

School of Health

Midwifery Clinical Placements

Program Code & Title: GD007 Graduate Diploma in Midwifery – Clinical Practice Framework

The Graduate Diploma in Midwifery program prepares Registered Nurses to become midwives. The program provides the theory and clinical skills required to practice as responsible and accountable professionals who work in partnership with women to give the necessary support and care during pregnancy, labour, birth and the postpartum period. The program is designed to meet the Nursing and Midwifery Board of Australia *Midwife standards for practice (2018)*, and on completion students will be eligible to apply for registration as a midwife with the Australian Health Practitioner Regulation Agency (AHPRA).

Program features include:

- Use of narrative pedagogy and case-based learning.
- Intensive clinical preparation including simulation learning using state of the art technology.
- Health service integrated clinical practice experiences throughout the program including a final internship to prepare for transition to practice.
- Support for continuity of care experiences through the CONNECT program.
- Health service and community experiences throughout the continuity of care experiences.
- Options for placement in rural or remote locations during Internship.

Learning activities in the placement setting

Students are to be guided by clinicians and self-identify scope depending on individual progression through all midwifery programs. If a learning opportunity arises in the clinical area students are encouraged to engage in this opportunity under direct supervision of the registered midwife even if they have not been exposed to the experience in the laboratory or clinical workshop.

Graduate Diploma in Midwifery: Program Structure 2026

Session	Course	Clinical Requirements	Pre Requisites
2	MID700 Midwifery care across the continuum 1	Completion of 120 hours clinical placement Recommended evidence of recruiting a total of 3 CoC women Recommended completion of 40 MPE experiences 1 CSAT	Enrolled in GD007
3	MID701 Introduction to the Midwifery Profession	Completion of 120 hours clinical placement, Recommended evidence of recruitment of minimum 3 CoC women Recommended completion of 60 MPE (total 100 MPE) experiences. Total of 2 CSATs	MID700
3	HLT600 Indigenous Wellbeing Foundations		
4	MID702 Care of the unwell neonate	Completion of 80 hours clinical placement, Recommended evidence of recruitment of minimum 3 CoC women Recommended completion of 40 MPE (total 180) experiences. Total of 3 CSATs	MID701
Break			
6	MID703 Midwifery care across the continuum 2	Completion of 120-hour clinical placement Recommended evidence of recruiting a total of 10 CoC women and completion of 5 CoCs Recommended completion of 60 MPE (total 260) experiences Total of 4 CSATs	MID701
7	MID704 Midwifery leadership, governance and mentorship	Completion of 80 hours clinical placement, Recommended evidence of completion of 7 CoC women Recommended completion of 40 MPE (total 260) experiences. Recommended total of 5 CSATs	MID703
Following Year			
1	MID705 Integration into the Midwifery Profession	Completion of 240 hours clinical placement, Evidence of completion of all CoC women Completion of all MPE (324). Completion of all CSATs (7)	Completion of 72 units and enrolled in GD007

All midwifery courses have clinical placement but only 3 have clinical skills intensive labs

NOTE: the requirements for a course are fully outlined in each course outline. Please refer to the course outline for specific details.

Session 2 MID700 Laboratory intensive (week 1)		Session 3 MID701 (theory course)	
<p>ANTENATAL CARE</p> <ul style="list-style-type: none"> ▪ Comprehensive AN booking interview (holistic health assessment, therapeutic and culturally appropriate communication) ▪ Planning routine antenatal care (EDD calculation, models of care) ▪ Antenatal terminology; routine screening tests (urinalysis, bloods, scans) ▪ Antenatal visit assessment including vital signs ▪ Introduction to abdominal examination & FHR auscultation (IA) ▪ Normal CTG modules (RANZCOG) ▪ Domestic violence screening, Safe Start, and EPDS ▪ Antenatal education ▪ ISBAR handover ▪ Documentation - iEMR <p>LABOUR & BIRTH / IMMEDIATE POSTNATAL CARE</p> <ul style="list-style-type: none"> ▪ Assessment and care during physiological labour and birth – maternal and fetal wellbeing. ▪ Abdominal palpation in labour; contraction assessment ▪ Assessing fetal wellbeing (including RANZCOG CTG modules) ▪ Introduction to vaginal examination ▪ Non-pharmacological comfort measures – Active labour and birth ▪ Water immersion and waterbirth ▪ Nitrous oxide administration ▪ Sterile water injections (ID) ▪ Schedule 4 and 8 medications overview ▪ Spontaneous Vaginal Birth ▪ Variations of normal (e.g., OP, breech) ▪ Placental birth (physiological and active) 	<p>Foundation of midwifery:</p> <ul style="list-style-type: none"> ▪ History of midwifery ▪ Feminism ▪ Philosophy of Midwifery ▪ Governance ▪ Contemporary maternity care provision/models of care ▪ Professional identity ▪ Reflection and reflexivity 		

- Calculating EBL
- Immediate transition and initial maternal assessment
- Immediate transition and initial newborn assessment - APGAR
- Basic neonatal resuscitation (skin-to-skin, positioning, warm, dry, stimulate, adjuncts, SaO₂)

POSTNATAL / NEWBORN CARE / BREASTFEEDING SUPPORT

- Continuity of care principles
- Maternal and neonatal observations
- Postnatal assessment and care of the mother
- Neonatal examination
- Breastfeeding support; Skin-to-skin and initiation and early feeding practices
- expressing & storing breastmilk
- Formula feeding support
- Screening and education - NNST, Vitamin K & Hep B IM, Healthy hearing, safe sleep/SIDS/SUDI
- Rhesus negative – Anti-D
- Postnatal VTE assessment; SC Enoxaparin
- Discharge planning and education
- Documentation - including iEMR
- ISBAR handover; Q-MEWTS

