2017

Clinical Facilitator and Preceptor Toolkit
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Welcome to the School of Nursing, Midwifery and Paramedicine

On behalf of the School of Nursing, Midwifery and Paramedicine at the USC, we would like to welcome you as a member of the teaching team. The School offers a range of undergraduate and postgraduate nursing, midwifery and paramedic programs and has a growing number of students involved in higher degrees by research.

The School has a presence at the Sunshine Coast, Gympie and Fraser Coast campuses. In 2017, students from the Bachelor of Nursing Science, Bachelor of Nursing Science (Graduate Entry) and the Bachelor of Nursing Science/Bachelor of Midwifery who are enrolled in the Sippy Downs campus will enrol in classes conducted from the Sunshine Coast Health Institute (SCHI) co-located with the Sunshine Coast University Hospital.

We welcome you as colleagues and valued resource persons for the students. Our goal is to establish and maintain a close working relationship with you throughout the year and we urge you to use us as mentors and resource persons, especially if this is your first experience with USC.

USC Program Structures

The School of Nursing, Midwifery and Paramedicine offers the following nursing and midwifery programs (please follow links):

**Bachelor of Nursing Science** (BNursSc)

**Bachelor of Nursing Science (Graduate Entry)** (BNursScGE)

**Bachelor of Midwifery** (BMid)

**Bachelor of Nursing Science/Bachelor of Midwifery** (BNursSc/BMid)
Key Contact Information

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Your role as Clinical Facilitator

Your primary role is to support, guide and assess student learning in the clinical environment. As a clinical facilitator, you are representing the School of Nursing, Midwifery and Paramedicine and it is expected that you will set a high standard as an educator, a registered nurse and/or registered midwife and an advocate for USC. To role model these positive attributes, we expect that you:

- Wear the USC Clinical Facilitators uniform and identification.
- Communicate effectively and in a timely manner with all key people including staff (clinical and USC) and students.
- Work according to the Nursing and Midwifery Board of Australia’s National Standards for Practice for the Registered Nurse and/or Registered Midwife.
- Hold current Australian Registration as a Registered Nurse and/or Registered Midwife, a current National Criminal History Certificate, and have Queensland Health mandatory immunisations up to date. Please upload these documents to your WILS online profile.
- Understand the USC Workplace Learning and Industry Placement Policy and Procedures available @ http://www.usc.edu.au/explore/policies-and-procedures/workplace-and-industry-placement-procedures

Clinical experience in USC programs

Experience in clinical practice settings is integrated throughout our programs. These learning experiences are supported through on-campus Preparation for Practice courses. A wide variety of placement settings ensures that the broad range of nursing practice is experienced. Students have the opportunity to experience the way in which nurses and the multidisciplinary team address the National Health Priority Areas (AIHW, n.d.). The opportunity is also available for students to experience practice in Indigenous, rural, remote and near neighbour settings.

Tools for Clinical Learning

There are two essential tools that have been developed to facilitate student learning while on clinical placement:

1. Framework for Clinical Learning for Practice.
2. Check In and Check Out process.

1. Framework for Clinical Learning for Practice

A Framework for Clinical Learning for Practice has been developed for student learning within the clinical environment at USC. It has been developed based on the work of Fenton & Royal (2015) and informed by the Australian Nursing and Midwifery Accreditation Council (ANMAC) Registered Nurse Standards and National Standards set by the Australian Commission on Safety and Quality in Health Care. The framework provides a conceptual approach to the organisation of clinical practice learning which moves away from specific tasks to consider elements of clinical practice in an integrated way. The major themes of the framework include:

- Professional Values
  - Patient Centred/Ethical
  - Critical thinking/Problem solving

- Effectiveness
  - Cost drivers of health care
  - Cost effective care
  - Political and organisational awareness
2. Check-in and Check-out: A process for teaching and learning in clinical practice

The Check-in and Check-out (CICO) process supports high quality, engaging and relevant education in clinical practice spaces. The CICO process focuses on collaborative learning spaces where students engage as partners in their learning with teaching staff in nursing laboratories, simulation suites and clinical practicum. The CICO process complements the course content, clinical practice and skills assessed in all the “Preparation for Practice” and “Clinical Practicum” courses in the University of the Sunshine Coast (USC) nursing and midwifery programs.

The expectations of teaching staff and students in collaborative learning spaces is informed by the USC Student Charter (http://www.usc.edu.au/learn/current-students/student-charter). The course co-ordinator and teaching staff are responsible for all aspects of a clinical course delivery. Students are expected to actively engage with the course requirements and learning resources to successfully complete a clinical course. In a collaborative learning space students are active partners with teaching staff in clinical learning activities.

Check-in (briefing) prior to, or upon entry to, the collaborative learning space requires a student to prepare for their clinical practice experience. Check-out (debriefing/student confidence) supports activities for a student to gain feedback which reinforces positive aspects of the learning experience, encourages reflective thinking, supports thinking to link theory to practice and research, encourages critical thinking and supports discussion about professional practice. The student is required to rate their confidence on four statements at the completion of each clinical practice session; the confidence statements support a student to acknowledge their accomplishments, learning experience and how they felt about their learning. This information finally encourages a student to answer the “take home” questions: Have I learnt what I need to know? If not, what do I still need to do?

The CICO process is summarised in Appendix 1 for your reference. If you have any questions related to the CICO process, please contact the course co-ordinator.

(Bachelor of Nursing Science, Curriculum, 2016, p. 10-11)

You will find that students have been exposed to the framework in on-campus activities – transferring this to the clinical environment is essential for success.
Developing your Facilitation Skills

Clinical Workshops

Formal workshops and debriefs are held every semester. This is compulsory attendance as part of your employment conditions. The workshops are structured to achieve the following:

• To meet training and development needs.
• To foster professional links with USC staff.
• To communicate the structure of the programs your students are enrolled in.

Learning about Clinical Facilitation

In order for you do develop your skills, facilitators are encouraged to complete the On Track eLearning Package prior to commencement of students' placement at: http://www.health.wa.gov.au/wactn/home/wachs_resources.cfm.
The 10 modules in the learning package should take you approximately 7 to 8 hours to complete.


