

Faculty of Health

U: MIDWIFERY

CLINICAL PRACTICE GUIDE

For students undertaking:

Bachelor of Midwifery
2025



Overview

Placements are an essential part of a student's preparation for becoming registered as a Midwife. During a placement, students actively engage with women, their families, and the multidisciplinary team whilst developing an understanding of the healthcare culture.

Experiencing midwifery in a range of health care environments is fundamental for a student's professional development as it enables the student to gain confidence and consolidate the knowledge, skills and abilities developed during theoretical modules and simulation activities.

Placements are sourced and coordinated by the Clinical Practice Unit in collaboration with the Bachelor of Midwifery Course Director, in accordance with Faculty and NSW Ministry of Health policies and guidelines. Students are placed in a range of allocated health facilities. Placement allocations are influenced by availability and the type of clinical setting required for the placement and associated assessment.

Placements occur in blocks and/or weekly during each session and, for first and second year students, in the summer and/or winter session. Placements are in addition to clinical practice laboratories that simulate the clinical environment. Typically, placements involve morning, evening, and night shifts. During the course, students are also required to follow a minimum of 20 women throughout their pregnancy, birth and the period after birth. This requires students to be on-call to attend the woman's labour and birth.

Third-year students undertake a prolonged period of clinical experience with much of their time spent in a clinical environment. Third-year students also have the opportunity to complete an 80-hour rural or remote placement.

Students are commonly overseen by a Facilitator/ Educator/ Preceptor/ Registered Midwife / Medical Officer from the health facility whose role is to support the student in achieving their learning objectives and assessment requirements. In this document we will refer to this role as 'Educator/Facilitator'.

In order to register as a Midwife, the Australian Health Practitioner Regulation Agency (AHPRA) requires students to complete a minimum number of clinical hours and demonstrate English language skills at IELTS academic level 7 or the equivalent.

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Abbreviations

ACM	Australian College of Midwives
AHPRA	Australian Health Practitioner Regulation Agency
AIM	Assistant in Midwifery
ANMAC	Australian Nursing and Midwifery Accreditation Council
CB	City Building
CPU	Clinical Practice Unit
FoH	Faculty of Health at UTS
ID	Identification
LHD	Local Health District
MoH	Ministry of Health
NMBA	Nursing and Midwifery Board of Australia
NSW	New South Wales
MUM	Midwifery Unit Manager
PEP	Professional Experience Placement
PPM	Privately practising midwife
RM	Registered Midwife
SoNM	School of Nursing and Midwifery at UTS
SMS	Short Message Service
UTS	University of Technology Sydney

Contacts

The Course Director, Bachelor of Midwifery is the first point of contact for students:



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Building 10, Level 11, (City Campus)

The Discipline Head of Midwifery is:



Professor Jennifer Fenwick: Jennifer.Fenwick@uts.edu.au



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Student Centre



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City Campus, Building 10

Monday to Friday: 9:00am - 4.30pm

Closed on Wednesdays: 09:00 - 11:00am

Clinical Practice Unit

The Clinical Practice Unit (CPU) is a professional administrative support team within the Faculty of Health and is responsible for requesting, allocating and coordinating clinical placements. They work collaboratively with students, the NSW Ministry of Health (MoH), Local Health Districts, health facilities, Educator/Facilitators, Privately practising midwives (PPMs) and academic staff, and other education institutes and governing bodies.

The CPU is also responsible for pre-placement checks and is available to answer questions relating to this. The CPU is located on level 6 of Building 10 and is open Monday to Friday 9:00am to 4:30pm. CPU may be contacted at:



health.clinical.practice@uts.edu.au



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Privacy notice

Students who will be undertaking clinical placements

Please note as part of your enrolment in clinical placements, the Faculty collects personal information provided by students as part of their enrolment at UTS, including contact and study details.

Information collected by UTS is required to facilitate assigning you to a placement and managing the placement to ensure students fulfil the requirements of the Bachelor of Midwifery degree.

To enable UTS to place a student on a clinical placement, personal information, including student ID, name, year of birth, gender, and study discipline, will be entered into the NSW Health placement system (ClinConnect). Additional information will be entered by students directly into this system, including immunisation and police check information. This information and verification details will also be provided to UTS for its clinical system (MyPlacement).

Apart from information provided to the ClinConnect system, and the provision of information to the specific placement agency where a student is placed, UTS will not disclose personal information unless required or permitted by law. UTS will abide by mandatory reporting obligations under the [Health Practitioners Regulation National Law Act 2009 \(NSW\)](#). Information will be retained by UTS securely in line with the minimum retention requirements of the State Records Act 1998 (NSW).

Placement processes

Placement allocations

Midwifery is a practice-based discipline and clinical practice learning within the Bachelor of Midwifery curriculum is structured to support a staged approach to achieving the clinical competency required of a registered Midwife.

The CPU requests placements in private and public midwifery health facilities in accordance with, and based on, the requirements of the Nursing and Midwifery Board of Australia Standards for Midwifery Practice, the course aims and objectives and the UTS BMid Work Integrated Learning Calendar.

Wherever possible students are placed within a 90 minute travel time of their residential address. However, this is subject to availability of placements and not guaranteed and students need to be flexible. Students using public transport will need to plan ahead regarding travel time. Any travel and parking costs will need to be met by the student.

Students with special needs will need to ensure they have applied through the appropriate channels within the first week of semester for this to be taken into consideration.

If a student identifies they are not able to attend a placement less than 4 weeks prior to the commencement a special consideration application must be completed, refer to page 10.

Requirements for return to clinical practice subjects after extended leave

Students returning from an absence of greater than two consecutive semesters are required to successfully complete a Clinical Re-Connect Program and an Observed Structured Clinical Examination (OSCE) (relevant to their stage in the degree). This must be achieved prior to being offered a clinical placement.

It is the responsibility of students who anticipate returning from an absence to contact the Course Director the year before they are due to re-start. Arrangements will then be made for completion of the Clinical Re-Connect Program and OSCE. There is no guarantee that students will be reallocated to their original clinical placement.

Important guidelines, policies and procedures

Bulk compliance and verification

The NSW Ministry of Health (MoH) requires students attending clinical placements to comply with several policies. These include, but are not limited to, complying with criminal clearances and the screening and vaccination against infectious diseases – evidence for the screening and vaccination against infectious diseases is recorded on a 'NSW Health Vaccination Record Card for Health Care Workers/ Students' which is available [here](#). Meeting these requirements may result in costs to the student. Full vaccination status is not negotiable except for students with proof of medical exemption.

Please note your:

- Influenza vaccinations are required annually and are available from March 1st each year for the current year vaccination strain. Students are required to obtain an Influenza vaccination each year by 4th May 2025 to attend clinical placement.
- Police check lasts for 5 years, and must be issued after 2021 to be accepted to attend clinical placement. At the end of 2nd year, please review the currency of your police check. If your course is prolonged you will need to re-apply to ensure you have a current check.
- Blood Borne Virus (BBV) Student Declaration form lasts for 3 years, and must be recompleted to attend clinical placement. Once rescreened, please complete the form to include the date of the most recent test, sign and resend the form. Please note, a copy of the screening results for BBV is not required.
- dTpa vaccinations lasts for 10 years, and must be revaccinated to attend clinical placement.

Complying with these policies is now managed through the ClinConnect system and all students must be verified through this system to be attached to a placement. To achieve clinical compliance and verification, students are required to attend a mandatory compliance workshop with CPU and compliance day with NSW Health. These documents will then be checked by suitably qualified NSW MoH employees. If there are any documents or checks outstanding after your NSW Health Compliance Day session, you will be notified and will need to follow up to submit these via process attached [here](#).

Failure to arrange compliance will prevent the CPU from arranging your clinical placement and will result in an unsatisfactory result for the associated clinical subject. This is not negotiable and students who fail clinical subjects will be expected to repeat the entire subject.

Students attending Private facilities will need to supply their documents to their designated facility.

Act immediately to ensure you have your documents completed in time. By your first week of classes you should have;

- Received your first Hepatitis B vaccination (if not already immune)
- Applied for your criminal record check through the [NSW Police](#) or [VERITAS](#) (Applications are commenced online. Be aware of other sites offering NSW CRCs, only apply through the links provided above)
- Applied for Criminal Record Checks for all countries you have previously been a resident of since turning 18 years of age (refer to the checklist on page 24 for further details)
- Identified if you are required to complete a Tuberculosis screen by completing the [Tuberculosis Assessment Tool](#) and referring to the [TB Assessment Decision Support Tool](#). If so have your appointment booked (there can be lengthy waiting periods).

[UTS Health services](#) is a good resource to assist you.

Inherent requirements for Midwifery

The Faculty of Health at the University of Technology Sydney strongly supports the rights of all people who wish to pursue a course in midwifery to achieve their potential and career objectives. The Faculty is committed to making reasonable adjustments to teaching and learning, assessment, practice experiences and other activities to address the impact of students' disabilities so that they are able to participate in their course.

Every occupation, including midwifery, has certain characteristics that are integral to the profession. Caring for women and their families during pregnancy, labour and birth can be emotionally challenging as well as physically strenuous. Many of the activities associated with the professional practice of midwifery are time sensitive.

