistent with contemporary teaching and learning best practice.

**Statement of Intent**

That woman-centred, evidence informed, primary health care approaches to teaching and learning underpin the course and that teaching and learning approaches provide Australian and international best practice perspectives on midwifery and a commitment to the development of graduates who are safe and competent for beginning level practice.

**Criteria**

The course provider is required to demonstrate:

1. A course curriculum design and framework and expected learning outcomes;
2. Congruence between content, practical application, and teaching and learning strategies in achieving the ANMC National Competency Standards for the Midwife;
3. That teaching and learning approaches are informed by evidence of current Australian and international best practice literature; Learning opportunities with other maternity care practitioners to promote ongoing referral, consultation and learning collaborations and effective liaison with community agencies to ensure a primary health care model of maternity care provision underpins midwifery education;
4. A commitment to the development of midwifery graduates who have the capacity for autonomous learning, critical analysis and evaluation, reflective and ethical practice, and professional advocacy, responsibility and accountability; and
5. Varied and relevant learning experiences that accommodate differences in student learning styles.

**Evidence Guide**

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Examples of evidence that may be produced to demonstrate compliance with criterion. Except where indicated with an (M) signifying ‘Mandatory’, the evidence guide represents suggestions only and the provider may demonstrate the criterion with reference to other means.</th>
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<tr>
<td>1.</td>
<td>Curriculum framework with teaching and learning outcomes identified, cross ref to Standard 4 criterion 1 (M); examples of unit outlines (M).</td>
</tr>
<tr>
<td>2.</td>
<td>Description of how congruence between content, practical application, competency achievement and teaching and learning strategies is achieved; copy of course vision and/or philosophy (M). Identification and examples of evaluation strategies for teaching and learning approaches; reports/results of these; course experience questionnaires; student destination surveys.</td>
</tr>
<tr>
<td>4.</td>
<td>Lesson plans indicating interprofessional learning and teaching approaches between maternity care practitioners; examples from curriculum of opportunities for collaborative learning.</td>
</tr>
<tr>
<td>5.</td>
<td>Lesson plans indicating strategies used to promote development of graduates who have the capacity for autonomous learning, critical analysis and evaluation, reflective and ethical practice, and professional advocacy, responsibility and accountability.</td>
</tr>
<tr>
<td>6.</td>
<td>Description and examples of range of learning experiences used across the course; lesson plans indicating range of learning experiences used across the course. Lesson plans indicating interprofessional learning and teaching approaches; examples from curriculum of opportunities for learning about collaborative practices.</td>
</tr>
</tbody>
</table>
Domain 2: Curriculum (continued)

Standard Seven: Student Assessment
The course provider demonstrates policies, procedures, processes and practices to establish that the course incorporates a variety of approaches to assessment that are suited to the nature of the learning experiences and that achieve the ANMC National Competency Standards for the Midwife.

Statement of Intent
That assessment is explicitly and comprehensively linked to the attainment of ANMC National Competency Standards for the Midwife, is consistent with best practice assessment approaches and uses diverse assessment techniques.

Criteria
The course provider is required to demonstrate:

1. That graduates have achieved the ANMC National Competency Standards for the Midwife on completion of the course;
2. That the variety, complexity and number of assessments are consistent with determining the achievement of the ANMC National Competency Standards for the Midwife;
3. A variety of assessment types and tasks across the course;
4. A variety of assessment contexts to ensure demonstration of targeted skills leading to competence;
5. Final assessment in Australia on professional experience placement to demonstrate competence in the provision of midwifery care;
6. Procedural fairness, validity and transparency of assessment;
7. That the education provider remains ultimately accountable for assessment of students in relation to their professional experience assessment; and
8. That assessments reflect collaborative arrangements between students, midwives, teaching staff and health service providers.

Evidence Guide

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<td>1.</td>
<td>Final statements of students having achieved ANMC National Competency Standards for the Midwife.</td>
</tr>
<tr>
<td>2.</td>
<td>Examples of how competence is being assessed across the curriculum, aligned with mapping of competencies against content as required in standards 4 and 5.</td>
</tr>
<tr>
<td>3.</td>
<td>Description / list of range of assessment types used; lesson plans/unit outlines indicating range of assessment types used. Identification and description of formative and summative assessments undertaken in professional experience context; examples of assessments; lesson plans/unit outlines indicating assessments used in professional experience context.</td>
</tr>
<tr>
<td>4.</td>
<td>Description / list of range of assessment contexts used, including those in structured or simulated environments; lesson plans/unit outlines indicating range of assessment contexts used, including those in structured or simulated environments.</td>
</tr>
<tr>
<td>5.</td>
<td>Description of arrangements for final assessment to take place on professional experience placement in Australia.</td>
</tr>
<tr>
<td>6.</td>
<td>Validation models for assessment; description and justification for chosen assessment tools; policies for dealing with lack of progression, misadventure, grievance; identification of how this is demonstrated within education provider’s quality assurance process.</td>
</tr>
<tr>
<td>7.</td>
<td>Statement acknowledging education provider’s accountability for student assessment in the professional experience context.</td>
</tr>
<tr>
<td>8.</td>
<td>List of collaborative activities/stakeholders involved; description of processes to engage stakeholders.</td>
</tr>
</tbody>
</table>
Domain 2: Curriculum (continued)

**Standard Eight: Professional Experience**
The course provider demonstrates policies, procedures, processes and practices to establish that midwifery professional experience provides the learning conditions in which students can achieve the ANMC National Competency Standards for the Midwife.