Hours for Clinical Facilitators

Clinical facilitators work an eight hour day (excluding meal times). The practicum involves a mixture of different shifts. Depending on the facility your roster may be given to you in advance, prior to the placement group commencing, or arranged around the shift times of your students. Assessments of students should be undertaken within the clinical facilitator hours.

Assessing Clinical Learning

The Nursing and Midwifery Board of Australia (NMBA) Registered Nurse Standards for Practice and the NMBA Registered Midwife Standards underpin all student assessment in the clinical environment. The School has adopted the validated Australian Nursing Standards Assessment Tool (ANSAT) (http://www.ansat.com.au/home) and the Australian Midwifery Standards Assessment Tool (AMSAT) to provide progressive feedback and summative assessment.

Facilitator Duties

As a Clinical Facilitator you are expected to prepare for student placements prior to the commencement of the clinical experience, including attendance at Agency Inductions (as necessary), developing links with clinical staff and unit policies. Once you are allocated your group of students, your role is to manage their integration into the nursing and/or midwifery team.

You will be supplied with a ‘username’ and ‘password’ to the Sonia - Work Integrated Learning System (WILS Online). The names and email addresses of your students will be allocated to you via the WILS Online system. You will also need to plan the following:

• Before the students start, make yourself known to key facility staff e.g. nurse unit manager, nurse educator. Advise the staff of:
  • your role;
  • when you and the students will begin;
  • the level of student (1st year, 1st clinical; 2nd year, 50% through program etc.);
the focus of their learning during the practicum;
how they can find information on what students can and cannot do;
how they can contact you when needed;
how many students will be in their area at a time; and
the days students will be there.
• Participate in your agency induction (if not undertaken previously).
• Know where unit and agency policies and procedures are to be found and be familiar with these and those that students must become familiar with.
• Organise orientation prior to commencement.
  Most organisations engaged by the University of the Sunshine Coast already have an established orientation format and online eLearning packages. If not, you will need to plan and conduct an agency and placement orientation for the first day of the clinical practicum. You may need to book space ahead of time.
  Involve agency staff in planning the orientation – who should students know, what should they know and who should they ask?
  Identify and include those procedures and policies that relate to client safety, occupational health and safety and workplace behaviour.

First Day of Placement

Facilitator’s Role

On the first day of placement your role is to:
• Conduct an orientation to the facility.
• Ensure students know when to arrive and meet you.
• Advise them of the best places to park.
• Ensure that each student knows how to contact you.
• Involve the agency staff on issues such as OH&S, access to clinical records.
• View students’ original pre-clinical documentation on the first day and show to the Facility Manager if requested. The eight USC preclinical requirements are:
  1. Blue Card
  2. AFP National Criminal History Police Check
  3. Vaccination Preventable Diseases [VPD] (immunisation and infection prevention)
  4. First Aid Certificate
  5. CPR Certificate
  6. Qld Health Student Orientation Checklist
  7. Qld Health Student Deed Poll
  8. USC Student Placement Agreement (including Code of Conduct)

  Some facilities may also have their own mandatory requirements that need to be completed prior to commencement of the placement. Any concerns, contact the Clinical Placement Office.
• Conduct a tour of the agency/facility:
  • Ensure students know where the bathrooms are.
  • Show them where they can find refreshments and the hours of operation.
  • Show them where they will be having their debrief sessions.
  • Show them the departments they will need to find as a student (X-ray, pharmacy, laboratory, DEM).
• Familiarise the student/s with their unit:
  - Ensure students know the location of bathrooms.
  - Show them where they can leave their personal possessions.
  - Let them find specific items such as: the emergency exits; evacuation assembly areas; emergency bells; fire alarms; firefighting equipment; protocols for an emergency; utility room; pan room etc. Most facilities/wards will already have a seek and find process set up for students.
• Be sure to have breaks and lunch with student/s on the first day.
• Introduce the student/s to the NUM, RNs.
• Provide the students with specific learning activities to prepare them for the following day, such as:
  - Meeting the RN they will work with.
  - Meeting the client/s they will be caring for.
  - Becoming familiar with the documentation used.
  - Reviewing or researching the client’s medical condition/surgical procedure.
  - Reading the care plan/clinical pathway and becoming familiar with the procedures to be undertaken.
  - Preparing a plan of action for the following day.
  - Becoming familiar with the equipment to be used the following shift.
  - Arrange an initial interview time with each student where you will learn a little about them.
  - At initial interview go over the ANSAT feedback tool with the student. This tool is designed to promote progressive feedback and to assist the student/s understanding of the NMBA requirements.

Facilitate Ongoing Learning Opportunities

You are required to facilitate ongoing learning opportunities for the student by:
• Conducting a risk assessment each day in relation to student/s in collaboration with relevant nurse managers by:
  - Assessing the clinical environment to ensure that appropriate staffing is available to provide support for learning.
  - Ensuring students are allocated to work with and supervised by a registered nurse.
• Assisting clinicians to understand the learning needs of students.
• Assisting students to appreciate the roles and contribution of the interdisciplinary health care team.
• Referring to the Check In/Check Out (CICO) information in Appendix 1 to guide the student’s learning goals and discussing learning for the day.
• Matching students with their level of experience, skills and knowledge to clients to assist in the provision of their care.
• Linking students with a clinical buddy (registered nurse) supportive of students and who is prepared to oversee the care that the student provides to clients in your absence.
• Negotiating learning opportunities for students within their scope of practice and educational ability in collaboration with clinical staff.
• Checking throughout the day with the student and the RN buddy regarding the student’s activities and abilities.
• Aiming to spend at least 30-40 minutes per day with each student. During the student’s placement, it is beneficial to work with them for a block time of 2 to 4 hours where possible.
• Planning for students working the evening shift when you are not present for the whole shift or if you are starting later than the students the following day organise in collaboration with the NUM or Team Leader, a client/RN mix for the student for the evening/night. When the
student arrives for the practicum, have them prepare for the shift by undertaking the research on the client and the care required for the shift, then if they are to be present the following morning, ensure that they understand their morning responsibilities. You should meet with the evening RN buddy to ensure that they are comfortable with the allocation and the roles of the student.