The capacity for students and registered midwives to perform certain activities within specified time limits is required, to reduce or avoid risks to the safety and wellbeing of women and/or their newborns. The safety and wellbeing of students and others is always of paramount importance. Students are required to undertake placement activities in culturally diverse environments which reflect the Australian health care context. Successfully completing the course enables you to apply

for registration as a registered midwife with the Nursing and Midwifery Board of Australia (NMBA), which is a partner board of the Australian Health Practitioners Registration Authority (AHPRA).

To support potential and current students' decision making, a series of inherent requirement statements have been developed. These statements specify the course requirements of the Bachelor of Midwifery for student admission and progression. The statements are summarised below. Further details are available upon request from the Bachelor of Midwifery Course Director.

It is an inherent requirement of the Bachelor of Midwifery degree to complete a number of unpaid clinical placements in designated health facilities per session. All students are required to complete 100% of the clinical hours per placement to remain eligible to pass the related subject and their overall program. This is not negotiable and students who fail clinical subjects will be expected to repeat the entire subject.

If a student is concerned about their ability to complete a clinical placement, they should read the information provided below in relation to the inherent requirements for midwifery. Inherent requirements are the essential components of a course that demonstrate the capabilities, knowledge and skills to achieve the core learning outcomes. To attend a clinical placement it is a requirement that the Student Placement Declaration form has been signed and submitted. This must be done at the commencement of each session when undertaking a Midwifery Practice subject.

If you are intending to enrol in the undergraduate midwifery course at UTS, you should look at these Inherent requirement statements and think about whether you may experience challenges in meeting these requirements. If you think you may experience challenges related to your disability, chronic health condition or any other reason, you should discuss your concerns with the School of Nursing and Midwifery Academic Liaison Officer, health.alo@uts.edu.au or the Bachelor of Midwifery Course Director, Heike.Roth@uts.edu.au. These staff can work collaboratively with you to determine reasonable adjustments to assist you to meet the Inherent Requirements. In the case where it is determined that Inherent Requirements cannot be met with reasonable adjustments, the University staff can provide guidance regarding other study options.

The inherent requirements outlined below provide a guide for students and staff when deciding whether a student is able to meet these requirements. The type of reasonable adjustments that could be put in place to allow students to complete the course without compromising the academic integrity of the course are described.

If a student is unsure about any of this information, they should contact the **School of Nursing and Midwifery Academic Liaison Officer** so that any queries can be addressed.

Bachelor of Midwifery inherent requirements - ethical behaviour

Inherent requirements statements

1. Midwifery is a profession governed by competency standards, codes of ethics, professional conduct and professional boundaries where midwives are both accountable and responsible for ensuring professional behaviour in all contexts.
2. Student demonstrates knowledge of, and engages in, ethical behaviour in practice.
3. Justification of inherent requirement:

Compliance with the codes, guidelines and policies facilitates safe, competent interactions and relationships for students and/or the people they engage with. This ensures the physical, psychological, emotional and spiritual wellbeing of the individual is not placed at risk.
4. Adjustments must not compromise codes of conduct or result in unethical behaviour.
5. Exemplars:
 - Complying with academic and non-academic misconduct policies
 - Demonstrating appropriate behaviour with confidential information in classroom and practice settings
 - Demonstrating appropriate behaviour when working with women from diverse backgrounds

Bachelor of Midwifery inherent requirements - behavioural stability

Inherent requirements statements

1. Behavioural stability is required to function and adapt effectively and sensitively in a demanding role.
2. Student demonstrates behavioural stability to work constructively in a diverse and changing academic and practice environment.
3. Justification of inherent requirement:

Behavioural stability is required to work individually and in teams in changing and unpredictable environments. Midwifery students will be exposed to a woman's private and emotionally charged pregnancy, labour and birth and post birth period which may include complex and emergency situations. Midwifery students will be required to have behavioural stability to manage these events objectively and professionally.
4. Adjustments must support stable, effective and professional behaviour in both academic and practice settings.
5. Exemplars:

- Being receptive and responding appropriately to constructive feedback
- Coping effectively with own emotions and behaviour when working with women and their families during their maternity experience

Bachelor of Midwifery inherent requirements - legal

Inherent requirements statements

1. Midwifery practice is mandated by specific legislation to enable the safe delivery of care.
2. Student demonstrates knowledge and compliance with Australian Law, professional regulations and scope of practice.
3. Justification of inherent requirement:
 Knowledge, understanding, and compliance with legislative and regulatory requirements are necessary pre-requisites to practice placements in order to reduce the risk of harm to self and others
 Compliance with these professional regulations and the Australian Law ensures that students are both responsible and accountable for their practice
4. Adjustments must be consistent with legislative and regulatory requirements.
5. Exemplars:
 - Complying with relevant child protection and safety legislation
 - Complying with relevant drugs and poisons legislation

Communication

This course requires students to possess effective, verbal, non-verbal and written communication skills.

Bachelor of Midwifery inherent requirements - verbal communication

Inherent requirements statements

1. Effective and efficient verbal communication, in English, is an essential requirement to provide safe delivery of care.
2. Student demonstrates:
 - The ability to understand and respond to verbal communication accurately, appropriately and in a timely manner
 - The ability to provide clear instructions in the context of the situation
 - Timely clear feedback and reporting
3. Justification of inherent requirement:
 Communication may be restricted to verbal because of physical limitations of the individual (e.g. injury, disease or congenital conditions)
 Speed and interactivity of communication may be critical for individual safety or treatment

Timely, accurate and effective delivery of instructions is critical to individual safety, treatment and management

4. Adjustments for impaired verbal communication must address effectiveness, timeliness, clarity and accuracy issues to ensure safety.

5. Exemplars:

- Participating in tutorial, simulation and clinical discussions
- Responding appropriately to a care request in the practice environment

Bachelor of Midwifery inherent requirements - non-verbal communication

Inherent requirements statements

1. Effective non-verbal communication is fundamental to midwifery and needs to be respectful, clear, attentive, empathetic, honest and non-judgmental.

2. Student demonstrates:

The capacity to recognise, interpret and respond appropriately to behavioural cues
Consistent and appropriate awareness of own behaviours
Sensitivity to individual differences

3. Justification of inherent requirement:

- The ability to observe and understand non-verbal cues assists with building rapport with people and gaining their trust and respect in academic and professional relationships
- Displaying consistent and appropriate facial expressions, eye contact, being mindful of space, time, boundaries and body movements and gestures promotes trust in academic and professional relationships
- Being sensitive to individual differences, displays respect and empathy to others and develops trusting relationships
- The ability to observe and understand non-verbal cues is essential for safe and effective observation of a woman's and/or newborn's symptoms and reactions to facilitate the assessment and treatment of women and/or their newborn

4. Adjustments must enable the recognition of, initiation of, and/or appropriate response to effective non-verbal communication in a timely and appropriate manner.

5. Exemplars:

- Recognising and responding appropriately in classroom situations
- Recognising and responding appropriately to cues in the practice environment

Bachelor of Midwifery inherent requirements - written communication

Inherent requirements statements

1. Effective written communication is a fundamental midwifery responsibility with professional and legal ramifications.
2. Student demonstrates capacity to construct coherent written communication that is appropriate to the circumstances.
3. Justification of inherent requirement:

Construction of written text based assessment tasks to reflect the required academic standards are necessary to convey knowledge and understanding of relevant subject matter for professional practice

Accurate written communication, including record-keeping and women's and newborns' notes, is vital to provide consistent and safe midwifery care

4. Adjustments must meet necessary standards of clarity, accuracy and accessibility to ensure effective recording and transmission of information in both academic and practical settings.
5. Exemplars:
 - Constructing an essay to academic standards
 - Documenting midwifery notes in a woman's maternity record in a timely manner that meets professional standards

Cognition

This course requires knowledge of theory and the skills of cognition, literacy and numeracy.

Bachelor of Midwifery inherent requirements - knowledge and cognitive skills

Inherent requirements statements

1. Consistent and effective knowledge and cognitive skills must be demonstrated to provide safe and competent midwifery care.
2. Student demonstrates:
 - Capacity to locate appropriate and relevant information
 - Ability to process information relevant to practice
 - Integrate and implement knowledge in practice
3. Justification of inherent requirement:

Safe and effective delivery of midwifery care is based on comprehensive knowledge that must be sourced, understood and applied appropriately

4 Adjustments must ensure that a clear demonstration of knowledge and cognitive skills is not compromised or impeded

5 Exemplars:

- Ability to conceptualise and use appropriate knowledge in response to academic assessment items
- Applying knowledge of policy and procedures in the practice setting

Bachelor of Midwifery inherent requirements - literacy (language)

Inherent requirements statements

1. Competent literacy skills are essential to provide safe and effective delivery of care.

2. Student demonstrates:

The ability to accurately acquire information and convey appropriate, effective messages

The ability to read and comprehend a range of literature and information

The capacity to understand and implement academic conventions to construct written text in a scholarly manner

3. Justification of inherent requirement:

The ability to acquire information and to accurately convey messages is fundamental to ensure safe and effective assessment, treatment and delivery of care

The ability to read, decode, interpret and comprehend multiple sources of information is fundamental for safe and effective delivery of midwifery care

4. Adjustments to address literacy issues must demonstrate a capacity to effectively acquire, comprehend, apply and communicate accurate information.

