

Protecting the public through excellent nursing practice



**The Code Of Practice
For Midwives In Tasmania
2003**

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This policy/standard has been adopted as part of the Nursing Code, pursuant to Section 11 of the *Nursing Act 1995*.

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SECTION 1.0

Introduction

The Code of Practice for Midwives in Tasmania (the Code) has been developed by the Nursing Board of Tasmania in accordance with Section 11 of the *Nursing Act* 1995. It is a standard of midwifery practice.

The purpose of the Code is to:

- To provide practical guidance to midwives in practice in Tasmania; and
- To inform consumers of the role and responsibilities of midwives.

The Code identifies the minimum requirements for professional midwifery practice in Tasmania. It does not give detailed professional advice on specific issues and areas of practice, nor does it provide legal advice. A person relying on the Code for this purpose does so at his or her own risk. Specific professional legal advice should be sought when in doubt.

The Code of Practice includes a glossary of words and phrases, which directly relates to the terminology used within the Code.

This document should be read in conjunction with current guidelines/policies/codes, which have been adopted by the Nursing Board of Tasmania as by-laws pursuant to Section 11 of the *Nursing Act* 1995, for example:

- Competence To Practice Policy;
- Guidelines for the Scope Of Nursing Practice;
- Guidelines In Medication Management For Registered Nurses;
- Guidelines For The Use Of Complementary Therapies As A Nursing Intervention;
- Guidelines For Nursing Documentation;
- Professional Boundaries Guidelines For Nurses In Tasmania Professional Conduct Information;
- ANC Code Of Ethics For Nurses In Australia;
- ANC Code Of Professional Conduct For Nurses In Australia;
- ACMI Competency Standards for Midwives; and
- Guidelines for the Supervision of Students in the Practice Setting.

Copies of the current by-laws are available on the Board's website www.nursingboardtas.org.au

SECTION 2.0

Sphere of Practice

Midwifery is the care of women by a midwife during pregnancy, birth and after the birth of a child. It also encompasses care of the newborn baby and other areas of women's health and family care. The midwife practices collaboratively with other healthcare professionals as necessary.

Childbirth is viewed as a normal life event, which in most instances remains within the realm of 'health' and therefore midwives practise within a primary health care model. Following completion of an accredited midwifery program, a midwife must be competent to:

- Provide childbirth and health care education for a woman and her significant others;
- Undertake all aspects of antenatal care for a woman with a normal pregnancy, and consult and refer to other healthcare professionals as required;
- Provide continuity of care and support to a woman during normal labour. Such care includes assessment of the wellbeing of the woman and her baby; the progress of labour; assisting birth; and the care of the woman, the newborn and significant others following birth;
- Provide continuity of care to a woman, her newborn and significant others during the postnatal period. Such care includes education and support in the establishment of breast feeding (or artificial feeding methods where necessary), early parenting and health education, which includes family planning advice;
- Practise in collaboration with all relevant health care professionals caring for a woman with a complicated pregnancy, providing optimum care within a multidisciplinary team;
- Provide continuity of care to a woman and significant others during complicated labour and/or birth, in collaboration with the medical practitioner and other healthcare professionals;
- Provide care to a woman and any significant others identified as having special needs;
- Provide appropriate action in emergency situations; and
- Provide care that reflects contemporary standards and evidence-based practice.

SECTION 3.0

Provisions of the Code

Each provision of the Code contains a commentary, which may be used to clarify the provision's meaning, and scope of operation.

Provision 1.0

A midwife must ensure that the well being of the woman and her baby is the primary focus of all midwifery care and services.

Commentary

- “[A midwife] must be able to give the necessary supervision, care and advice to women during pregnancy, labour and the postpartum period, to conduct deliveries on her [sic] own responsibility and to care for the newborn and the infant. This care includes preventative measures, the detection of abnormal conditions in mother and child, the procurement of medical assistance and the execution of emergency measures in the absence of medical help.”¹

Provision 2.0

A midwife must practise in partnership with the woman, respecting the woman's physical, psychological, social, cultural and spiritual needs.