- Assisting students to understand and appreciate how the theory and foundational skills they have learned can be applied in the clinical environment.
- Providing guidance in the performance of clinical skills, especially when undertaken for the first time.
- Being alert to learning opportunities in the clinical environment that will enhance the achievement of the students’ learning outcomes.
- Encouraging students to share their clinical learning objectives with staff.
- Ensuring that each student understands their role on the day and the activities they are responsible for in relation to client assessment and care.
- Assist students to embrace learning opportunities.
- Conducting a debrief session (see Appendix I CICO) with students to identify concerns and issues that need to be addressed.
- Giving students constructive feedback on their performance and information on how they can improve their performance if required.
- Encouraging students to be critical thinkers and encourage them to demonstrate clinical reasoning. Examples that can be used to facilitate and promote effective clinical reasoning are:
  - Let’s explore this.
  - Now let’s consider all the possible options/solutions/outcomes.
  - Walk me through your thinking about this.
  - Let’s consider some alternatives.
  - Great question!
  - Good try … have another go.
  - Where would we find the answer to that?
  - OK. You are on the right track. Let’s try something a little more challenging now.
  - Have you considered what could happen if …
  - That is correct in this situation for this person but what if …
  - How do you know that to be true … on what do you base your answer?
  (Adapted from Rubenfeld and Scheffer, 2006, p. 82)

**Additional Responsibilities**

- Log of hours for internship, rural and remote and the preceptored model must be signed daily by the registered nurse/supervisor/buddy.
- If a student is absent please record on WILS Online using the timesheet feature (Users Guide Appendix 4). **It is the student’s responsibility to contact you if they are absent for a day.**
- If make-up hours are required, it would be appreciated if the facilitator could endeavour to assist the student to complete these hours during their allocated placement dates in accordance with the policies and procedures of both the facility and USC. **Make-up hours should be recorded in WILS Online using the timesheet feature. If make-up hours are to be completed outside of the allocated placement these must be organised by the USC Placement Office. The student will be required to complete a ‘Completion of Hours’ form online (or hard copy) and which must signed off by their supervisor on the day/s.**

Please stress to students that all 800 clinical placement hours must be completed to meet the requirements of the nursing programs. In each individual course, students must complete the required hours of placement before a final grade can be awarded.
Clinical Assessment

A facilitator should:

- Become familiar with the Clinical Assessment using the Australian Nursing Standards Assessment Tool (ANSAT) or Australian Midwifery Standards Assessment Tool (AMSAT) and the learning outcomes to be achieved in this practicum.

- Discuss the expectations of the course and the ANSAT/AMSAT Tool with the student so as to share a common understanding.

- Understand the cues that could comprise evidence of each criteria.

- Formulate some ideas on cues that might be evidence of achievement of the outcomes/objectives and validate these with the course coordinators.

- Communicate regularly with the student both in person and via daily progress notes on WILS Online. Encourage students to view and respond to the progress notes. Ensure the course coordinator is also able to view the progress notes.

- Contact the course coordinator if there are any concerns regarding students. Refer to the Clinical Learning Flowchart under ‘Process for Students at Risk’ (page 14).

- Gather evidence of competence throughout the days before the assessment. Sources of evidence may include:
  - Observation of student performance.
  - Audit of documents such as care plans and progress notes to which the student has contributed.
  - Discussions with the student.
  - Interviewing staff the student has worked alongside.
  - Speaking with patients the student is caring for.
  - Speaking to the RN buddies who have supported the student.
  - Review of the WILS progress notes for evidence of reflection.

- Organise a time to discuss the assessment with the student.

- On the day of the assessment, ensure that the student has told their RN buddy that they will be absent for about 30 minutes (for the assessment).

- Organise a private place to conduct the assessment. This may be an office, vacant patient room or garden area where discussions will not be overheard.

When undertaking the Assessment

A facilitator should:

- Encourage the student to express how they feel they have progressed to date.

- Offer encouragement and promote confidence in the student.

- Assess the student against the e Nursing and Midwifery Board of Australia’s (NMBA) National Practice standards for the registered nurse and midwife available at: http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx. Use ANSAT or AMSAT Tool Domains and Behavioural Cues for feedback. Allow the student to self-evaluate against the evidence provided.

- If a student does not agree with any aspect, ask them to explain how their self-evaluation differs from that written.

- Advise them that they have the right to disagree and may document comments to this effect on the assessment tool. If this occurs, please discuss with the course coordinator and notify the clinical experience coordinator.
Formative Assessment

- This is usually conducted halfway through a practicum or at any time deemed necessary by the facilitator (if longer than 10 shifts).
- This provides the student with formal feedback regarding their progress to date. Aspects that they should concentrate on for the remainder of the practicum are recorded on the Assessment Tool, in progress notes or on a learning contract, if indicated by course coordinator.
- Utilise this time to offer constructive feedback and praise achievements.
- Where there are aspects that may be strengthened with time and opportunities to practice, advise the student of such and document.
- Where there are weaknesses, suggest strategies for the student to meet a higher standard. Discuss this immediately with the course coordinator as a learning contract may need to be implemented.
- Complete the online electronic Nursing Clinical Assessment Tool
- Complete the paper Midwifery Clinical Assessment Tool.