5. Exemplars:

- Demonstrating the ability to convey a spoken message accurately
- Paraphrasing, summarising and referencing in accordance with appropriate academic conventions in written assignments
- Producing accurate, concise and clear midwifery documentation which meets legal requirements

Bachelor of Midwifery inherent requirements - numeracy

Inherent requirements statements

1. Competent and accurate numeracy skills are essential for safe and effective care.

2. Student interprets and correctly applies data, measurements and numerical criteria.

3. Justification of inherent requirement:

Competent application of numeracy skills is essential in midwifery to facilitate the safe and effective delivery of midwifery care

4 Adjustments must demonstrate a capacity to interpret and apply concepts and processes appropriately in a timely, accurate and effective manner

5 Exemplars:

- Performing accurate drug calculations
- Demonstrating accurate recording on a fluid balance chart

Sensory ability

This course requires adequate visual, auditory and tactile abilities.

Bachelor of Midwifery inherent requirements - visual sensory ability

Inherent requirements statements

1. Adequate visual acuity is required to provide safe and effective midwifery care.
2. Student demonstrates sufficient visual acuity to perform the required range of skills.
3. Justification of inherent requirement:

Sufficient visual acuity is necessary to demonstrate the required range of skills, tasks and assessments to maintain consistent, accurate and safe care to self and others

Visual observations, examination and assessment are fundamental to safe and effective midwifery practice

4. Adjustments must address the need to perform the full range of tasks involved in the practice setting. Any strategies to address the effects of the vision impairment must be effective, consistent and not compromise safety or treatment.

5. Exemplars:

- Accurately drawing up medication to administer
- Observing and detecting subtle changes in a newborn's colour

Bachelor of Midwifery inherent requirements - auditory sensory ability

Inherent requirements statements

1. Adequate auditory ability is required to provide safe and effective midwifery care.
2. Student demonstrates sufficient aural function to undertake the required range of skills.
3. Justification of inherent requirement:

Sufficient auditory ability is necessary to monitor, assess and manage a woman and newborn's health needs consistently and accurately

Auditory assessments and observations are fundamental to safe and effective midwifery practice

4. Adjustments must address the need to perform the full range of tasks involved in clinical practice. Any strategies to address the effects of the hearing impairment must be effective, consistent and not compromise treatment or safety.
5. Exemplars:
 - Accurately undertaking a blood pressure measurement by auscultation
 - Detecting the non verbal sounds made by a woman in labour which may indicate birthing is in progress

Bachelor of Midwifery inherent requirements - tactile sensory ability

Inherent requirements statements

1. Sufficient tactile ability is required to perform competent and safe midwifery care.
2. Student demonstrates sufficient tactile function to undertake the required range of skills and assessments.
3. Justification of inherent requirement:
 - Sufficient tactile ability is necessary to monitor, assess and detect a woman's physical and pregnancy related characteristics and act on any deviation detected to provide thorough midwifery care
 - Tactile assessments and observations are fundamental to safe and effective practice
4. Adjustments must have the capacity to make effective assessments of physical characteristics and abnormalities within safe time frames.
5. Exemplars:
 - Detecting any changes in circulation observations (e.g. temperature and pulse palpation)
 - Conducting an abdominal palpation during labour and detecting deviations from normal (e.g. breech presentation)

Strength & mobility

This course requires strength and mobility involving fine and gross motor skills.

Bachelor of Midwifery inherent requirements - gross motor skills

Inherent requirements statements

1. Midwifery involves physical demands and requires gross motor function.
2. Student demonstrates the ability to perform gross motor skills to function within scope of practice.
3. Justification of inherent requirement:

Sufficient gross motor skills are necessary to perform, coordinate and prioritise care. Tasks that involve gross motor skills include lifting, carrying, pushing, pulling, standing, twisting and bending. Students must be able to demonstrate and perform these tasks consistently and safely to reduce the risk of harm to self and others

4. Adjustments should facilitate functional effectiveness, safety of self and others and a capacity to provide appropriate care.
5. Exemplars:
 - Maintaining balance while safely mobilising and transferring women, or newborns or resources
 - Able to safely retrieve and utilise stock and equipment

Bachelor of Midwifery inherent requirements - fine motor skills

Inherent requirements statements

1. Midwifery is a profession that requires manual dexterity and fine motor skills.
2. Student demonstrates the ability to use fine motor skills to provide safe and effective care.
3. Justification of inherent requirement:

Sufficient fine motor skills are necessary to perform, coordinate and prioritise care. Tasks that involve fine motor skills include being able to grasp, press, push, turn, squeeze and manipulate various objects and individuals. Midwifery students must be able to demonstrate and perform these tasks consistently and safely to reduce the risk of harm to self and others

4. Adjustments should facilitate functional effectiveness, safety to self and others and a capacity to provide appropriate care.
5. Exemplars:
 - Performing the insertion of a urinary catheter
 - Able to prime, accurately insert and set prescribed rate on an infusion device

Bachelor of Midwifery inherent requirements - sustainable performance

Inherent requirements statements¹

1. Midwifery practice requires both physical and mental performance at a consistent and sustained level to meet individual needs over time.
2. Student demonstrates:
 - Consistent and sustained level of physical energy to complete a specific task in a timely manner and over time
 - The ability to perform repetitive activities with a level of concentration that ensures a capacity to focus on the activity until it is completed appropriately
 - The capacity to maintain consistency and quality of performance throughout the designated period of duty
3. Justification of inherent requirement:

Sufficient physical and mental endurance is an essential requirement needed to perform multiple tasks in an assigned period to provide safe and effective care
4. Adjustments must ensure that performance is consistent and sustained over a given period.
5. Exemplars:
 - Participating in tutorials, lectures and skills throughout the day
 - Participating in clinical placements day or night for up to 12 hours
 - Providing consistent care over a negotiated period of time

Inherent requirements: key terms

Inherent Requirements

Inherent requirements are the essential components of a course or unit that demonstrate the capabilities, knowledge and skills to achieve the core learning outcomes of the course or unit, while preserving the academic integrity of the university's learning, assessment and accreditation processes. These must be met by all students – they are the abilities, knowledge and skills needed to complete the course.

¹Developed from: Johnson, A., Allan, T., Phillips, K., Azzopardi, T., Dickson, C., Goldsmith, M & Hengstberger-Sims, C. (2011). *Inherent Requirements of Nursing Education (IRONE)*, UWS School of Nursing & Midwifery and Student Equity & Disability Services © University of Western Sydney, 2013 - Used with permission.

Reasonable Adjustments

The Disability Discrimination Act [DDA] 1992, as amended in 2009 (Australian Government Comlaw, 2010) through the Disability Standards for Education [DSE] (Australian Government Comlaw 2005), requires institutions to take reasonable steps that enable the student with a disability to participate in education on the same basis as a student without a disability.

An adjustment is a measure or action taken to assist a student with a disability to participate in education and training on the same basis as other students. Examples of adjustments include: provision of a note taker or provision of adaptive equipment / furniture or assistive technology.

An adjustment is reasonable if it balances the interests of all parties affected.

Making changes to ensure equal opportunity for people with a disability is commonly referred to as a "reasonable adjustment."

Adaptive Equipment

Equipment / furniture / devices designed to facilitate independence for people with disabilities and medical conditions.

Adaptive equipment includes: ergonomic furniture such as height adjustable desks and chairs; mobility equipment and may include industry specific equipment.

Assistive Technology

Software or hardware devices by which people with disabilities can access technology

Assistive technology can include devices such as alternative keyboard/mouse, voice recognition software, monitor magnification software, multiple switch joysticks, and text-to-speech communication aids.

Placements: extenuating circumstances

Students who meet any of the following criteria **must** make contact with the Academic Liaison Officer (ALO) **before** submitting a Special Provision Request Form. The CPU will validate these requests and will decline those which are not supported. Students who have previously registered with the ALO and/or Accessibility at UTS **do not need to register again**; however, they do need to submit a Special Provision Request Form at the commencement of each semester.

Carer Commitment – where a student is the *primary carer* of an immediate family member, such requests **must** be supported by the Faculty's Academic Liaison Officer (see above for details).

Special Needs – where, for example, a student has a disability and/ or an existing or ongoing illness; such requests **must** be supported by [Accessibility at UTS](#).

Religious/ Cultural commitments – where a student has restrictions to clinical hours due to religious/ cultural commitments.

Conflict of Interest – where a student believes there is a significant conflict of interest should they be placed in a specific Health Facility/ ward/ unit – if unsure if this applies to you, contact the CPU for advice.

Elite athletes or performers – where a student is limited by their training/ competition commitments.

Significant Family Commitment – where a student wishes to attend a significant family commitment such as a wedding/ funeral.

Vaccination – where a student has been fully vaccinated yet is showing evidence of an inadequate immunity.

Other Extenuating Circumstances – there may be other extenuating circumstances which are not identified above; please contact the Bachelor of Midwifery Course Director for advice.