Commentary

- The midwife must outline his/her responsibilities to the woman and significant others, at the commencement of the partnership.
- In planning and providing effective care, a midwife must treat the cultural values and beliefs, personal wishes and decisions of the woman, and any significant other person, with consideration and respect.
- A midwife must encourage the active participation of the woman in the planning and provision of care.
- The midwife must discuss the woman's rights and responsibilities, in the planning and provision of midwifery care and services.

¹ The definition of a midwife was adopted by the International Confederation of Midwives (ICM) and the International Federation of Gynaecologists and Obstetricians (FIGO) in 1972 and 1973 respectively and was later adopted by the World Health Organisation (WHO). This definition was amended by the ICM in 1990 and the amendment ratified by the FIGO and the WHO in 1991 and 1992 respectively.

Provision 3.0

All midwives must be responsible and accountable for their own practice.

Commentary

- A midwife must act within the sphere of midwifery practice.
- A midwife must demonstrate the required competency standards endorsed by the Nursing Board of Tasmania pursuant to Section 11 of the *Nursing Act 1995*.
- A midwife, who is also a registered nurse, must demonstrate the required competency standards endorsed by the Nursing Board of Tasmania pursuant to Section 11 of the *Nursing Act 1995*, when undertaking activities of practice as a registered nurse.
- A midwife remains accountable even when care is delegated, and will ensure the continuity of midwifery care is maintained.

Provision 4.0

A midwife employed by a health service agency must practise within the policies and procedures of the agency.

Commentary

- Where a midwife is given clinical responsibilities by a health service agency through a credentialing and appointment mechanism, there must be a documented agreement between the midwife and the agency.
- Practising within a guideline or policy of an agency, organisation or professional group does not relieve a midwife of responsibility for personal acts or omissions.

Provision 5.0***A midwife must enable the woman to make informed choices in relation to care.***

Commentary

- A midwife must inform a woman and any significant other person about the nature and purpose of that woman's care. The midwife must provide all necessary information to assist that woman to make an informed decision.
- A midwife must obtain the consent of the woman prior to undertaking any treatment or procedure.
- If complications or deviations from normal pregnancy or childbirth occur, the midwife must refer the woman and/or her baby to a medical practitioner. If the woman chooses not to accept the midwife's advice in any at-risk situation, the midwife must inform the woman of the possible consequences and further advise her of the need to refer her to a medical practitioner.
- A midwife will ensure that any advice given is documented. This documentation will include the acceptance or refusal of the woman to follow the midwife's advice.
- In the case of an emergency situation, a midwife must take appropriate emergency action until either appropriate assistance is available, and/or transfer to appropriate care is achieved.

Provision 6.0***Each midwife is responsible for maintaining their own professional competence and for assisting colleagues, new graduates and students to develop and maintain professional competence.***

Commentary

- A midwife is responsible to maintain a level of competence necessary for safe and effective practice.
- A midwife must undertake continuing education, which keeps their midwifery knowledge, skills and attitudes relevant and contemporary, and to enhance continuous improvement.
- A midwife should support colleagues, new graduates and students, as they develop and maintain competence. This can be done through mentorship, preceptorship, by acting as a role model, and by facilitating learning opportunities.
- Midwives in private practice must seek credentialing through the Australian College of Midwives Inc. (ACMI).

Provision 7.0***Each midwife will maintain adequate, accurate and contemporary records of practice.***

Commentary

- Records of practise, including documentation of care given, response to care and evaluation of care, are required under legislation and should be written according to health care agency policy.
- A midwife in private practice must ensure that such records are retained for at least 25 years.

Provision 8.0

Each midwife must adhere to legislation relevant to midwifery practice.

Commentary

- A midwife must not undertake activities they are not competent to perform, have no legal authority to perform, and for which they are not willing to be accountable.
- A midwife must obtain adequate professional indemnity insurance cover.

Provision 9.0

Each midwife has a professional responsibility to identify policies,

procedures or practices that are restrictive and/or may be detrimental to the standard of midwifery practice and care.