**Statement of Intent**
That professional experience is conducted in Australia, promotes learning and that the conditions in which it is provided are risk assessed and managed. Professional experience must ensure a woman-centred approach and meet specified minimum requirements.

**Criteria**
The course provider is required to demonstrate:

1. Professional experience component of the course is delivered in Australia;
2. Formal agreements between the education provider and all health service providers where students gain their professional experience;
3. Risk assessment of and risk minimisation for all environments where students are placed to gain their professional experience;
4. Collaborative approaches to evaluation of student professional experience placements;
5. Supervision models for professional experience placement and their relationship to the achievement of learning outcomes;
6. Effective and ethical recruitment processes that enable women to participate freely in the continuity of care experiences for students, and enable students to link up readily with women who consent to participate;
7. That teaching staff engaged in supporting and/or assessing students on professional experience placements are experienced in and prepared for the role; and
8. That midwives engaged in supporting and/or assessing students on professional experience placements are prepared for and supported in the role.

The course provider is required to demonstrate the inclusion of periods of professional experience in their course to enable students to develop and/or renew the supervised following professional experience requirements, regardless of the length of course:

Note: no mandatory minimum experiences are stipulated, however providers should consider those stipulated in the ANMC (2009) Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia (Midwives) as an indicator of proportionate minimum experiences for a re-entry course. 25% of the requirements mandated in the ANMC (2009) Standards and Criteria should be used by education providers as a guide to developing specifications for a re-entry to practice course.

1. **Continuity of care experiences.** Specific requirements of continuity of care experiences include:

   a) enabling students to experience continuity with individual women through pregnancy, labour and birth and the postnatal period, irrespective of the availability of midwifery continuity of care models;
   b) contact with individual women that commences in pregnancy and continues in the early weeks following the birth;
   c) supervision by a midwife (or in particular circumstances a medical practitioner qualified in obstetrics);
   d) consistent, regular and ongoing evaluation of each student’s continuity of care experiences;
   e) engagement with women during pregnancy and at antenatal visits, labour and birth as well as postnatal visits according to individual circumstances; and
   f) provision by the student of evidence of their engagement with each woman.
Domain 2: Curriculum (continued)

Standard Eight: Professional Experience (continued)

2. Attendance at antenatal visits with women, which may include women being followed as part of continuity of care experiences;

3. Attendance at postnatal visits with women and their healthy newborn babies, which may include women being followed as part of continuity of care experiences;

4. ‘Being with’ women giving birth, which may include women being followed as part of continuity of care experiences;

5. Experience of caring for women with complex needs across pregnancy, labour and birth, and the postnatal period, which may include women the student is following through as part of their continuity of care experiences;

6. Experience in the care of babies with special needs;

7. Experience in women’s health and sexual health (required unless student has previous experience in these areas);

8. Experience in medical and surgical care for women; and

9. Experience in:
   a) antenatal screening investigations and associated counselling;
   b) referring, requesting and interpreting results of relevant laboratory tests
   c) administering and/or prescribing medicines for midwifery practice*
   d) actual or simulated midwifery emergencies, including maternal and neonatal resuscitation
   e) actual or simulated vaginal breech births
   f) actual or simulated episiotomy and perineal suturing
   g) examination of the newborn baby
   h) provision of care in the postnatal period up to 4 to 6 weeks following birth, including breastfeeding support
   i) perinatal mental health issues including recognition, response and referral.