Students who are –

- Returning from an approved Leave of Absence
- Under academic caution

must seek advice from the Bachelor of Midwifery Course Director prior to the commencement of the academic year/ session.

Absenteeism/ missed clinical placements

A clinical placement is similar to any other assessment component of a subject. If a student misses more than 16 hours in a placement they must apply for special consideration via the UTS official Special Consideration Process.

In addition, students must communicate with their Educator/Facilitator at the time of the absence. A student is not to leave a facility without informing their Educator/Facilitator or the Midwifery Unit Manager. Students who do not notify their Educator/Facilitator will be noted as absent without reason and may not complete their allocated hours and fail the subject.

All missed hours on clinical placement must be justified and made up in order to obtain your degree. You need to liaise with your Educator/Facilitator to organise make-up shifts.

Applications for special consideration are due no later than 2 days after the first missed shift.

The Online [Special Consideration](#) Application process is a tool of 'My Student Admin'; therefore, students who experience difficulties in applying for special consideration should contact the Student Centre on **1300 ASK UTS (1300 275 887)** (from within Australia).

For a student to miss a clinical shift there must be extenuating circumstances. In most cases, a Professional Authority Form (PAF) must be attached (this is located within the special consideration site) with your Special Consideration application.

Pre-clinical placement checklist

Please see this [checklist](#) for all clinical compliance necessities. It is important that:

- All students must present the evidence required, as outlined in this document
- Satisfying the requirements of the NSW MoH is mandatory and failure to comply will result in a delay in your placement. You will not be assigned a placement until you are compliant or measures have been put in place to ensure compliance prior to the placement commencement.
- Subject Coordinators will be notified of students who do not meet their pre-placement requirements; formal warnings may apply.
- All forms of evidence must be original versions.
- Lost/ stolen/ illegible forms of evidence must be replaced prior to a scheduled placement.

First day on placement

Your clinical Midwifery Educator/Facilitator will email you prior to the clinical placement and organise your roster for the semester. On the first day of placement, students are to present at the specified time and meeting place as instructed by email from the health facility.

Typically, students will be met by their hospital Educator/Facilitator and/or a member of staff from the health facility.



The briefing and orientation to the facility activities *may* include:

- Introduction to the Midwifery Educator/Facilitator including how and when students should contact them
- Clarification of the expectations of the students during the placement
- Identification checks: all students must clearly display their UTS-issued name badge at all times throughout the placement
- Completion of any required pre-placement checks including sighting of criminal clearance documents, vaccination documents, uniform, student ID etc (non NSW MoH facilities)

- Confirmation of shift times, meal breaks, rosters and days of attendance as applicable
- Plan for any debriefing session, expectations of the debrief sessions and times for these sessions
- Discussion and clarification of the clinical learning objectives
- An orientation checklist may be completed
- A tour of the hospital or facility may be included as appropriate

Attendance

The Nursing and Midwifery Board of Australia requires students to undertake a specified number of midwifery practice hours. 100% attendance on midwifery practice is required. Should a student miss some component of midwifery practice, they will be required to make up the hours at the discretion of the hospital Educator/Facilitator and Course Director, in accordance with the provisions below.

Only cases of documented illness or misadventure will be accepted as a reason for not undertaking all midwifery practice hours at the specified time. In the event of illness or misadventure, students must notify their Educator/Facilitator and the relevant Health Facility. If students are unable to contact their Educator/Facilitator, they should contact the BMid Course Director.

When assessing whether students are required to undertake additional hours to complete their midwifery practice, the School of Nursing and Midwifery (SoNM) examines a student's midwifery practice history, taking into account past attendance as well as the Nursing and Midwifery Board of Australia requirements. Therefore, students must ensure they maintain a complete attendance record.

As indicated above, students may not be given the opportunity to complete missed midwifery practice hours, and may fail the subject if they have a pattern of absences. If students miss one or more days of their clinical experience and are offered the opportunity to make up the time they will receive a Q grade until the time has been made up. For Bachelor of Midwifery students there is no defined make-up period, instead, students need to negotiate with their hospital Educator/Facilitator and Clinical Subject Coordinator, in order to arrange make-up times.

Students are expected to complete their clinical hours in the time that is rostered for them. It is not acceptable for students to be late for their shift, to leave early, to leave without notifying their midwifery Educator/Facilitator, or to change a shift without first negotiating this with their midwifery Educator/Facilitator. If a student fails to comply with these requirements they will receive an unsatisfactory assessment for their practice and a fail grade in the associated clinical practice subject.

The 2024 Work Integrated Learning Calendar that appears on the next page provides students with the dates they will be required to attend clinical placement. This can be used to guide students as to when they **must** be available. Clinical placement differs across the first, second and third years of the program but is usually in a 'block' allocation so students must be available across the entire week for up to several weeks at a time.

Those students with time commitments outside university will need to plan around clinical placement dates to make sure they are available. As these are posted well in advance no allowance is made for an inability to attend allocated clinical placements.

As much as possible, clinical placements will be linked to students' residential address. Students using public transport will need to plan ahead regarding travel time. Any travel and parking costs will need to be met by the student.

Students need to be prepared to take part in morning, afternoon and night shifts with their attendant start times. Students are also expected to be on-call for Continuity of Care births overnight. Midwifery involves shift work and on-call work during unsocial hours and the clinical placement experiences allow students to be part of the entire spectrum of midwifery activity.

UTS BACHELOR OF MIDWIFERY WORK INTEGRATED LEARNING CALENDAR 2025

	Week	Date	Public Holidays	Year 1	Year 2	Year 3
Autumn Teaching Session 1 February - June	1	17-Feb		Welcome week	T + Welcome back C ¹	T + Welcome back
	2	24-Feb		T	T + C ¹	T
	3	3-Mar		T	T + C ¹	C
	4	10-Mar		T + C ¹	T + C ¹	C
	5	17-Mar		T + C ¹	T + C ¹	C
	6	24-Mar		T + C ¹	T + C ¹	C
	7	31-Mar	?Eid	T + C ¹	T (OSCE 2 Apr)	C
	8	7-Apr		T + C ¹	C	T + Welcome back Reflect on Clinical
	STU Vac	14-Apr	18-Apr			
	9	21-Apr	21/04/2025 25/04/2025	T (OSCE 22Apr)	C	C
	10	28-Apr		C	C	C
	11	5-May		C	C	C
12	12-May		T+ Welcome back Reflect on First Session	T + Welcome back Reflect on Clinical	T + Welcome back Reflect on Clinical	
Stu Vac	19-May				C	
Exams	26-May		Exams	Exams	Exams (26 May - Viva)	
Exams	2-Jun		C (alternate)	Exams (5 June - PMH)	Exams (2 June - Mock Interviews)	
Exams	9-Jun	9-Jun		C ₁ (Rural or PPM placement option available)	C ₁ (Rural, international or PPM placement option available)	
	16-Jun					
	23-Jun					
	30-Jun					
	7-Jul					
	14-Jul					
	21-Jul					
1	28-Jul		T + Welcome back	T + Welcome back	T + Welcome Back	
2	4-Aug		T + C ¹	T + C ¹	C	
3	11-Aug		T + C ¹	T + C ¹	C	
4	18-Aug		T + C ¹	T + C ¹	C	
5	25-Aug		T + C ¹	C	C	
6	1-Sep		T + C ¹	C	T	
7	8-Sep		T + C ¹	C	C	
8	15-Sep		T (OSCE 16 Sep)	C	T	
Stu Vac	22-Sep					
9	29-Sep		C	T + Welcome Back Reflect on Clinical C ¹	C	
10	6-Oct	6-Oct		T + C ¹	C	
11	13-Oct			T (OSCE 15 Oct)	C	
12	20-Oct		T + Welcome back Reflect on Clinical	T + C ¹	T + Welcome back Transition to Practice	
StuVac	27-Oct					
Exams	3-Nov		Exams	Exams	Portfolio and CoMCE submission	
Exams	10-Nov		C (alternate) *Summer Placement (64 Hrs) (Rural or PPM placement options available)	*Summer placement (80 hrs) C ₁ (Rural or PPM placement options available)		
Exams	17-Nov					
	24-Nov					
	1-Dec					
	8-Dec					
	15-Dec					
	22-Dec					
	29-Dec					

Spring Teaching Session 2
August – November

Legend: T = teaching, C = block clinical (no uni classes), C¹ = flexible for rostering of students outside uni timetable (e.g. make up hours, staggered rostering) OSCE = Objective Structured Clinical Examination

Included in the hours prescribed below, students will engage in a minimum of 20 midwifery continuity of care experiences (CoMCE) across the degree (200 hrs).