Document on WILS Online, in progress notes, that the formative assessment has been completed and any strategies that may have been discussed are recorded.
Australian Nursing Standards Assessment Tool (ANSAT) or Australian Midwifery Standards Assessment Tool (AMSAT) Flowchart

Australian Nursing Standards Assessment Tool (ANSAT)/Australian Midwifery Standards Assessment Tool (AMSAT)

ANSAT/AMSAT discussed between Student and Facilitator at the initial interview (ANSAT/AMSAT used as a feedback tool)

ANSAT/AMSAT used to assist with Student/Facilitator feedback at any time throughout placement

Facilitator records ANSAT/AMSAT tool discussion in daily progress notes
Process for Students at Risk

There will be occasions where students in the clinical environment are considered to be ‘at risk’ either as a result of performance deficits or because of personal, emotional or physical limitations. The following flow sheet and explanation provides a guide to assist if issues arise:

1. **Facilitator or Preceptor**
   - Identifies issue related to health or conduct
   - Addresses issue with student. Use the Tools to support discussion

2. **Notify Course Coordinator**

3. **Consultation as necessary with**
   - Program Coordinator
   - Clinical Experience Coordinator
   - Head of School

   - **Issues continue**
     - Or are considered of a serious nature
     - Suspend placement for counselling

   - **Issue not resolved**
     - Student removed from placement and referred to Head of School

   - **Issues considered**
     - Action plan put in place
     - Student supported

   - **Issue resolved**
     - Continue with placement
Communicating Performance Issues

- Clarify the expected standard using NMBA practice standards.
- Clearly define the behaviour/issue.
- Identify the discrepancies between the standard and observed behaviour.
- If you have any doubts/concerns/questions in regards to students’ performance on placement (however minimal), communicate immediately with the course coordinator.
- Listen to the student’s explanation and if you are concerned about any of the above issues then inform the course coordinator.
- If unresolved then contact the course coordinator who will make the decision if a learning contract is to be developed and what realistic student outcomes are to be achieved.
- Undertake regular communication with the course coordinator via progress note.
Clinical Learning Flowchart

The following processes of communication are to take place if there are any aspects that require assistance at any time during the placement, for example identification of learning needs, inability to meet NMBA practice standards.

Facilitator/Preceptor
identifies Clinical Learning issue

The Facilitator/Preceptor uses
the ANSAT/AMSAT Tool to discuss issue with student
Progress Notes used to record discussions and seek student feedback

Issues not resolved
If issue continues or is of a serious nature Facilitator/Preceptor contacts
Course Coordinator to discuss development of Learning Contract. All discussions recorded in progress notes

Issue resolved
Continue to support student
Facilitator/Preceptor records ANSAT tool assessment, discussion and agreement reached recorded in student progress notes

Issue not resolved
Learning contract developed and discussed with student. At this time placement may be suspended for remediation on campus or clinical challenge

Continue with placement

Issue not resolved
Facilitator and Course Coordinator complete the Clinical Assessment Tool in readiness for discussion with the student prior to removal from placement

Learning issues resolved
Objectives achieved

Student removed from placement
Clinical Assessment Tool completed and discussed with student
FAIL grade recorded
Reporting Relationships

Supporting student learning – establishing a Learning Contract

If a student seems unlikely to succeed in any of the seven domains, the course coordinator needs to be notified immediately. If the concerns are not resolved, a learning contract will need to be implemented, this needs to be addressed as quickly and efficiently as possible. The course coordinator will lead the implementation of this. Steps to be followed are:

- Your role in this process is to support the student to achieve specific learning outcomes relating to the contract.
- If specific clinical learning deficits are not able to be addressed during the clinical placement, then the course coordinator may recommend that the student attend the self-directed clinical practice laboratory at the university or attend for a clinical challenge to assist meeting identified learning needs.
- If the course coordinator is not available please contact the clinical experience coordinator or the program coordinator.
- Students who have a learning contract may require some extra supervision.
- Please ensure that progress notes are up to date and all the relevant paperwork is signed by both the student and yourself.
Check In and Check Out

- A clinical reflection session is student-focused time to reflect on learning experienced in the clinical environment. It is a time where students collaboratively share their knowledge and learn from others experiences. It is an expectation of USC that a joint debrief session is not required every day of the clinical practicum experience. Students and Facilitators will be using the Check In and Check Out (CICO) Process (see Appendix 1)
- The clinical reflection session venue needs to be in a room that is private (so that client data can be shared in confidence) and large enough for the group of students.
- It is suggested that a reflection session is conducted on the first day to alleviate any anxiety and respond to any questions.
- Duration of a reflection session should take no longer than 1 hour.

Safety Considerations for Students on a Rural or Remote Placement

Undertaking placement in a rural or remote setting is a very exciting time for our nursing students and we thank the host facility for the opportunity.

We have interviewed the students prior to placement and have given them a general overview of what to expect, but we would ask you to ensure that students have an orientation to the local town/district, ensuring that they are made aware of any apparent safety risks e.g. unsafe areas of town, localised political unrests, local etiquette.

A representative from USC will contact you to discuss the student’s assessment process and to assist you with any queries you may have regarding the placement.

Recommended Reading for Students and Clinical Facilitators


Appendix 1  The Check In and Check Out (CICO) Process

THE USC CICO PROCESS

ENGAGING IN TEACHING & LEARNING IN A COLLABORATIVE LEARNING SPACE

A FACTSHEET ON THE CHECK-IN AND CHECK-OUT PROCESS FOR CLINICAL PRACTICE SPACES.

The Check-in and Check-out (CICO) process supports high quality, engaging and relevant education in clinical practice spaces. The CICO process focuses on collaborative learning spaces where students engage as partners in their learning with teaching staff in clinical laboratories, simulation suites and clinical practice. The CICO elements complement the course content, skills assessed, and clinical practice within all clinical courses.

The expectations of teaching staff and students in collaborative learning spaces is informed by the USC Student Charter. The course co-ordinator and teaching staff are responsible for all aspects of a clinical course delivery. Students are expected to actively engage with the course requirements and learning resources to successfully complete a clinical course. In a collaborative learning space students are active partners with teaching staff in clinical learning activities.

Check-in (briefing/student confidence) supports activities for a student to gain feedback which:

- reinforces positive aspects of the learning experience
- encourages reflective thinking
- supports thinking to link theory to practice and research
- encourages critical thinking
- supports discussion about professional practice

The student is required to rate their confidence on four statements at the completion of each clinical practice session:

1. I can safely perform the clinical practice
2. I can identify positive examples of clinical practice role-modelling
3. I can identify feedback received that helped me achieve my learning objective/s
4. I have confidence to initiate and independently perform the clinical practice

The confidence statements support a student to acknowledge their accomplishments, learning experience and how they felt about their learning. This information finally encourages a student to answer the "take home" questions - Have I learnt what I need to know? If not, what do I still need to do?

