



Midwifery education: midwife

A midwife is a regulated health practitioner who holds registration as a midwife with the Nursing and Midwifery Board of Australia (NMBA). To apply for registration as a midwife, the applicant must have successfully completed a program of study accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) and approved by the NMBA. In 2019, nursing and midwifery were recognised as separate professions under the *Health Practitioner Regulation National Law Act*.¹ Currently eighty four percent of midwives have dual registration as a nurse and a midwife.² ANMF supports the rights of nurses and midwives to determine whether they wish to be a nurse, a midwife, or both.

Midwives who meet the requirements of the NMBA Registration standard: Endorsement for scheduled medicines for midwives, can apply for an endorsement to prescribe scheduled medicines.³ Midwives with this endorsement must complete additional continuing professional development (CPD) requirements relevant to prescribing.⁴

Midwives must meet and comply with NMBA approved registrations standards, codes and guidelines.

It is the policy of the Australian Nursing and Midwifery Federation that:

1. All midwifery care must be provided by a midwife, or a midwifery student under the supervision and delegation of a midwife.
2. Midwives are educationally prepared to provide comprehensive maternity care in every context of midwifery practice.
3. The Australian Government must develop a comprehensive national workforce plan for midwifery, to be evaluated and reviewed regularly, to ensure there is sufficient funding and places in the university sector in all states and territories to meet the community's needs for a midwifery workforce, now and into the future.
4. Workforce planning should promote education programs which provide the scope of practice as required in rural and remote areas, in particular the double degree in nursing and midwifery and the postgraduate midwifery qualification for registered nurses.
5. Rural and remote health services should develop contemporary, sustainable models of care guided by current evidence and workforce needs. This will improve the health, wellbeing and clinical outcomes for women and babies, grow remote women's access to local midwifery services, and provide for the growing contemporary midwifery workforce.
6. Multiple tertiary education pathways approved by the NMBA and leading to registration as a midwife are supported, which include: the 12 month Graduate Diploma of Midwifery, the three year Bachelor of Midwifery and the four year Bachelor of Nursing / Bachelor of Midwifery.



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7. Entry to practice education for midwives must be undertaken within a recognised Australian university.⁵
8. Postgraduate Diploma programs for registered nurses leading to initial registration as a midwife should be no more than 12 months in duration (full time). Postgraduate programs of longer duration should be awarded at the Masters degree level.
9. Approved programs of study for midwifery should be accessible, flexible and innovative, to provide equitable and optimal access for students.
10. The principles of adult learning and the recognition of prior learning must be incorporated into midwifery education.
11. Entry to practice education programs must provide blended flexible program opportunities for Aboriginal and Torres Strait Islander midwifery students to undertake the program of study as close as possible to their communities including clinical placement opportunities within their communities as midwifery students, where appropriate.
12. Entry to practice education for midwifery must prepare students to meet the NMBA *Midwife Standards for practice*⁶ to function as a safe and competent midwife in all maternity care settings.
13. Adequate clinical education, not inclusive of simulation, must be provided to students so they can acquire the clinical experience necessary to meet the NMBA Midwife standards for practice. Staffing levels and skill mix in maternity care services providing clinical placement for students must be adequate and appropriately funded to optimise the learning experience. Supervision of midwifery students must be undertaken by suitably experienced midwives.
14. Educational curricula for midwives should include Aboriginal and Torres Strait Islander peoples health, culture, history and the social determinants of health. A culturally capable midwifery workforce is vital to ensure culturally safe services that meet the needs of Aboriginal and Torres Strait Islander peoples.
15. Educational curricula for midwives should address the provision of culturally sensitive care to people from culturally and linguistically diverse (CALD) communities to deliver nursing care that is culturally appropriate.
16. The development of core curriculum elements across disciplines must not compromise the philosophy and integrity of midwifery.
17. Universities and maternity care service providers are jointly responsible for ensuring the emotional and physical safety of the student during the course of the program. This involves, but is not limited to, ensuring adequate days off and reasonable hours of work, risk assessments of workloads and workplaces, and access to appropriate debriefing/counselling of experiences.