Midwifery practice hours

YEAR	CLINICAL SUBJECT	HOURS	PLACEMENT OPTIONS
1 st year	Midwifery Practice 1: Preparation for practice	48	Antenatal ward, Antenatal clinic, Postnatal, Birthing, Continuity of Midwifery Care Model, CoMCE
1 st year	Midwifery Practice 2: Supporting women	128	Antenatal ward, Antenatal clinic, Postnatal, Birthing, Continuity of Midwifery Care Model, CoMCE
2 nd year	Midwifery Practice 3: Complex Pregnancy	96	Antenatal ward, FMU, Day stay assessment, Birthing, all risk Continuity of Midwifery Care Model, CoCME
2 nd year	Care of the newborn	32	Special Care Nursery
2 nd year	Mid Practice 4: Complex Labour, Birth and the Puerperium	160	Birth, Postnatal, HDU, Surgical, OT, Recovery.
3 rd year	Midwifery Practice 5: Preparing for professional practice	232	Continuity of Midwifery Care Model preferred, Birthing, Community, CoMCE, optional rural/international/PPM placement
3 rd year	Mid Practice 6: Transitioning to Practice	232	Continuity of Midwifery Care Model preferred, Birthing, Community, CoMCE
SUMMER CLINICAL PLACEMENTS			
YEAR	CLINICAL SUBJECT	HOURS	PLACEMENT
1 st year	Midwifery Practice 2: Supporting Women	64	Antenatal ward, Antenatal clinic, Birthing, Postnatal, Continuity of Midwifery Care Model, CoMCE
2 nd year	Mid Practice 4: Complex Labour, Birth and the Puerperium	80	Antenatal ward, Antenatal clinic, Birthing, Postnatal, , CoMCE, optional rural/PPM

Unsafe and/ or unsatisfactory clinical performance

A student's performance is deemed unsafe if it places women, their families, staff members or fellow students at risk, and if she or he is unable or unwilling to perceive that risk. The judgment that a student's performance is unsafe is usually made on the basis of more than one incident; however, it can be made on the basis of one episode.

Students whose performance is deemed unsafe are removed from the health facility as soon as the judgment is made and are referred to the Course Director, who determines the appropriate course of action. Students may receive a fail grade for the subject, or be given an opportunity to demonstrate improvement in an alternative clinical environment such as the laboratory. If satisfactory, students are given another opportunity to complete their midwifery practice in a clinical environment.

Here are some links to the rules surrounding misconduct:

[SECTION 16 – STUDENT MISCONDUCT AND APPEALS](#)

[UTS LEGISLATION, RULES & POLICIES](#)

Unsatisfactory clinical practice performance

A student's performance is deemed unsatisfactory if they fail to meet the objectives and assessment of a given midwifery practice experience.

Each student has a formative assessment part-way through each clinical placement. If unsatisfactory performance is identified in this assessment, the Educator/Facilitator will notify

the student and identify a plan of action. This includes major areas of improvement and specific aims to be met to achieve satisfactory performance, documented in a Learning Support Plan. If the student and/or the Educator/Facilitator have reason to believe that they cannot work together to implement the improvement plan, a request can be made by either person to the Course Director for alternative arrangements. Each student receives a summative assessment towards the end of each clinical placement, which is assessed as either overall satisfactory or unsatisfactory.

Non-academic misconduct

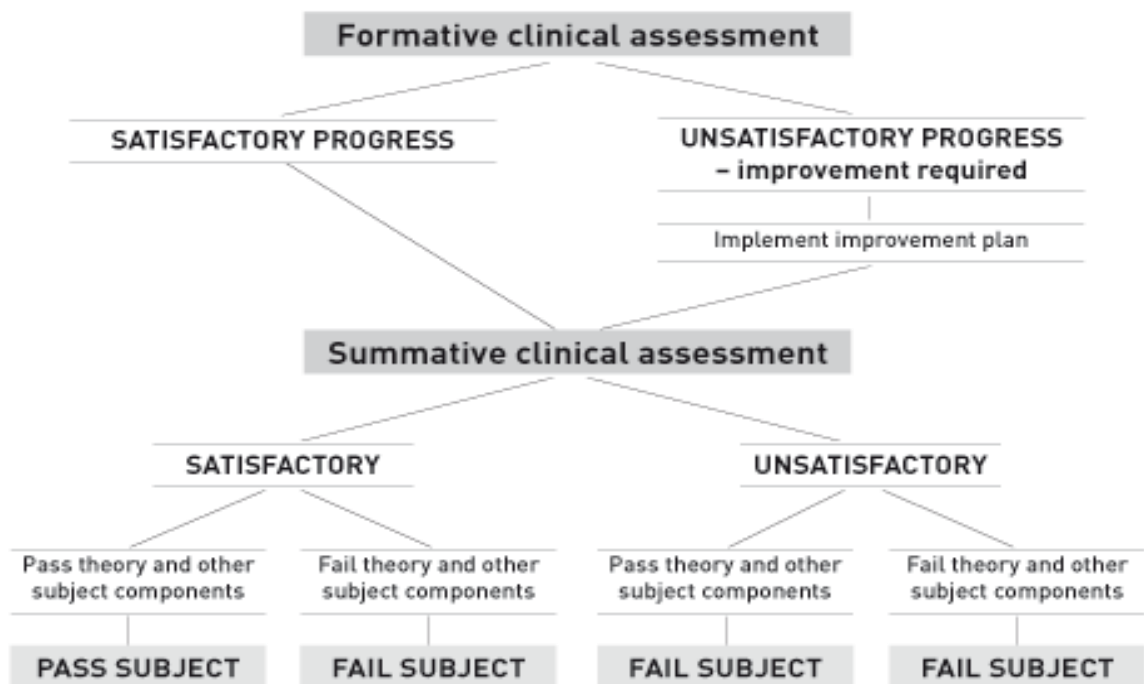
During a placement, students are expected to conduct themselves in a professional manner at all times. If students are considered to be behaving in an unprofessional manner, the placements may be terminated and the student asked to leave immediately. Supervisory staff (midwives or MUM) on the ward/unit, the Educator/Facilitator and/ or the Course Director can make an allegation of non-academic misconduct with the matter to be referred to the Faculty for investigation.

Unprofessional behaviour or misconduct includes, but is not limited to, breaching privacy, inappropriate behaviour such as swearing, violent and abusive language or physical behaviour, rudeness, being disrespectful to facility staff, UTS employees, women and/or their families. If students attend placement under the influence of alcohol or illicit substances this is also considered misconduct. Inappropriate or unprofessional social media activity is also deemed as misconduct. Students must adhere to the NMBA Social media policy, available at [Nursing and Midwifery Board of Australia - Social media: How to meet your obligations under the National Law \(nursingmidwiferyboard.gov.au\)](https://www.nursingmidwiferyboard.gov.au)

Grievances

Students who have a concern arising from their placement should contact the Course Director via email. A statement of concern becomes a grievance when it is reported to a person in authority at UTS and requires action and response under UTS policies and procedures. A grievance can be about a situation, a process, person, or people.

The following diagram demonstrates the process for clinical subject assessment



Students on clinical placement

Code of Conduct & Ethics

Students are expected to adhere to all codes of professional conduct for Midwives in Australia. A [Code of Conduct](#) is a set of principles which guide behaviour between staff and those receiving care through health services or those providing services to the health facility. Students should familiarise themselves with their requirements and related Codes of Conduct. Here are some links:

[SECTION 2 – STUDENT REQUIREMENTS \(UTS\)](#)

[NSW MOH CODE OF CONDUCT](#)

Student safety

Students undertaking a clinical assessment must be physically, mentally, and emotionally fit to attend. Students are responsible for evaluating their capacity to attend each placement and disclosure of health problems may be necessary for reasons including:



- The safety of the student and the wellbeing and safety of women/babies and staff who students may be in contact with
- Where consideration needs to be given as to whether a reasonable adjustment is required to support a student's placement
- Ensuring students are covered by insurance

Fitness for practice guidelines

If a student has concerns as to their fitness or wellbeing prior to or during a placement, the student will need to:

- Seek medical advice
- Advise their Clinical Subject Coordinator or the Bachelor of Midwifery Course Director
- Apply for Special Consideration if absent for more than 16 hours during placement
- If a member of Faculty staff, staff at a health facility or fellow students have a genuine concern regarding a student's fitness or wellbeing they should raise this, in confidence, with the Bachelor of Midwifery Course Director
- When a concern is raised and the Faculty is notified of a student's health, injury/illness, fitness and wellbeing, pregnancy or recent birth, the student may be asked to meet with the Bachelor of Midwifery Course Director.

Placements may be postponed or suspended until the required clearance is obtained or adjustment considered and, therefore, students are advised to seek advice well in advance of their scheduled placement/s.

Failure to seek medical advice or to advise the Course Director of any health related concerns or risks may result in an inability to complete clinical hours/failure of the subject and the SoNM and Faculty accepting no responsibility for the consequences/ outcomes associated with a student's placement.

Pregnancy

Pregnancy does not preclude a student from attending a placement; however, some clinical environments may be potentially harmful to the developing fetus, for example, working with women with infectious diseases and/or being exposed to anaesthetic gases. Pregnancy is also a contraindication to receiving 'live' vaccines, which may prevent a student from meeting their pre-placement requirements.

Students who are pregnant must inform the Bachelor of Midwifery Course Director as soon as they are aware of their pregnancy so as to discuss an appropriate course of action for upcoming clinical placements.

You will need to provide a Medical Certificate from your midwife/health care provider certifying the expected date of birth, current health status, and fitness to attend placement. This is also dependant on any local policy of the health facility hosting the placement.