For further information, please contact Amanda Henderson on A.Hender1@usc.edu.au.

USC Projects © This is an original project pursuant to the Australian Copyright Act 1968.
Support for the Learning and Teaching project has been provided by the Office of the Senior Deputy Vice-Chancellor.
Appendix 2  Australian Nursing Standards Assessment Tool (ANSAT)


**ANSAT 2016 – Australian Nursing Standards Assessment Tool**

<table>
<thead>
<tr>
<th>Assessment Item</th>
<th>Circle one number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Thinks critically and analyses nursing practice</td>
<td></td>
</tr>
<tr>
<td>• Complies and practices according to relevant legislation and local policy</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Uses an ethical framework to guide decision making and practice</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Demonstrates respect for individual and cultural (including Aboriginal and Torres Strait Islander) preference and differences</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Sources and critically evaluates relevant literature and research evidence to deliver quality practice</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Maintains the use of clear and accurate documentation</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>2. Engages in therapeutic and professional relationships</td>
<td></td>
</tr>
<tr>
<td>• Communicates effectively to maintain personal and professional boundaries</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Collaborates with the health care team and others to share knowledge that promotes person-centred care</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Participates as an active member of the healthcare team to achieve optimum health outcomes</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Demonstrates respect for a person’s rights and wishes and advocates on their behalf</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>3. Maintains the capability for practice</td>
<td></td>
</tr>
<tr>
<td>• Demonstrates commitment to life-long learning of self and others</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Reflects on practice and responds to feedback for continuing professional development</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Demonstrates skills in health education to enable people to make decisions and take action about their health</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Recognises and responds appropriately when own or other’s capability for practice is impaired</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Demonstrates accountability for decisions and actions appropriate to their role</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>4. Comprehensively conducts assessments</td>
<td></td>
</tr>
<tr>
<td>• Completes comprehensive and systematic assessments using appropriate and available sources</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Accurately analyses and interprets assessment data to inform practices</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>5. Develops a plan for nursing practice</td>
<td></td>
</tr>
<tr>
<td>• Collaboratively constructs a plan informed by the patient/client assessment</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Plans care in partnership with individuals/significant others/health care team to achieve expected outcomes</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>6. Provides safe, appropriate and responsive quality nursing practice</td>
<td></td>
</tr>
<tr>
<td>•野外生存 and effective care within their scope of practice to meet outcomes</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Provides effective supervision and delegates care safely within their role and scope of practice</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Recognise and responds to practice that may be below expected organisational, legal or regulatory standards</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>7. Evaluates outcomes to inform nursing practice</td>
<td></td>
</tr>
<tr>
<td>• Monitors progress toward expected goals and health outcomes</td>
<td>1 2 3 4 5 N/A</td>
</tr>
<tr>
<td>• Modifies plan according to evaluation of goals and outcomes in consultation with the health care team and others</td>
<td>1 2 3 4 5 N/A</td>
</tr>
</tbody>
</table>

**GLOBAL RATING SCALE - in your opinion as an assessor of student performance, relative to their stage of practice, the overall performance of this student in the clinical unit was:**

- Unsatisfactory
- Limited
- Satisfactory
- Good
- Excellent

**DISCUSSED:** YES NO  **ADDITIONAL PAPERWORK:** YES NO

**DATE:**

**NAME:**

**SIGNATURE:**

*complete this section ONLY if this is a summative assessment*

**Passed:** YES NO
**ASSESSOR FEEDBACK:**

1. Thinks critically and analyses nursing practice

2. Engages in therapeutic and professional relationships

3. Maintains capability for practice

4. Comprehensively conducts assessments

5. Develops a plan for nursing practice

6. Provides safe, appropriate and responsive quality nursing practice

7. Evaluates outcomes to inform nursing practice

**Signature:** ____________________________ **Date:** _______________________

**STUDENT COMMENTS:**

**Signature:** ____________________________ **Date:** _______________________

**Scoring rules:**
- Circle N/A (not assessed) ONLY if the student has not had an opportunity to demonstrate the behaviour
- If an item is not assessed it is not scored and the total ANSAT score is adjusted for the missed item
- Circle ONLY ONE number for each item
- If a score falls between numbers on the scale the higher number will be used to calculate a total
- Evaluate the student’s performance against the MINIMUM practice level expected for their level of education
THINKS CRITICALLY AND ANALYSES NURSING PRACTICE

- Complies and practices according to relevant legislation and local policy
- Follows policies and procedures of the facility/organisation (e.g. workplace health and safety / infection control policies)
- Maintains patient/client confidentiality
- Arrives fit to work
- Arrives punctually and leaves at agreed time
- Calls appropriate personnel to report intended absence
- Wears an identification badge and identifies self
- Observes uniform/dress code
- Maintains appropriate professional boundaries with patients/clients and carers
- Uses an ethical framework to guide their decision making and practice
- Understands and respects patients'/clients' rights
- Allows sufficient time to discuss care provision with patient/clients
- Refers patients/clients to a more senior staff member for consent when appropriate
- Seeks assistance to resolve situations involving moral/ethical conflict
- Applies ethical principles and reasoning in all health care activities

- Demonstrates respect for individual and cultural (including Aboriginal & Torres Strait Islander) preference and differences
- Practices sensitively in the cultural context
- Understands and respects individual and cultural diversity
- Involves family/other appropriately to ensure cultural/spiritual needs are met
- Sources and critically evaluates relevant literature and research evidence to deliver quality practice
- Locates relevant current evidence (e.g. clinical practice guidelines and systematic reviews, databases, texts)
- Clarifies understanding and application of evidence with peers or other relevant staff
- Applies evidence to clinical practice appropriately

