

## Internationally Qualified Midwife

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### Documentation of Continuity of Care Experiences

This Continuity of Care Experience Record is arranged to record your midwifery partnership practice with women during pregnancy, birth and into the early parenting period. Compiling information about your experiences in midwifery practice is an essential component of Continuity of Care Experience and is one of your major responsibilities. Compiling information serves as evidence for meeting the Internationally Qualified Midwife (IQM) supervised practice requirements for registration with the Nursing and Midwifery Board of Australia (National Board).

Continuity of care experience means the ongoing midwifery relationship between the IQM and the woman, from initial contact in early pregnancy through to the weeks immediately after the woman has given birth, across the interface between community and hospital settings. The intention of the continuity of care experience is to enable IQMs to experience continuity with individual women through pregnancy, labour, birth and the postnatal period, where practical, and irrespective of the carers chosen by the woman or the availability of midwifery continuity of care models.

It is expected that:

- 10 continuity of care experiences will be undertaken
- Ethical recruitment processes enable women to participate freely in the continuity of care experiences
- IQMs will usually attend at least 4 antenatal and 2 postnatal visits per woman
- At least half of the continuity of care experiences will include the women's labour and birth.
- If it is not possible to attend the birth, the IQM will make contact with the woman soon after the birth to discuss the experience
- The IQM documents the continuity of care experiences
- Between 15 – 20 hours will be accrued with each continuity of care experience
- Direct care or advice for the woman will be avoided unless the woman's primary care practitioner is present, you are under supervision and the woman has given valid consent
- The template below be reproduced for each of the continuity of care experiences.

Name of mother:

Continuity of care experience number: \_\_\_\_\_

Continuity of Care Experience Total Hours \_\_\_\_\_

Signed by IQM \_\_\_\_\_

Date \_\_\_\_\_

IQM Supervisor name \_\_\_\_\_

Signed by IQM Supervisor \_\_\_\_\_

Date \_\_\_\_\_

**Antenatal Care**

Date	Gestation period	Description of Interaction and your reflection.	Primary caregiver's name, signature & qualification	Time / duration
				<b>Total hours</b>

**Reflective Summary of Labour and Birth**

Mode of Birth \_\_\_\_\_

Present at Birth: Yes / No

Total Time Spent \_\_\_\_\_

Practitioner's Name, Signature & Qualification \_\_\_\_\_

