

**DEVELOPING A REVIEW PROCESS FOR AUSTRALIAN MIDWIVES: THE  
MIDWIFERY PRACTICE REVIEW PROJECT**

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## **ABSTRACT**

**Objective:** To develop a formal, robust and transparent process that supports and enables midwives to reflect on their own midwifery practice in relation to recognised professional standards and identify, prioritise and act upon individual professional development and learning needs for the provision of safe, high quality care to women and their families within the full scope of practice. This was part of a national project commissioned by the Australian College of Midwives and funded by the Australian Council for Safety and Quality in Health Care and is part of Continuing Professional Development program developed by the Australian College of Midwives.

**Approach:** A multi-method, staged approach with data collected through a literature review, workshop consultations, written submissions and pilot testing in order to develop the national process. Finally, a national training workshop was undertaken to train reviewers and to ensure the final process was validated and was feasible and acceptable to midwives and consumers.

**Setting:** Maternity care settings in each state and territory in Australia.

**Participants:** Midwives, other health professionals and consumers of midwifery care.

**Outcome:** The Midwifery Practice Review process was developed through research and consultation prior to being validated in practice.

**Key conclusions:** The Midwifery Practice Review process is currently being implemented and evaluated in Australia.

**Implications for practice:** The Midwifery Practice Review Project established a national validated process for assessing the ongoing competence of midwives. The resulting program helps to reinforce responsibility and accountability in the provision of quality midwifery care through safe and effective practice.

## INTRODUCTION

The Australian Council of Safety and Quality in Health Care (ACSQHC) and others have developed a range of initiatives in recent years to reduce harm to patients and improve the safety and quality of health care. These initiatives are designed to assist health care providers to ensure that care is provided only by suitably qualified professionals whose performance is maintained at an acceptable level. National standards of credentialing and compulsory Continuing Professional Development frameworks for medical practitioners are examples of these initiatives [1]. No such national systems are currently in place for midwives, who collectively care for more than 250,000 women and their families in Australia each year. While regulatory authorities in all jurisdictions share the same purpose, to protect the public, the processes used for achieving this purpose vary from one state and territory to another. Some jurisdictions require that midwives demonstrate recency of practice or state that they are competent while others do not. Even those jurisdictions that do demand recency of practice do not stipulate what that practice should be in order to demonstrate competence.

Quality and safety measures for midwives are currently largely the responsibility of employers, who use a myriad of variable standard training, credentialing, and accreditation processes in an effort to ensure their midwifery staff provide competent care. The certification of accreditation or credentialing that midwives acquire from participating in such processes is often not recognised by different employers or in different States/Territories [2]. Current systems also rely on the individual midwife to assess and prioritise their own professional development needs, without routine access to training and other activities to maintain competence and enhance knowledge and skills. These shortfalls in nationally consistent mechanisms were the impetus to develop this project.

In 2005, the Australian Council for Safety and Quality in Health Care provided funding for the Australian College of Midwives to develop a rigorous peer reviewed process for Australian midwives. The project was undertaken during

2006 and 2007 and the final Midwifery Practice Review process was launched in September 2007. The authors of this paper were employed by the Australian College of Midwives to lead the development process with wide consultation and collaboration. This paper describes the development of the Midwifery Practice Review Process highlighting the approach that was undertaken. It is hoped that understanding the approach taken to develop Midwifery Practice Review will assist the implementation of this new and exciting initiative.

## **APPROACH**

The Midwifery Practice Review project aimed to develop and test a nationally consistent, formal, robust and transparent process that supports and enables midwives to reflect on their own midwifery practice in relation to recognised professional standards and identify, prioritise and act upon individual professional development and learning needs for the provision of safe, high quality care to women and their families within the full scope of practice. A multi-method, staged approach was undertaken to develop, test and implement the Midwifery Practice Review process. These stages were to:

- Review the literature in Australia and internationally to determine what sort of similar systems exist in midwifery and in other professions;
- Develop and seek feedback on an initial draft of the Midwifery Practice Review process developed from the literature review using qualitative and quantitative data
- Pilot test the Midwifery Practice Review process with a number of midwives across Australia using observational methods and survey data
- Develop and test a National Reviewer Training program
- Finalise the Midwifery Practice Review process based on the pilot testing;
- Implement the process and make it available to all midwives in Australia.

Figure 1 presents an overview of the stages and the activities that were undertaken. The project was governed by a Project Management Committee (PMC). The PMC was composed of representatives from the Australian College of Midwives, the Australian Nursing and Midwifery Council (who represents the nursing and midwifery regulatory

authorities), Maternity Coalition (national consumer organisation), and the national industrial organisation for nurses and midwives, the Australian Nursing Federation. Ethical approval from the university where the Project Director was based was sought prior to commencement.

#### *Initial development of the Midwifery Practice Review process*

A literature review was undertaken to identify Australian and international literature regarding peer review processes. This literature review guided the development of the initial draft of the Midwifery Practice Review process. This review drew on literature and examples of similar programs for midwives from the United Kingdom (UK), New Zealand (NZ), Canada, and New South Wales (NSW) in Australia. Similar type programs for other professions including mental health and critical care nurses were also investigated. An earlier paper provides an exploration of the issues relevant to the development of the Midwifery Practice Review process including an outline of existing systems, processes and models used to review midwifery practice in Australia and elsewhere (under review). Key documents from a number of countries and organisations were also identified (Table 1).