EVALUATES, PLANS AND MANAGES NURSING PRACTICE

- Participates in quality activities when possible (e.g. assists with clinical audit, journal club)
- Shares evidence with others
- Maintains the use of clear and accurate documentation
  - Uses suitable language and avoids jargon
  - Writes legibly and accurately (e.g. correct spelling, approved abbreviations)
  - Records information according to organisational guidelines and local policy

ENGAGES IN THERAPEUTIC AND PROFESSIONAL RELATIONSHIPS

- Communicates effectively to maintain personal and professional boundaries
  - Introduces self to patient/client and other health care team members,
  - Greets others appropriately
  - Listens carefully and is sensitive to patient/client and carer views
  - Provides clear instructions in all activities
  - Uses a range of communication strategies to optimise patient/client rapport and understanding (e.g. hearing impairment, non-English speaking, cognitive impairment, consideration of non-verbal communication)
  - Communication with patient/client is conducted in a manner and environment that demonstrates consideration of confidentiality, privacy and patient/client’s sensitivities
- Collaborates with health care team and others to share knowledge that promotes person-centred care
  - Demonstrates positive and productive working relationships with colleagues
  - Uses knowledge of other health care team roles to develop collegial networks
  - Demonstrates a collaborative approach to practice
  - Identifies appropriate educational resources (including other health professionals)
  - Prioritises safety problems

MAINTAINS THE CAPABILITY FOR PRACTICE

- Participates as an active member of the healthcare team to achieve optimum health outcomes
- Collaborates with the health care team and patient/client to achieve optimal outcomes
- Contributes appropriately in team meetings
- Maintains effective communication with clinical supervisors and peers
- Works collaboratively and respectfully with support staff
- Demonstrates respect for a person's rights and wishes and advocates on their behalf
- Advocates for the patient/client when dealing with other health care teams
- Identifies and explains practices which conflict with the rights/wishes of individuals/groups
- Uses available resources in a reasonable manner
- Ensures privacy and confidentiality in the provision of care
- Demonstrates commitment to lifelong learning of self and others
- Links course learning outcomes to own identified learning needs
- Seeks support from others in identifying learning needs
- Seeks and engages a diverse range of experiences to develop professional skills and knowledge
- Supports and encourages the learning of others
- Reflects on practice and responds to feedback for continuing professional development
- Reflects on activities completed to inform practice
- Plans professional development based on reflection of own practice
- Keeps written record of professional development activities
- Incorporates formal and informal feedback from colleagues into practice
- Demonstrates skills in health education to enable people to make decisions and take action about their health
- Assists patients/clients and carers to identify reliable and accurate health information
## ANSAT 2016 Behavioural Cues

### 4. COMPREHENSIVELY CONDUCTS ASSESSMENTS
- Completes comprehensive and systematic assessments using appropriate and available sources
- Questions effectively to gain appropriate information
- Politely controls the assessment to obtain relevant information
- Responds appropriately to important patient/client cues
- Completes assessment in acceptable time
- Demonstrates sensitive and appropriate physical techniques during the assessment process
- Encourages patients/clients to provide complete information without embarrassment or hesitation

### 5. DEVELOPS A PLAN FOR NURSING PRACTICE
- Collaboratively constructs a plan informed by the patient/client assessment
  - Uses assessment data and best available evidence to construct a plan
  - Completes relevant documentation to the required standard (e.g., patient/client record, care planner and assessment, statistical information)
  - Considers organisation of planned care in relation to other procedures (e.g., pain medication, wound care, allied health therapies, other interventions)

### 6. PROVIDES SAFE, APPROPRIATE AND RESPONSIVE QUALITY NURSING PRACTICE
- Delivers safe and effective care within their scope of practice to meet outcomes
  - Performs health care interventions at appropriate and safe standard
  - Complies with workplace guidelines on patient/client handling
  - Monitors patient/client safety during assessment and care provision

### 7. EVALUATES OUTCOMES TO INFORM NURSING PRACTICE
- Monitors progress towards expected goals and health outcomes
  - Refers patient/client on to other professional/s
  - Begins discharge planning in collaboration with the health care team at the time of the initial episode of care
  - Monitors patient/client safety and outcomes during health care delivery
  - Records and communicates patient/client outcomes where appropriate

### Example of a specific cue:

- **Patient/client care is based on knowledge and clinical reasoning**
- **Refers concerns to relevant health professionals to facilitate health care decisions/delivery**
- **Provides information using a range of strategies that demonstrate consideration of patient/client needs**
- **Prepares environment for patient/client education including necessary equipment**
- **Demonstrates skill in patient/client education (e.g. modifies approach to suit patient/client age group, uses principles of adult learning)**
- **Educates the patient/client in self-evaluation**

### Additional notes:
- **Accurately analyses and interprets assessment data to inform practice**
  - Prioritises important assessment findings
  - Demonstrates application of knowledge to selection of health care strategies (e.g., compares findings to normal)
  - Seeks and interprets supplementary information, (e.g., accessing other information, medical records, test results as appropriate)
  - Structures systematic, safe and goal oriented health care accommodating any limitations imposed by patient’s/client’s health status

- **Uses resources effectively and efficiently**
  - Responds effectively to rapidly changing patient/client situations

- **Provides effective supervision and delegates safely within their role and scope of practice**
  - Accepts and delegates care according to own or other’s scope of practice
  - Seeks clarification when directions/decisions are unclear
  - Identifies areas of own or other’s practice that require direct/indirect supervision
  - Recognises unexpected outcomes and responds appropriately

- **Recognise and responds to practice that may be below expected organisational, legal or regulatory standards**
  - Identifies and responds to incidents of unsafe or unprofessional practice
  - Clarifies care delivery which may appear inappropriate
Appendix 3  Australian Midwifery Standards Assessment Tool (AMSAT)

![AMSAT - Australian Midwifery Standards Assessment Tool](image)