Confidentiality and privacy

Midwifery students will have access to women's medical information and, therefore, must recognise and maintain confidentiality and privacy in order to comply with legislation and policies and to maintain their professional responsibilities.

Students may only access clinical records for the purpose of providing clinical care. If students are required to access women's files for the purpose of study they must first seek approval from the Midwifery Unit Manager (or equivalent), Educator/Facilitator and the woman.

Students must disclose to the woman the reason the information is being sought and ensure that any identifying information is removed from any materials that are gathered for the purpose of study. Students must never take identifiable information home such as charts, files, and identifying stickers.

Students **must**:

- Follow guidelines for the storage of medical records
- Not discuss personal information about women or colleagues

- Not include real names or other personal details of women or staff in assignments etc.
- Ensure they de-identify data
- Only access information about staff or women when this is required as part of allocated work

The following are examples of breaches of confidentiality and may be the result of carelessness rather than being deliberate:

- Taking identifiable information home
- Accessing information that is not relevant to allocated duties such as look up results for a friend or relative
- Discussing confidential or sensitive information in an inappropriate or public area
- Giving information over the phone
- Emailing women's information via public networks (such as internet email or sharing materials on social networking sites). This includes sharing photos or details of their medical conditions or personal circumstances.

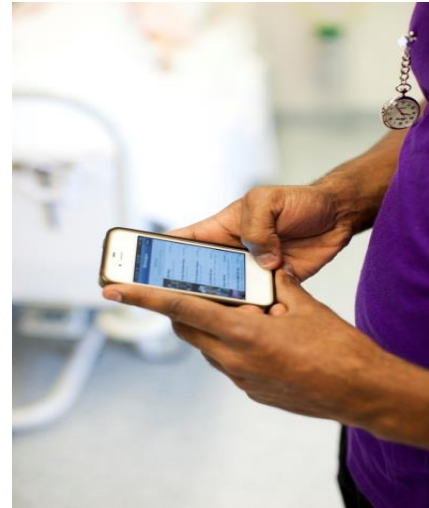
Confidentiality also applies to colleagues; for example, do not release personal telephone numbers or discuss colleagues' health problems. Even when a placement is completed, students are still obliged to maintain confidentiality.

Breaches in confidentiality can result in misconduct and associated consequences

Midwifery students will be involved in the documentation of women's care. Students should ensure that they understand what is expected of them whilst on placement and that all documentation is countersigned by a midwife. It is important to always check what the local health facility guidelines are for report writing; however, the following typically applies:

- Write in black pen only
- Ensure notes are concise and accurate, written in a factual manner
- Never make derogatory comments
- Ensure writing is legible
- Always time and date entries

- Sign each entry and print your name and designation
- Do not time or date entries retrospectively
- Do not change your entries
- If an error is made, rule a single line through the writing – sign and date the change
- Do not use correction fluid



Mobile phones

Mobile phones may interfere with monitoring equipment and must remain **switched off** during placement. The use of mobile phones for recording conversations or taking photos is strictly prohibited.

Cultural awareness

Cultural diversity at UTS refers to language, cultural background, race, ethnicity, national origin, gender, sexuality, Indigenous Australian identity, age, attendance pattern, family and carer responsibility, geography, socioeconomic status or class, religion, and disability.

During placements, cultural awareness is essential to quality care and is an understanding of how a person's culture may inform their values, behaviour, beliefs and basic assumptions.

Cultural awareness recognises that everyone has a unique cultural background, which influences how people interpret the world around them, perceive and interrelate with others. By being culturally aware students are better able to explore cultural issues with women and their families.

Students **must**:

- Be aware of their own cultural influences
- Be aware not to judge other people and their beliefs or behaviours based on their standards and culture
- Be aware of trying to predict or assume behaviours/attitudes based on culture
- Be aware of generalising about individuals

- Be aware that the beliefs and behaviour of people can vary considerably even though from the same culture
- Be aware that people may adopt and blend practices of a new country and retain practices from other areas of their cultural background
- Be aware that not everyone will identify with their cultural and/or religious background
- Seek opportunities to develop knowledge about different cultures, beliefs, etc

When involved in the care of women whose English language is poor it is important to use accredited Interpreters to promote effective and appropriate communication.

It is highly recommended that an Accredited Interpreter is used rather than staff, family members or friends. The exception may be in an emergency when it may be possible for a bilingual health professional to assist.

Immunisation and infection

Occupational exposures are defined as any incident which occurs during the course of a person's employment and results in contact with blood or other body substances; this includes needle stick injuries. Such exposures may put the person at risk of acquiring a blood borne infection such as HIV, Hepatitis B and Hepatitis C and may be transmitted by significant exposure to blood or other body substances.

Whilst on placement, students' first line of protection against occupational exposure to HIV, Hepatitis B and Hepatitis C or other infections is to adhere to standard infection control practices. In the event of an occupational exposure, whether a sharps/needle stick injury or other exposure to blood and/or body fluids, this must be reported in accordance with health facility policy and UTS policy. This facilitates prompt assessment so any required action or treatment can be initiated appropriately. Do not delay in reporting any exposure to blood or body fluids. Students should notify their supervising Educator/Facilitator immediately should an exposure occur.

Vaccination is compulsory. Students unable to be vaccinated for any reason (including pregnancy) are unable to attend placement until they are vaccinated. This may require a period of leave of absence until after giving birth so that vaccinations can be attended. Students unable to be vaccinated should speak to their Course Director immediately, as it may be impossible to commence the course under these circumstances.



Workplace safety and wellbeing

During a clinical assessment, students are responsible for promoting and maintaining safety and wellbeing and must:

- Take reasonable care of, and cooperate with actions taken to protect, the health and safety of both themselves and others
- Follow safe work practices as directed by their supervisor, including the proper use of any personal protective equipment supplied
- Seek information or advice from a supervisor before performing new or unfamiliar tasks
- Report all health and safety accidents, incidents and hazards to their supervisor as soon as is practicable
- Follow the emergency evacuation procedures
- Practise in a way to avoid, eliminate or minimise risks
- Participate in orientation activities for clinical placements

- Follow Facility guidelines for the disposal of any hazardous wastes in a safe and approved manner
- Exercise a duty of care toward others in everything undertaken

Students must be aware of risk management policies and processes and be capable of implementing these within the clinical environments; students must also comply with the policies and procedures of the relevant health facility.

As part of the orientation to each placement students need to familiarise themselves with local policy and procedures relating to Health and Safety.

Fire Safety

You need to find out what the local procedures are in the event of a fire, what the mechanisms are for raising an alarm, and the emergency phone number(s).

Action in the event of an emergency

You need to find out what the local procedures are in the event of an emergency and what the emergency phone number(s) are. This includes understanding the Facility's procedures in the early recognition of and response to the deteriorating woman.

Manual handling

Manual handling refers to any activity which requires a person to use force to lift, lower, push, pull, carry or otherwise move, hold or restrain objects (including people). Manual handling injuries are a common cause of workplace related injury for health care professionals. Health care and community facilities are required to have policies and practices in place to minimise the risk of manual handling injury to women, staff and others.

All students have a responsibility to minimise their manual handling risk by:

- Utilising practices that reduce manual handling
- Complying with health facility policies on manual handling, including training
- Using suitable equipment when moving women
- Always following safe work procedures and practices and using equipment provided

- Reporting to the RM in charge any potential manual handling hazards or issues so they can be fixed

Accidents, injuries and work-related incidents

If a student experiences an incident such as an illness, injury or an adverse event whilst on placement they should report to the RM in charge. It is important that any local and UTS incident reports are completed and appropriate actions including first aid or medical treatments are taken. Please contact the Bachelor of Midwifery Course Director in a timely manner should you injure yourself during placement.

If an injury sustained by a student raises doubts about the student's ability to attend subsequent midwifery practice experiences, the student will be referred to the Head of Discipline for Midwifery.

If you notice a hazard or are involved in an accident at UTS, please [report](#) the incident.

Insurance guidelines

Faculty staff are not suitably qualified to provide advice on insurance issues so it is important to read this section carefully. The best place to find current information on UTS Insurance is by accessing the insurance information on the UTS website.

It is important for students to read the terms regarding insurance relating to personal injury whilst engaged in campus/course related activities and/or practical placement or community placement. UTS does not hold/provide work cover insurance on behalf of students, therefore, certain limits to any medical cover will apply as detailed on the UTS website. Students will be required to access Medicare or any private cover they already hold.

Students have a responsibility to ensure that their clinical supervisors/Educator/Facilitator appointed by the Faculty know of their whereabouts and the hours that they will be attending placement (roster) at all times. When a student is allocated to a health facility they must only attend the hours/dates of placement allocated. If a student is undertaking voluntary work or attending an unscheduled/scheduled placement during hours other than those allocated to them, they will not be covered by an existing insurance policy. Note: students are covered by insurance to attend the women they are caring for as part of their Continuity of Care experiences.

Students are advised not to take risks whilst on a placement. It is important for students to work within their supervision guidelines and ensure they only provide care to the level of their current preparation as per their program of study.