Session 4 MID702 (theory course)		Session 6 MID703 Laboratory intensive (week 1)	
<ul style="list-style-type: none"> ▪ Evolution of neonatal care ▪ Levels of care in neonatal units ▪ Perspectives of neonatal care for Indigenous Australians ▪ The profile of neonatal nurses and midwives globally ▪ Working in a multidisciplinary team ▪ Family-centred care in the neonatal care unit (neuroprotective) ▪ Bonding and attachment in the neonatal care unit (effects of separation) <p>ANTENATAL CARE</p> <ul style="list-style-type: none"> ▪ Linking perinatal history to findings from the neonatal physical examination (lifestyle, maternal disease, infection, medications, obesity, maternal age, substance abuse) ▪ Identifying the at-risk neonate ▪ Fetal circulation <p>LABOUR AND BIRTH</p> <ul style="list-style-type: none"> ▪ First assessment of newborn immediately after birth (normal findings and obvious defects) ▪ Theory of neonatal resuscitation at birth (preparation of equipment, common terminology and the MDT) ▪ Dealing with unsuccessful neonatal resuscitation ▪ Transition from fetal to extrauterine life ▪ APGAR Score <p>POSTNATAL / NEWBORN CARE / BREASTFEEDING SUPPORT</p> <ul style="list-style-type: none"> ▪ Head-to-toe examination of the newborn (normal and abnormal findings) ▪ Neurological examination of the newborn ▪ Neonatal classifications ▪ Growth charts assessing maturity and growth ▪ Jaundice including recognition and treatment (physiological and pathophysiological) ▪ Thermoregulation including physiology, risk factors and support 	<p>LABOUR & BIRTH</p> <ul style="list-style-type: none"> • CTG interpretation - complex • PROM (term/preterm) and EOGBSD management • IV infusions: pumps, bolus, syringe driver - Oxytocin • PV medications – induction, PPH management • Speculum Examination (including HVS) • GDM care: BGLs and insulin infusions • IOL management – including ARM, VE’s • Pre-eclampsia (PET) management • Shoulder dystocia • Breech Birth (complicated) • APH management • PPH management • Cord prolapse response • Neonatal resuscitation and Q-NEWT • SVB revision <p>POSTNATAL / NEWBORN CARE / BREASTFEEDING</p> <ul style="list-style-type: none"> • ISBAR handover and Q-MEWTS • Pre-term care (including isolette) • Newborn NG tube insertion • Newborn hypoglycaemia management 		

(term and preterm neonates)

- Respiratory conditions and support (term and preterm neonates)
- Reasons for admission to neonatal unit
- Neonatal retrieval and transport (modes of transport, equipment and stabilisation)
- Neonatal infection, maternal, neonatal and environmental factors (transmission, diagnosis, prevention, midwifery care)
- Nutrition and fluid management in the neonatal unit
- Preterm neonate's feeding limitations
- Nasogastric and orogastric feeding
- Breastmilk and the preterm neonatal (PDHM, fortification)
- Breastfeeding and expressing techniques (transition to the breast)
- Neonatal hypoglycaemia
- Metabolic conditions screened in the NBST
- Neonatal skin and skin integrity
- Neonatal pain management
- Legal and ethical principles as they apply in neonatal care
- Discharge planning from the neonatal unit
- End of life care and family grief in the neonatal unit

Session 7 MID704 (theory course)	
<ul style="list-style-type: none"> ▪ Education and adult learning principles in a maternity context ▪ Leadership and governance within a national and global context ▪ Public health and reform ▪ Communication and decision-making and accountability ▪ Mentorship, mentor and mentee roles and relationships 	<p>Session 1 MID705 Laboratory intensive (week 1)</p> <p>ANTENATAL CARE</p> <ul style="list-style-type: none"> • Venepuncture and cannulation • Interprofessional Collaborative Practice and referral of care <p>LABOUR AND BIRTH / IMMEDIATE POSTNATAL CARE</p> <ul style="list-style-type: none"> • Keeping Birth Normal • Handover ISBAR • Review VE/ARM • Review obstetric emergencies: shoulder dystocia, cord prolapse, PPH, PET • Life threatening maternal emergencies: Uterine rupture, AFE, HELLP, Eclampsia, DIC • Eclampsia • Preterm labour and birth • Epidural complications • Episiotomy • Perineal Care and repair • Neonatal resuscitation – term infant and preterm infant considerations • Maternal collapse and BLS <p>POSTNATAL / NEWBORN CARE / BREASTFEEDING SUPPORT</p> <ul style="list-style-type: none"> • Maternal sepsis • Breastfeeding challenges • Neonatal cares- Neonatal Abstinence Syndrome -scoring

Abbreviation Key

Abbreviation		Abbreviation	
AN	Antenatal	PCA	Patient Controlled Analgesia
ARM	Artificial Rupture of Membranes	PET	Pre-eclampsia
BGL	Blood Glucose Level	PPH	Post-Partum Haemorrhage
EDD	Estimated Due Date	Q-MEWT	Maternal Early Warning Tool
EPDS	Edinburgh Postnatal Depression Scale	Q-NEWT	Neonatal Early Warning Tool
FHR	Fetal Heart Rate	SC	Subcutaneous
ID	Intradermal	SD	Subdermal
IDC	Indwelling Catheter	VTE	Venous Thrombo-embolism
iEMR	Electronic Medical Record	VE	Vaginal examination
IM	Intramuscular	WIL	Work Integrated Learning
IV	Intravenous		
GDM	Gestational Diabetes Mellitus		
NNST	Newborn Bloodspot Screening Test		
PPE	Personal Protective Equipment		