<table>
<thead>
<tr>
<th>Domain statement and Assessment Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Functions in accordance with legislation and common law affecting Midwifery practice</td>
</tr>
<tr>
<td>Understands and practices with reference to relevant legislation and local policy</td>
</tr>
<tr>
<td>Documentation is timely, comprehensive, legible and accurate</td>
</tr>
<tr>
<td>Obtains informed consent for all midwifery care</td>
</tr>
<tr>
<td>2) Accepts accountability and responsibility for own actions within Midwifery practice</td>
</tr>
<tr>
<td>Complies with professional expectations of behaviours based on appropriate knowledge</td>
</tr>
<tr>
<td>Practices within own midwifery scope and consults and/or refers when outside of scope</td>
</tr>
<tr>
<td>3) Communicates information to facilitate decision making by the woman</td>
</tr>
<tr>
<td>Uses language that is readily understood and free of jargon</td>
</tr>
<tr>
<td>Involves the woman in planning and decision making about her care</td>
</tr>
<tr>
<td>4) Promotes safe and effective Midwifery care</td>
</tr>
<tr>
<td>Promotes respectful woman centred care and supports continuity</td>
</tr>
<tr>
<td>5) Assesses, plans, provides and evaluates safe and effective Midwifery care</td>
</tr>
<tr>
<td>Accurately assesses the physical, social, emotional and spiritual needs of the woman</td>
</tr>
<tr>
<td>Critically analyses assessment findings and plans appropriate woman centred care</td>
</tr>
<tr>
<td>Optimises healthy outcomes for the woman and her baby through midwifery care</td>
</tr>
<tr>
<td>Effectively evaluates the care outcomes in consultation with the woman</td>
</tr>
<tr>
<td>6) Assesses, plans, provides and evaluates safe and effective Midwifery care for the woman and/or baby with complex needs</td>
</tr>
<tr>
<td>Collaborates as an effective team member while continuing to provide Midwifery care</td>
</tr>
<tr>
<td>Identifies emergency/urgent situations and initiates appropriate actions and escalation pathway</td>
</tr>
<tr>
<td>7) Advocates to protect the rights of women, families and communities in relation to maternity care</td>
</tr>
<tr>
<td>Promotes woman’s capacity to influence their own health outcomes</td>
</tr>
<tr>
<td>Participates within primary health care principles</td>
</tr>
<tr>
<td>8) Develops effective strategies to implement and support collaborative midwifery practices</td>
</tr>
<tr>
<td>Participates as an effective health care team member through professional relationships</td>
</tr>
<tr>
<td>9) Actively supports Midwifery as a public health strategy</td>
</tr>
<tr>
<td>Addresses community and public health issues for women including breast feeding</td>
</tr>
<tr>
<td>10) Ensures Midwifery practice is culturally safe</td>
</tr>
<tr>
<td>Demonstrates cultural awareness and provides culturally sensitive midwifery care</td>
</tr>
<tr>
<td>11) Bases Midwifery practices on ethical decision making</td>
</tr>
<tr>
<td>Acts ethically to ensure rights, privacy and confidentiality are maintained</td>
</tr>
<tr>
<td>Identifies personal beliefs and develops these in ways that enhance Midwifery practice</td>
</tr>
<tr>
<td>Manages personal values, beliefs and power dynamics in midwifery practice</td>
</tr>
<tr>
<td>12) Acts to enhance the professional development of self and others</td>
</tr>
<tr>
<td>Demonstrates a commitment to learning and reflects on own practice</td>
</tr>
<tr>
<td>Appropriately shares and critically analyses evidence with others</td>
</tr>
<tr>
<td>Uses research to inform midwifery practice</td>
</tr>
<tr>
<td>Uses research evidence, woman’s preference and clinical knowledge to guide midwifery practice</td>
</tr>
</tbody>
</table>

GLOBAL RATING SCALE - In your opinion relative to their stage of practice, the overall performance of this midwifery student was:
- Unsatisfactory
- Limited
- Satisfactory
- Proficient
- Excellent
### AMSAT – Australian Midwifery Standards Assessment Tool

<table>
<thead>
<tr>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>How have previous learning goals been addressed?</td>
</tr>
<tr>
<td>What was done well and how will it be retained?</td>
</tr>
<tr>
<td>What was done poorly and needs to be improved?</td>
</tr>
<tr>
<td>Plan for learning and time frames for achievement</td>
</tr>
</tbody>
</table>

**DISCUSSED:**  ☐ YES  ☐ NO  **ADDITIONAL PAPERWORK:**  ☐ YES  ☐ NO

**DATE:** __________________________

**NAME:** __________________________

**SIGNATURE:** __________________________

**Assessor’s Position**  ☐ Midwife  ☐ Clinical Facilitator  ☐ Other____________________

**Scoring Rules**
- Circle N/A (not assessed) ONLY if the student has not had an opportunity to demonstrate the behaviour
- Circle ONLY ONE number for each item
- Evaluate the student’s performance against the MINIMUM competency level expected for their level of training

**Code**
1 = Requisite behaviours and practices NOT performed [limited ability to perform requisite behaviours]
2 = Requisite behaviours and practices performed inconsistently [requiring close supervision]
3 = Requisite behaviours and practices consistently performed at a safe/satisfactory level
4 = Requisite behaviours and practices consistently performed in a proficient manner [requires little supervision]
5 = Requisite behaviours and practices consistently performed in an excellent manner [uses initiative]
N/A = not assessed. **Note: a rating 1 &/or 2 indicates that the competency statement has NOT been achieved

AMSAT – Australian Midwifery Standards Assessment Tool Behavioural Cues

Legal and professional practice
1. Functions in accordance with legislation and common law affecting Midwifery practice
- Understands and practices with reference to relevant legislation and local policy
- Follows policies and procedures of the health service (e.g. practice guidelines, workplace health and safety, and infection control)
- Demonstrates knowledge of legal frameworks
- Documentation is timely, comprehensive, legible and accurate
- Follows the legal requirements of appropriate documentation, including date, time, author and designation
- Documentation follows a logical order, is relevant and legible.