Scope of practice

Students are expected to identify and practice within their *scope of practice* during their clinical assessment. Scope of Practice refers to the skills, procedures, actions, and processes that a student can participate in whilst on placement. Please note that the scope of practice of Bachelor of Midwifery students is different from the scope of practice of Graduate Diploma of Midwifery students.

Each subject identifies the content and skills that are integrated in the subject, learned and practised in laboratories, and this acts as a guide to the scope of practice at each stage of the program. Students are expected to practise safely and under supervision at all times.

If a student is unsure as to whether an action or activity is within their scope of practice they must seek advice from their Educator/Facilitator and/or Clinical Subject Coordinator. Students must note that the staff on the wards may be less familiar with their program of study; if asked to practice out of your scope of practice, seek immediate advice from your Educator/Facilitator.

Practising outside of your scope is considered unsafe practice and could result in termination of your clinical placement.

Continuity of Care Experiences

There are clearly articulated models of supervision, support, facilitation and assessment for students when they engage with a woman to ensure they have the opportunity to achieve required learning outcomes and attainment of the Midwives Standards for Practice (NMBA, 2018).

The COC experience is linked to practice courses and integrated with clinical experiences recorded within the practice portfolio and will be monitored across each year. Students are required to demonstrate progression towards achievement of a recommended minimum number of continuity of care experiences across each year of the program. An achievement of twenty COC experiences is required to successfully complete the subject *92686 Midwifery Practice 6: Transitioning to Professional Midwifery Practice* and thereby to complete the Bachelor of Midwifery program at the end of Year 3. Essentially, midwifery students can

undertake Continuity of Care across the full calendar year and are not constrained by session based requirements.

In the first year, students will be required to undertake a minimum of four COC experiences, with a minimum of 6 COC experiences being completed in second year and a minimum of 10 completed in third year. This equates to a minimum of 20 COC experiences across the course. Students are strongly encouraged to recruit women for COC experiences who are birthing at the students' clinical placement site. Recruitment may occur through a number of mechanisms, but mostly occurs through the clinical placement sites in the antenatal clinic. Students may also recruit women they meet in antenatal clinic or other clinical areas. Each woman is provided with written information about the student continuity of care experience. Once the woman agrees to be involved, she is asked to sign a consent form. A maximum of 10 hours per COC experience may be counted towards the total required clinical hours (applies to students requiring a total of 20 COC as per curriculum commenced 2022 and later).

Women may withdraw from the COC experience at any time. In the event of a woman deciding to withdraw from the COC experience, the student will be required to recruit another woman in order to fulfil the program requirements of 20 completed COC experiences. In complex circumstances such as intrauterine death, stillbirth, or preterm birth, with the woman's permission the midwifery student will continue with the COC experience and be supported by the preceptor midwife in relation to referral and consultation required.

Consistent with the UTS values and the recognition of the relational skills required by the midwife to develop a partnership relationship with the woman we do not sanction recruitment of women for COC experiences via social media. As mentioned above, students must adhere to the NMBA Social media policy, available at [Nursing and Midwifery Board of Australia - Social media: How to meet your obligations under the National Law \(nursingmidwiferyboard.gov.au\)](https://www.nursingmidwiferyboard.gov.au/Policy-and-standards/Policies/Pages/Social-media.aspx).

It is the student's responsibility to develop and maintain a relationship with each woman with whom they are undertaking a COC experience. However, midwifery students are not permitted to visit a woman in the woman's home unless they are with a qualified clinician. The student can arrange to meet with the woman at the antenatal clinic, midwifery practice or GP surgery. When the woman is in labour the student should ensure that the woman is aware to contact her/him at the same time as she contacts the hospital, and that the student will meet the woman at the hospital or the home (if attending with a private practice midwife or employed caseload midwife). The woman will need some way of contacting students who are on call for their Continuity of Care experience i.e., mobile phone. If they feel comfortable to do so the student can share their mobile number with the woman, but the student cannot provide pregnancy advice to the woman about herself or the baby over the phone without a midwife present. Should a woman seek pregnancy advice from the student, the student must advise

the woman to seek suitable medical advice as soon as possible explaining that they as an unregistered midwife cannot provide medical advice without the presence of a registered midwife/doctor being present.

For postnatal visits, it would be preferable for the student to visit the woman in the hospital and at least once at home with a midwife or child health nurse present. Students may meet up with women when they visit child health services. The student may make arrangements with the woman to have final contact at the six week postnatal visit with a clinician or via telehealth with a midwife present during the consultation.

Travel and safety

Students **must** consider their own safety whilst travelling to or from a placement.

Reduce your risks

Understand your surroundings. Walk in areas that are open, well lit, and well-travelled. Become familiar with the buildings, parking lots, parks, and other places you walk. Pay particular attention to places where someone could hide such as stairways and bushes.

- Avoid shortcuts that take you through isolated areas
- Travel in a pair/ group
- Make sure your friends, parents or partner know your daily schedule and let someone know where you're going and when you expect to return
- Be sure your body language shows a sense of confidence. Look like you know where you're going and act alert
- When riding on public transportation, sit near the driver and stay awake - attackers look for vulnerable targets
- Carry a mobile phone if possible and ensure that it's programmed with an emergency contact phone number
- If you need help, draw attention to your situation by shouting out specific words like "**HELP**", "**FIRE**", "**POLICE**", or "**BACK OFF**". These words are excellent attention getters if you're feeling threatened.

Emergency contacts

Health Facilities may have security personnel on staff. Therefore, students should familiarise themselves with the health facility security contact number and locations. If you are travelling at night ask a security officer to accompany you to your car, or walk with other students and/or staff when catching public transport.

Act with caution and ensure that any incidents, should they occur, are reported to the police and UTS.

Here are some links:

POLICE ASSISTANCE LINE – Ph 131 444

[NSW TRANSPORT INFO](#)

[UTS: SAFETY & WELLBEING <ACCIDENT/ INCIDENT REPORTING>](#)

HIRO

[Reporting hazards and incidents | University of Technology Sydney \(uts.edu.au\)](#)

[Staying safe on campus | University of Technology Sydney \(uts.edu.au\)](#) or

DIAL 6 or Ph 1800 249 559

Rural and remote placements

In the 2nd and 3rd year, midwifery students are eligible to apply for a Rural or Remote placement in NSW or interstate.



Rural settings are considered to be areas outside of metropolitan and major provincial towns and cities such as regional centres, coastal cities, and small towns. Examples of a remote area may include mining sites, tourist resorts, and remote communities.

When undertaking a Rural or Remote placement, students reside within the community working with experienced rural practitioners to gain valuable insights into the social and healthcare needs of these communities. Previous students have had valuable and rewarding experiences in rural and remote areas.

Students may apply for various grants/ scholarships through the NSW Ministry of Health to assist with travel and other expenses for approved Rural & Remote placements. Students who are interested in undertaking a Rural or Remote placement should notify CPU and/or the Bachelor of Midwifery Course Director.

Privately practising midwives

In 1st year, students are invited to express interest in recruiting COC women with a Privately practising midwife (PPM).

In 3rd year, midwifery students are eligible to apply for a placement with a PPM during mid-year and summer placement blocks.

Health facilities

The majority of placements occur in NSW Public Health Facilities however, some placements occur in private or community health facilities and/or with privately practising midwives. In most instances, community and private facilities and practitioners adopt the policies of the NSW MoH, therefore, students should prepare for a placement in a private health facility as they would for a placement in a public health facility.

Student placement agreements

For UTS to utilise a health facility for a clinical assessment in NSW and other states and territories, an agreement must exist between the MoH, LHD, individual or community health facility or PPM and UTS.

Students are not permitted to undertake their clinical assessment in a health facility where an agreement does not exist. When a new agreement is required, the process can take up to six (6) weeks. If the two parties cannot agree on the terms of the agreement, an agreement will **not** be entered into and students will not be permitted to attend their placement there.

Students should make themselves aware of the terms in the [NSW Health Student Placement Agreement](#) as well as their individual responsibilities.

See here: [LOCAL HEALTH DISTRICTS](#)

Student identification

Upon presenting themselves at a placement, students must introduce themselves in uniform as a UTS student and clearly display their UTS-issued ID and name badge at all times

throughout the placement. The UTS Student ID Card can be attached to the student's uniform via a retractable cord/clip.

Lost, stolen, or damaged UTS Student ID Cards must be replaced by lodging an application with the Student Centre. An administrative charge is payable by the student. Upon completion of the BMid, students must return their UTS ID and Name Badge to the CPU in person or via the Assignment Drop Box.

Uniform

It is compulsory to wear the official UTS:Health Uniform when on clinical practice placements and to all classes in UTS clinical laboratories. This is to ensure high standards of dress and appearance when representing our university to local health district hospitals, community settings and private facilities.

The uniform consists of a UTS polo shirt. Each student is required to purchase a minimum of two.