*understanding that midwives cannot prescribe in all jurisdictions

Evidence Guide

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<tr>
<td>1.</td>
<td>Statement that professional experience component of the course is delivered in Australia (M)</td>
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<td>2.</td>
<td>Formal agreements, or a sample signed copy of a formal agreement together with a register of agreements (including date when agreements were first developed and when they are due to expire), between the education provider and any health service providers where students gain their professional experience, based on the policies demonstrated in relation to standard 1, criterion 5 (M).</td>
</tr>
<tr>
<td>3.</td>
<td>Description/guidelines for parameters of student activity when on professional experience placement, based on the policies demonstrated in relation to standard 1, criterion 6 (M).</td>
</tr>
<tr>
<td>4.</td>
<td>Post-placement evaluation of students’ experience of the professional experience environment for quality improvement purposes</td>
</tr>
<tr>
<td>5.</td>
<td>Description and justification of how students are supervised on professional experience placement with reference to how nature/degree of supervision impacts on learning outcomes.</td>
</tr>
<tr>
<td>6.</td>
<td>Policies regarding ethical recruitment of women; description of processes used to assist students to link with women who consent to participate in continuity of care experiences</td>
</tr>
<tr>
<td>7.</td>
<td>Outline of preparation programs / resources for staff; policies re minimum experience/qualifications; preparation and development models/resources for assessors.</td>
</tr>
<tr>
<td>8.</td>
<td>Outline of preparation programs / resources for midwives conducting student assessment in the professional experience context; policies re their minimum experience/qualifications.</td>
</tr>
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## Domain 2: Curriculum (continued)

### Evidence Guide - Professional Experience Requirements

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<td><strong>1.</strong></td>
<td>Description and identification of continuity of care opportunities within the course, including identification of where they meet the requirements established in a)-g), as detailed above. Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
<tr>
<td><strong>2.</strong></td>
<td>Description and identification of antenatal opportunities within the course. Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
<tr>
<td><strong>3.</strong></td>
<td>Description and identification of postnatal opportunities within the course. Cross reference to Standard 4 criterion 1 where applicable.</td>
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<tr>
<td><strong>4.</strong></td>
<td>Description and identification of opportunities within the course for students ‘Being with’ women giving birth, where: a) ‘Being with’ a woman refers to a woman-centred approach where the midwifery student is directly and actively involved with the woman as she spontaneously gives birth to her baby vaginally and inclusive of the student attending to third stage and facilitating initial mother and baby interaction; and Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
<tr>
<td><strong>5.</strong></td>
<td>Description and identification of opportunities within the course for students to experience caring for women with complex needs, as per the criterion. Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
<tr>
<td><strong>6.</strong></td>
<td>Description and identification of opportunities within the course for students to experience caring for babies with special needs. Cross reference to Standard 4 criterion 1 where applicable.</td>
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<td><strong>7.</strong></td>
<td>Description and identification of opportunities within the course for students to experience women’s health and sexual health. Cross reference to Standard 4 criterion 1 where applicable.</td>
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<tr>
<td><strong>8.</strong></td>
<td>Description and identification of opportunities within the course for students to experience medical and surgical care for women and babies. Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
<tr>
<td><strong>9.</strong></td>
<td>Description and identification of opportunities within the course for students to experience the requirements listed a)-i). Cross reference to Standard 4 criterion 1 where applicable.</td>
</tr>
</tbody>
</table>
**Domain 2: Curriculum** (continued)

**Standard Nine: Research**
The course provider demonstrates policies, procedures, processes and practices to establish that graduates are educated in midwifery inquiry and that the contribution of the teaching staff to the course is informed by research and scholarship.

**Statement of Intent**
That students are exposed to, and their learning informed by, current research and that they develop the skills themselves to undertake research, apply it to their practice and share it with the women with whom they work.

**Criteria**
The course provider is required to demonstrate that midwifery teaching staff:

1. Use current research in teaching and learning;
2. Are actively engaged in research and scholarship and with course development and delivery;
3. Introduce to midwifery students and/or assist them to renew skills in midwifery inquiry, which includes evidence-based practice; and
4. Introduce to students and/or assist them to renew an understanding of the ethics of research and applying research to practice.

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<td>Description of current research relative to course teaching and learning approaches; description of processes of course development committees</td>
</tr>
<tr>
<td><strong>2.</strong></td>
<td>List of staff research activities, including publications (cross ref std 6 criterion 3, and any involvement in curriculum development committees; teaching portfolios.</td>
</tr>
<tr>
<td><strong>3.</strong></td>
<td>Lesson plans / unit outlines identifying content focused on/related to midwifery inquiry across the course.</td>
</tr>
<tr>
<td><strong>4.</strong></td>
<td>Lesson plans / unit outlines identifying content focused on/related to the ethics and application of research across the course</td>
</tr>
</tbody>
</table>
References

Australian College of Midwives (2007). Draft National Standards for the Accreditation of Midwifery Education Programs in Australia

Australian College of Midwives (2006). Standards for the Accreditation of Bachelor of Midwifery Education Programs Leading to Initial registration as a Midwife in Australia.


Australian College of Midwives advice to ANMC National Accreditation Standards project 2008-09


ANMC (2009) Standards and Criteria for the Accreditation of Nursing and Midwifery Courses Leading to Registration, Enrolment, Endorsement and Authorisation in Australia.

ANMC (2006) National Competency Standards for the Midwife


Nursing and Midwifery Board of South Australia (nmbSA) (2005 amended August 2009) Standards for Approval of Education Providers and Courses.


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