Obtains informed consent for all midwifery care
- Provides appropriate resources and time to facilitate informed consent from the woman prior to midwifery care

2. Accepts accountability and responsibility for own actions within midwifery practice
- Complies with professional expectations of behaviours based on appropriate knowledge
  - Arrives punctually, and is fit to practice
  - Advises in good time of absence from placement.
  - Organises self to provide effective care
  - Wears appropriate uniform, identification and personal protective equipment when necessary
  - Maintains professional boundaries
  - Has appropriate knowledge base for level

Practices within own midwifery scope and consults and/or refers when outside of scope
- Demonstrates awareness of own limitations.
- Recognises and actively seeks collaboration or referral with other health professionals when outside of own scope of practice
- Practices under appropriate supervision

Midwifery knowledge and practice
3. Communicates information to facilitate decision making by the woman
- Uses language that is readily understood and free of jargon
- Uses language that is appropriate and meaningful to the woman
- Uses relevant learning strategies to inform and educate the woman
- Establishes rapport with the woman and family
- Seeks feedback from the woman to ascertain her understanding

Involves the woman in planning and decision making about her care
- Actively listens to and is sensitive to the views of the woman and her family
- Facilitates the woman to make informed decisions about her care through sharing of knowledge

4. Promotes safe and effective midwifery care
- Promotes respectful woman centred care and supports continuity
- Demonstrates respectful partnership with the woman
- Defines and promotes midwifery continuity of care and its benefits
- Organises and prioritises workload for safe midwifery care

5. Assesses, plans, provides and evaluates safe and effective midwifery care
- Accurately assesses the physical, social, emotional and spiritual needs of the woman
- Uses information gathered to manage appropriate midwifery care
- Demonstrates comprehensive assessment of a woman and her baby that is sensitive to their needs

6. Assesses, plans, provides and evaluates safe and effective midwifery care for the woman and/or baby with complex needs
- Collaborates as an effective team member while continuing to provide midwifery care
- Understands and recognises complexities and co-morbidities of the perinatal & neonatal periods
- Identifies emergency/urgent situations and initiates appropriate actions and escalation pathway
- Responds effectively to rapidly changing situations
- Compares findings of complex situations to those of normal parameters and acts accordingly, initiating timely referral

- Demonstrates sound knowledge and skills to support the woman’s physical, social, emotional cultural and spiritual needs
- Effectively uses questioning to gain necessary information
- Responds to woman’s questions with knowledge and sensitivity

Critically analyses assessment data and plans appropriate women centred care
- Uses information gathered to accurately plan, prioritise and initiate midwifery care
- Interprets and acts appropriately on information collected
- Manages the environment effectively and sensitively according to the woman’s needs

Optimise healthy outcomes for the woman through midwifery care
- Demonstrate safe medication management
- Protects, promotes and supports breastfeeding
- Supports and assists with the woman’s choice of infant care

Effectively evaluates the care outcomes in consultation with the woman
- Reviews care outcomes to ensure effective midwifery care

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AMSAT – Australian Midwifery Standards Assessment Tool Behavioural Cues

Midwifery as primary health care
7. Advocates to protect the rights of the women, families and communities in relation to midwifery care
   - Promotes women’s capacity to influence their own health outcomes
   - Collaborates with the woman and her family to formulate care
   - Educates the woman in self-assessment
   - Advocates for the woman through encouragement to be an active participant in the health care of herself and her baby
   - Maintains the privacy, dignity and respect for the woman taking individual preference into consideration at all times

Participates within primary health care principles
   - Provides health promotion and illness prevention midwifery practice
   - Supports the woman’s self-determination for care

8. Develops effective strategies to implement and support collaborative midwifery practice.
   - Participates as an effective health care team member through professional relationships
   - Interacts with members of the health care team, in a collaborative and respectful way
   - Uses a variety of methods to communicate with other professionals – (e.g. written, verbal, digital)
   - Can initiate appropriate referral of a woman’s care within the health care team
   - Is aware of own limitations and communicates this responsibly

9. Actively supports midwifery as a public health strategy
   - Addresses community and public health issues for woman including breastfeeding

Advises and educates women and their families on public health initiatives (e.g. – quit smoking, recreational drugs and alcohol during pregnancy)
- Engages with community organisations relevant to perinatal and family health care

10. Ensures Midwifery is culturally safe
    - Demonstrates cultural awareness and provides culturally sensitive midwifery care
    - Recognises the specific needs of Aboriginal and Torres Strait Islander women and their families, using indigenous health workers to optimise perinatal experiences and outcomes.
    - Identifies cultural origin of the woman and her family
    - Demonstrates cultural sensitivity across a range of contexts.
    - Respects the cultural difference of individuals and groups.
    - Uses language interpreters where appropriate.
    - Facilitates strategies to address cultural specific care needs

Reflective and ethical practice
11. Bases midwifery practice on ethical decision making
    - Acts ethically to ensure rights, privacy and confidentiality are maintained
    - Apply local policy regarding privacy and confidentiality including the use of social networking and personal security
    - Practices according to ethical & professional standards (e.g. Code of Ethics, Code of Professional Conduct)

12. Identifies personal beliefs and develops these in a way that enhances midwifery practice
    - Manages personal values, beliefs and power dynamics in midwifery practice

Demonstrates respect & empathy for women and their families
- Establishes trust with women and the health care team
- Acts to eliminate occupational violence including victimisation and bullying
- Recognises and manages own attitudes and potential power imbalances

13. Acts to enhance the professional development of self and others
    - Demonstrates a commitment to learning and reflects on own practice
    - Reflects on experiences to identify learning needs to advance knowledge and practice
    - Maintains a record of learning in accordance with educational requirements.
    - Incorporates formal and informal feedback from colleagues into their practice
    - Appropriately shares and critically analyses evidence with others
    - Contributes to peer learning activities
    - Undertakes a review of the evidence when required

14. Uses research to inform midwifery practice
    - Users research evidence, woman’s preferences & clinical knowledge to guide midwifery practice
    - Locates and uses relevant current evidence to guide best practice in midwifery (e.g. – practice guidelines, systematic reviews)
    - Demonstrates evidence based midwifery practice
    - Participates in quality practice reviews as appropriate and available (e.g. – clinical audit, journal club, research, and quality improvement projects)

For more information visit:
www.amsat.com.au