You are also required to wear black pants/skirt and closed toe and heel black shoes, which need to follow strict professional attire guidelines:

Guidelines for pants/skirts

- Classic, professional fit
- Trousers to the ankle/shoe length
- Skirts must come up to the abdomen and fall to the knee
- NO low rise pants
- NO leggings
- NO black jeans
- NO shiny material
- All clothing must be clean, neat and in good order

Guidelines for shoes:

- Black leather professional shoes
- Strictly no open back/open toe shoes or sneakers
- Fully enclosed and non-slip
- Flat heeled
- White or black socks will be worn with the uniform
- Shoes should be clean and in good repair

Hair and nails

- Hair is to be worn off the face and should be neat as well as comfortable. If your hair is longer than shoulder length, it should be tied back.
- Nails should be clean and neatly trimmed. **NO** nail polish is permitted.
- Artificial nails **ARE NOT** permitted in the clinical setting.

- Male students should be clean-shaven or have neatly trimmed beards or moustache.

Accessories

- Students are permitted to wear a wedding ring and one pair of small, plain studs in the ear lobes. No other jewelry or piercings are acceptable.
- Watches should either be digital or have a second hand, and must have no sharp edges, fancy watchbands or large buckles.
- A multi-coloured ballpoint pen and small notepad are essential requirements. A small pocket calculator is advisable.
- No tattoos should be visible.
- Avoid all heavily scented products, e.g. soaps, perfumes, after shaves, deodorants, hair grooming items, laundry products, etc.

Cultural considerations

- A black/ navy hijab/ headscarf/ jilbab may be worn – it must be of a light-weight fabric, tucked and pinned to hold in place
- Black/ navy/ skin coloured arm coverings; however, these must be pulled up above the elbows in all clinical settings. This is an infection control requirement and is not negotiable.
- A black/ navy patka/ keski may be worn; however, a full turban is not permitted
- Burqu, khimar and sitaras are **not permitted**

If, for religious or cultural reasons, a student wished to dress outside of this uniform policy, they must contact the Course Director Bachelor of Midwifery and/or Director of Midwifery Studies. The request will be considered with regards to the ability to comply with policy and procedures such as Infection Control.

Any students who do not follow the guidelines will be sent home from their placement or laboratory class. Arranging make up hours for any clinical hours missed will be the responsibility of the student to negotiate with the Educator/Facilitator and Bachelor of Midwifery Course Director.

Shoes

Shoes should be comfortable and must comply with Occupational Health and Safety Requirements - black fully enclosed non-slip, low heeled, non-canvas shoes are required for all placements and laboratory classes; sport style footwear is not suitable.



Hand hygiene is one of the most important measures in reducing the transmission of infectious agents in a healthcare setting. This includes policy advice on fingernails:

- Nail polish **must not** be worn by healthcare professionals providing direct care to women and babies – chipped nail polish supports the growth of a large number of organisms on the fingernail
- Artificial nails **must not** be worn by healthcare professionals providing direct care to women and babies. Evidence suggests that wearing artificial nails may contribute to the transmission of certain healthcare associated microorganisms
- Natural tips must be less than 0.6 centimetres (1/4 inch) long. Whether the length of the nail is a substantial infection risk is unknown, however, long sharp fingernails can puncture gloves
- Nail art and technology **must not** be worn. There is limited information about nail art and technology but they may be a potential reservoir for microorganisms

Hand washing

Most infections, especially colds and gastroenteritis, are caught when we put our unwashed hands, which have germs on them, to our mouth. Some infections are caught when other people's dirty hands touch the food we eat. Hands and wrists should be washed with clean soap and water and students must dry their hands with something clean, such as paper towels. NSW Health has a policy that explains hand hygiene: [Hand Hygiene - Clinical Excellence Commission \(nsw.gov.au\)](https://www.nsw.gov.au/health-and-care-services/clinical-excellence-commission)

You should always wash your hands:

- After using the toilet
- Before making or eating food
- After handling dogs or other animals
- If you have been around someone who is coughing or has a cold



Self-reflection

The experience that a student gains from their placement depends on many factors including the student's own preparation for, and engagement in, the placement and their focus on learning. Every interaction brings a new experience and an opportunity to learn and improve their professional and personal knowledge and skills.



Attending a placement does not guarantee that learning will occur. Developing competency involves not only meeting the course aims and objectives, but learning through reflection.

Reflection allows students to:

- Process their experience
- Explore and gain an understanding of their role
- Understand why they are doing something

- Identify the impacts of what they are doing
- Consider their professional and personal skills
- Identify their learning needs and strengths
- Become aware of their professional values

The potential to learn from both positive and negative experiences during a placement is invaluable and promotes further learning. Reflecting during and following a placement allows students to develop clear objectives for their next placement opportunity. Placements are not only a setting in which students apply their theory and develop their ability to care for individuals; they also provide an opportunity for students to learn to work with other members of staff within the team.

University services

Academic liaison

The Academic Liaison Officer (ALO) is responsible for assisting students with Special Needs to negotiate, if necessary, reasonable adjustments to learning and assessment tasks with subject lecturers and the CPU. Students with Special Needs include students who:

- have a disability or ongoing illness
- have difficulties with studies because of family commitments (for example being the primary carer of small children or a family member with a disability or who is pregnant)
- were admitted to UTS via the inpUTS Educational Access Scheme and have course issues

The Faculty's Academic Liaison Officer is the **first point of call** for students with special needs, and must be made aware of your situation within the first 2 weeks of semester.

The Accessibility service

The Accessibility service available at UTS works with other University staff to ensure that appropriate support is available for students:

- with disabilities or ongoing illnesses
- admitted through the inpUTS Educational Access Scheme or the [special admission schemes](#)

The Accessibility service provides a central contact point for information about the services and procedures the University has in place to ensure the accessibility of its educational programmes to people with disabilities and ongoing illnesses.

Financial assistance

A [Financial Assistance Service](#) within Student Services is available to assist students who experience financial difficulties.

Clinical placements may result in financial stress as a result of missed opportunities for paid work and/or additional costs associated with placements, such as transport and childcare fees.

Students may be eligible for a Financial Assistance Program which includes small grants for local students and interest free loans for any enrolled student experiencing hardship.

Counselling

[Counsellors](#) are available at the City campus. Counsellors can help:

- If you think you may have chosen the wrong course
- If you have stressful circumstances or psychological or emotional issues which interfere with your studies
- With managing administrative problems or complaints
- If you want to develop better generic learning skills
- If you need help as you are on [Academic Caution](#)



Placement evaluations

The Faculty encourages students to provide constructive and well-informed feedback on their placement experience.

In providing feedback, students will assist the Faculty in enhancing the student experience whilst contributing to the improvement of services, processes and policies within the Faculty. Students with feedback regarding their placement should discuss this with their Clinical Subject Coordinator, the Bachelor of Midwifery Course Director or the Head of Discipline: Midwifery.

UTS email guidelines

UTS utilises email as an official communication tool; therefore, when emailing staff, students or groups, both publicly and privately within the Faculty of Health, students are expected to do so in an appropriate and professional manner.

By adhering to the following email guidelines students and staff will promote clear and efficient correspondence and show respect for their fellow email users.

Email guidelines:

- Send emails from your UTS Email Account – emails sent from personal email accounts such as Yahoo and Hotmail will not be read or answered
- Ensure the Subject Line includes the Subject Name and accurately reflects the content and nature of the email
- Beginning each email with a formal greeting such as 'Dear.....' Greetings such as *Hey* and *Hiya* are unacceptable in professional communication
- Be specific and concise – if you are referring to a particular subject or placement, include the details followed by your enquiry
- Include your full name & student ID in every email
- Keep to the point – be constructive, objective, and factual
- Use appropriate layout, spelling, and grammar – abbreviations such as *plz*, *u*, *thx* and emoticons should not be used.
- Do not write in capital letters – in emails, words written in upper case are 'shouted'
- Conclude your email with an appropriate ending – e.g. Regards, Sincerely
- Include your current contact telephone number in case the recipient needs to contact you
- Reply to emails in timely manner or acknowledge receipt of the email if you are unable to reply at that time
- When responding to emails, answer all questions in the original email
- Do not forward, copy, or attach emails without permission – failure to do so may infringe on copyright laws
- Respect privacy and sensitive information – emails are the property of the University and may be used as evidence in cases of non-academic misconduct

Recruitment

NSW MoH has a centralised process for the state-wide recruitment of newly graduated registered midwives applying for employment in NSW public hospitals and some not-for-profit private hospitals.

Employment opportunities also exist in the private sector. Vacancies in these sectors are usually advertised in newspapers and on local health district web sites.

Students seeking employment in other states and territories should access the relevant health department's website for more information.

Throughout the year, opportunities for casual Assistant in Midwifery (AIM) positions become available. These casual positions are suitable for 2nd and 3rd year students. You may look for the advertisements on LHD web sites.

Attending an interview

New graduate interviews typically occur during Spring Session in 3rd year and may clash with a scheduled placement. Interviews for positions should be scheduled outside of placement dates wherever possible.

The Faculty will provide a time allowance for students to attend their interview; however, the amount of time a student may be absent for must be negotiated with the Educator/Facilitator at the commencement of the placement.

Success!

Students who are successful in their application for a casual/ AIM/ new graduate position within the health care sector may be required to attend an orientation program prior to commencing their position. On occasion, orientation sessions may clash with a scheduled placement. Time allowances may be offered however, students must first contact the CPU for advice.