Commentary

- A midwife must ensure that their standard practice conforms to professional standards, so that the safety of the woman, any significant other person, and their colleagues is enhanced.
- A midwife's primary responsibility is to provide safe and appropriate midwifery services and care. Any circumstance that compromises professional standards, or any observation of questionable or unethical practice, must be made known to an appropriate person or authority. If the concern is not resolved and continues to compromise safe and appropriate care, a midwife must intervene to safeguard the woman, and notify the appropriate authority.

APPENDIX A

GLOSSARY OF TERMS

ACCOUNTABILITY

Personal responsibility for the provision of safe and competent midwifery services and care, taking into account relevant legislation, professional codes of ethics and conduct, and standards of practice and competencies.

CODE OF CONDUCT

The standards of professional conduct required of an individual.

CODE OF ETHICS

The values that an individual must apply when conducting professional practice.

CODE OF PRACTICE

The specific standard of practice required of a professional. The Code is based on the Code of Ethics and standards and sphere of practice of the profession.

COLLABORATIVE PRACTICE

Joint practice between a midwife and other healthcare professionals.

COMPETENCY

The required knowledge, attitudes and skills necessary to conduct a particular level of practice.

COMPLICATION

A health problem that falls outside the sphere of midwifery practice.

CONSENT

The common law protects each of us from an unjustified interference with our freedom of movement, or with our bodies, to which consent is not given. The failure to obtain consent to medical procedures can give rise to liability for civil wrongs of assault and/or battery, without proof of damage being necessary.

Consent may be given orally, in writing or be implied by virtue of the client's/patient's actions. For example, consent may be implied when a client/patient adopts a certain position such as extending their arm for an injection to be given. An exception to the rule is found in *emergency situations*, when the ordinary need for consent can be overridden by the need to take urgent action to save the life, or protect the well being of the affected person.

For consent to be valid the person must have the capacity to consent (i.e. they must have reached an age and be mature enough to understand the implications of the proposed treatment): the consent must be informed and given voluntarily, and it must cover the act performed. Therefore, consents that state "all treatments deemed necessary" are not valid. Certain statutes, for example the Guardianship and Administration Act 1995, provides for consent for the treatment of persons such as children and clients/patients who do not have the mental capacity to do so, by a 'person responsible'.

DUTY OF CARE

The obligation to avoid acts or omissions that foreseeably cause harm to another person.

HEALTH CARE AGENCY

Any hospital, clinic, department or organisation that provides teaching, diagnostic and restorative procedures, supportive or palliative care, and health promotion and illness prevention services.

MIDWIFE

A registered nurse who is authorised to practise midwifery pursuant to the *Nursing Act 1995*.

MIDWIFE IN PRIVATE PRACTICE

A midwife who is independently contracted by the woman to provide midwifery services and care.

MULTIDISCIPLINARY TEAM

The woman and healthcare professionals from a variety of disciplines who jointly care for the woman throughout the birthing experience.

NORMAL

In the 'antenatal' context means an uncomplicated pregnancy. In the context of 'labour' means an uncomplicated term pregnancy with single foetus and vertex presentation.

PARTNERSHIP

The relationship between the midwife and the woman that includes individual and shared responsibilities, and the sharing of information.

PROFESSIONAL STANDARDS OF PRACTICE

The acts or practices for which the midwife is accountable.

RESPONSIBILITY

The obligation of a midwife to utilise knowledge and perform at a level of skill that equals or exceeds that of a competent practitioner.

SIGNIFICANT OTHER PERSON

Someone who plays an important role in the life the woman who receives services or care from a midwife.

SPHERE OF PRACTICE

Midwifery care of a woman during the antenatal, intranatal and postnatal periods and of the newborn, and encompasses areas of women's health and family care.

WELLBEING

The state of an individual's health based on the interdependence of the physical, psychological, social, spiritual and environmental aspects of life.

WOMAN

A childbearing woman or significant other person who receives the services or care of midwife.

APPENDIX B

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