

Fact sheet

October 2018

Midwife standards for practice

Introduction

The Nursing and Midwifery Board of Australia (NMBA) undertakes functions as set by the Health Practitioner Regulation National Law, as in force in each state and territory (the National Law). The NMBA regulates the practice of nursing and midwifery in Australia, and one of its key roles is to protect the public. The NMBA does this by developing registration standards, professional codes, guidelines and standards for practice which together establish the requirements for the professional and safe practice of nurses and midwives in Australia.

Registration as a midwife requires you to meet the NMBA's mandatory registration standards. Midwives are required to practise within the relevant NMBA standards, codes, guidelines and frameworks.

The following questions answer common queries about the *Midwife standards for practice* (2018) (the standards), which replaced the *National competency standards for the midwife* (2006) on 1 October 2018 and are available on the [NMBA website](#).

What are the standards for?

The *Midwife standards for practice* are the core practice standards that provide the framework for midwifery practice. The standards:

- communicate to the general public the standards that can be expected of midwives
- determine the eligibility for registration of people who have completed a midwifery program of study in Australia
- determine the eligibility for registration of midwives who wish to practise in Australia but have completed courses elsewhere
- assess midwives who wish to return to work after being out of the workforce for a defined period, and
- assess midwives who need to show that they are competent to practise.

The standards are for all midwives across all areas and contexts of practice. The standards have been tested through observations of midwife practice in a range of locations and settings. They are to be read in conjunction with NMBA standards, codes and guidelines available on the NMBA website.

These standards replaced the *National competency standards for the midwife* that were first published in 2006 by the Australian Nursing and Midwifery Council (ANMC) and adopted by the NMBA in July 2010 at the commencement of the National Registration and Accreditation Scheme (the National Scheme).

The standards were developed following extensive literature and evidence reviews, gap analysis, a survey of midwives, interviews with midwives, observations of midwives in practice, and consultation with consumers and other stakeholders including education providers.

Why were the *National competency standards for the midwife* replaced with the *Midwife standards for practice*?

Since the introduction of the National Scheme in 2010, the NMBA has established a systematic process to review, consult on and develop all standards, codes and guidelines in keeping with good regulatory practice.

The development of the *Midwife standards for practice* incorporated the first review since 2006 of the *National competency standards for the midwife*.

The standards now reflect current midwifery practice in all contexts and are up to date, relevant and useful.

Why did you remove the term 'competency' from the standards?

Research suggested that confusion existed between the use of the term 'competency-based assessment' in the vocational education and training (VET) sector and use of the term 'competency' in other settings.

I am a midwife, what do I need to do now that the *Midwife standards for practice* are in effect?

You need make sure your practice is meeting the *Midwife standards for practice*. Reflecting on the standards and how they relate to your practice can count towards your mandatory continuing professional development (CPD) hours.

What are the main features of the standards?

The *Midwife standards for practice*:

- comprise seven standards that are interconnected
 - each standard has criteria that specify how the standard is demonstrated
 - the criteria are to be interpreted in the context of an individual midwives practice
 - the criteria are not exhaustive and enable rather than limit the development of an individual midwives scope of practice
- are framed within a woman-centred approach
- use the principles of midwifery continuity of care, primary health care and cultural safety
- are for all midwives across **all** areas of practice
- are designed to be read in conjunction with NMBA standards, codes and guidelines, and
- the glossary is also important to understanding how key terms are used in the standards.

I have submitted an application for registration which is currently being assessed by the Australian Health Practitioner Regulation Agency (AHPRA). Will the standards affect my application?

If you have completed an [NMBA-approved program of study](#), assessment of your application will not be affected.

I enrolled in an NMBA-approved program of study that leads to registration as a midwife before the standards changed. Will the course still be recognised after the standards are implemented?

Yes. Your program of study is still recognised if you are enrolled in an NMBA-approved program of study leading to registration as a midwife and are due to graduate after 1 October 2018.

Students will not be disadvantaged in any way by the introduction of the standards. The NMBA encourages you to discuss your individual circumstances with your education provider.

Do the standards cover what is expected of a midwife in relation to accountability, delegation and supervision?

Yes. The standards indicate the standard of practice expected of a midwife in relation to accountability, delegation and supervision. It is essential that the standards, and the definitions taken from the glossary in the standards as provided below, are read in conjunction with NMBA standards, codes and guidelines.

The following definitions relate to the use of these terms in the *Midwife standards for practice* and are taken from the *Midwife standards for practice* glossary.

Accountability means that midwives answer to the persons in their care, the NMBA, their employers and the public. Midwives are accountable for their decisions, actions, behaviours and the responsibilities that are inherent in their midwifery role. Accountability cannot be delegated. The midwife who delegates activities to be undertaken by another person remains accountable for the decision to delegate, for

monitoring the level of performance by the other person, and for evaluating the outcomes of what has been delegated.

Delegation is the relationship that exists when a midwife devolves aspects of midwifery practice to another person. Delegations are made to meet the woman and her baby's or babies' health needs. The midwife who is delegating retains accountability for the decision to delegate. The midwife is also accountable for monitoring of the communication of the delegation to the relevant persons and for the practice outcomes. Both parties share the responsibility of making the delegation decision, which includes assessment of the competence and risks. For further details see the NMBA's *National framework for the development of decision-making tools for nursing and midwifery practice*.

Supervision includes managerial supervision, professional supervision and clinically focused supervision as part of delegation. For details see the NMBA *Supervision guidelines for nursing and midwifery*.

For more information

- [Midwife standards for practice](#)
- [Audit](#) information on the NMBA website
- Visit www.nursingmidwiferyboard.gov.au under *Contact us* to lodge an online enquiry form
- For registration enquiries: 1300 419 495 (in Australia) +61 3 9275 9009 (overseas callers)

Document control

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