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18. Midwife educators must be available, with a contemporary scope of practice which meets the needs of midwifery students, newly graduated midwives and midwives new to the workplace, as well as supporting all midwives with their clinical, educational and mentoring responsibilities.
19. Midwives require support when making the transition from education to practice. This support includes transition to practice programs, orientation programs, access to clinical midwife educators, access experienced midwives as preceptors, supervisors or designated mentors of the graduate midwife's choice, and access to continuing professional development. Beginning midwives should not be expected to be placed in charge.
20. Mentorship and preceptorship training programs and debriefing with the midwife educator should be made available to midwives who undertake a preceptorship/clinical support role for student midwives.
21. Transition to practice programs should be:
 - a) available in all maternity care settings which employ midwives;
 - b) available in rural, remote and metropolitan settings, in both public and private sectors; and
 - c) funded by governments through relevant public, private and community maternity care settings.
22. Clinical placements for midwifery education, requires collaboration between the maternity care and education sectors. There should be sufficient resources to assist education providers and facilities, in which clinical midwifery education occurs, to deliver a quality learning experience.
23. Formal mechanisms to support dialogue, interaction and collaboration between the maternity care and education sectors should continue to be developed and strengthened, including joint appointments and collaboration that extends beyond the provision of education programs and clinical education. Professorial units or similar arrangements which combine academic and practice based education and research, are supported.
24. Midwifery education and midwife educator positions are supported. The midwifery education department within the health service should develop and implement strategic education plans that align with the maternity and newborn service plan and strengthen the capacity and capability of the midwifery workforce to deliver evidence-based maternity care.
25. Post registration courses for midwifery practice must be conducted by an agency* or combination of agencies that can ensure an appropriate balance of theory and practice in the student's learning experience.

*The term 'agency' includes, but is not limited to: health services, universities, professional organisations and private providers of education and training such as registered training organisations.



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26. Providers of post registration education for midwives should schedule course provision with consideration for the needs of students and employers and with a view to maximising flexibility and access.
27. Appropriate academic recognition for all post registration courses not conducted within the university sector should be available together with nationally consistent nomenclature, award levels and credit transfer arrangements.
28. The offering of scholarships by governments, employers and other maternity care providers to support post registration education for midwives, is supported. Bonding to a particular employer or agency on completion of studies as a condition for the awarding of scholarships to midwives is not supported.
29. Midwives who do not meet the NMBA *Registration Standard: Recency of practice*⁷ should have access to accessible and affordable re-entry to practice programs accredited by ANMAC and approved by the NMBA.

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References

1. Health Practitioner Regulation National Law Act 2009 which was enacted on 1 July 2010. Available at: <https://www.legislation.qld.gov.au/LEGISLTN/CURRENT/H/HealthPracRNatLaw.pdf>
2. Nursing and Midwifery Board of Australia. Nurse and Midwife - Registration Data Table - December 2018. Available at <file:///C:/Users/Anastasias/Downloads/Nursing-and-Midwifery---Registrant-Statistics---December-2018.PDF>
3. Nursing and Midwifery Board of Australia. 2017. *Registration standard: Endorsement for scheduled medicines for midwives*. Available at <https://www.nursingmidwiferyboard.gov.au/Registration-Standards/Endorsement-for-scheduled-medicines-for-midwives.aspx>
4. Nursing and Midwifery Board of Australia. 2016. *Registration Standard: Continuing professional Development*. Available at <https://www.nursingmidwiferyboard.gov.au/Registration-Standards/Continuing-professional-development.aspx><http://www.nursingmidwiferyboard.gov.au/>
5. Australian Nursing and Midwifery Accreditation Council 2014. *Midwife Accreditation Standards*. Available at https://www.anmac.org.au/sites/default/files/documents/ANMAC_Midwife_Accreditation_Standards_2014.pdf
6. Nursing and Midwifery Board of Australia 2018. *Midwife standards for practice*. Available at <https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/Midwife-standards-for-practice.aspx>
7. Nursing and Midwifery Board of Australia. 2016. *Registration standard: Recency of Practice*. Available at <http://www.nursingmidwiferyboard.gov.au/News/2016-02-01-revised-standards.aspx>

This policy is to be read in conjunction with the ANMF Position Statement Re-entry to the nursing and midwifery workforce.