In NSW, the establishment of a number of midwifery led models with an increased emphasis upon the utilisation of midwives in the care of low risk healthy women has led to the development of *The NSW Health Credentialling Framework* [3]. This credentialling framework provides a mechanism for midwives to demonstrate their competence and capability to practise in midwifery managed continuity of care models [4]. Governed by a mandatory Policy Directive released by NSW Health [5], the Credentialling Framework is administered by the NSW Midwives' Association and must be adhered to by all midwives working in midwifery-managed models of care.

In New Zealand, the Health Practitioners Competence Assurance Act 2003 requires the Midwifery Council to be satisfied with a midwife's competence to practise within the Midwifery Scope of Practice each time that midwife applies for an annual practising certificate [6]. The Midwifery Council of New Zealand administers a nationally

consistent professional framework for the maintenance of the competence of all midwives irrespective of their work environment. This is known as the ‘Recertification Programme’ [7]. Since 2005, all New Zealand midwives who wish to retain a practising certificate, are required “to undertake the Midwifery Council’s Recertification Programme to demonstrate their continuing competence to practise at the minimum level required for entry to the profession” [7, 8]. A face to face discussion process, known as Midwifery Standards Review is one element of the re-certification program.

The Nursing and Midwifery Council’s (NMC) standards in the United Kingdom (UK) require midwives to be competent to support women to give birth normally regardless of the setting in which they are employed. Registration with the Nursing and Midwifery Council (NMC) is a requirement for employment as a midwife in the UK. In addition to meeting the requirements of the Post-Registration Education and Practice (PREP) standard to achieve registration, each practising UK midwife must have a ‘named supervisor of midwives’ [9]. The named supervisor of midwives provides a mechanism for support and guidance and each midwife must attend at least one review of their practice and identification of training needs with their named supervisor annually.

The examples of processes that support the ongoing assessment of competence, reflection and professional development in NSW, NZ and the UK were important to explore and review in the initial development of the Midwifery Practice Review Process. These were useful in the next stage of the project which included consultation processes.

#### *Consultation using the first draft of the Midwifery Practice Review process*

A draft of what a Midwifery Practice Review might look like was developed from the literature review (Figure 2). This draft was presented to practising midwives at consultation workshops in each state and territory. In total, 217 midwives attended these workshops and provided valuable feedback (qualitative and quantitative data) about the draft (Table 2).

The Nursing and Midwifery Regulatory Authorities (NMRAs) in each state and territory were consulted at this stage. An Advisory Group meeting was also held with representation from the Australian Association of Rural Nurses, Australian Lactation Consultants Association, Australian Society of Independent Midwives, National Association of Childbirth Educators, Perinatal Society of Australia and New Zealand, Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Royal College of Nursing Australia, Rural Doctors Association of Australia, Women's Hospitals Australasia, and representation from the Chief Nursing Offices in some states.

A 21 item survey questionnaire sought to gather midwives' and Advisory Group members' feedback regarding the initial draft of the Midwifery Practice Review process. The questionnaire was divided into the following categories: demographic data, the preparation of a portfolio, the proposed content of the review process, reviewers and reviewer training, the scope of Midwifery Practice Review and the linking of Midwifery Practice Review to regulation. Surveys were distributed during workshops and were also made available electronically to midwives who could not attend workshops but expressed an interest either through telephone or email contact. In total, 136 surveys were received (Table 2). It is not possible to determine response rate as the survey was distributed widely at workshops and electronically.

The consultation phase found that the initial draft of the Midwifery Practice Review process was considered to be 'about right' with 'some fine tuning necessary'. We did not define what 'about right' meant as it was meant to be a general response. Further refinement of the Midwifery Practice Review process occurred as a consequence of the discussion stimulated at the workshops and meetings and surveys that were received. There were two main issues that were further discussed. These were the inclusion of a practical 'skills station' and evidence of examples of documentation. Both these areas were the most contentious and were ultimately removed from the process. Feedback regarding the initial draft was also provided by The Project Management Committee.

*Pilot testing with the next draft of the Midwifery Practice Review Process*

As a result of the first stage of consultation, a second draft of the Midwifery Practice Review process was developed and used in the next phase of the project which included pilot testing. The pilot testing phase was undertaken to ensure that Midwifery Practice Review met the needs of midwives and was a robust and supportive process. The pilot testing phase included an observation of *The NSW Health Credentialling Framework* [3, 5] and the conduct of two one-day workshops one in Queensland and the other in the Australian Capital Territory (ACT). The aim of these workshops was to test the process that was being proposed and to undertake this with midwives and consumers (the term consumer is used rather than ‘women’ as it is a term understood in Australia as referring to those with interest and experience in maternity care and recognises that consumers can also be men). A total of 16 midwives and six consumers participated in the pilot testing. The pilot test workshops were presented in a facilitative and interactive format and included observation of panel discussions. The feedback received from the midwives and consumers who participated was used to shape the Midwifery Practice Review process further.

Constructive and useful feedback was provided regarding the process of the training day and the materials used to assist midwives to prepare for Midwifery Practice Review. Midwives reported that it took between three hours and two weeks to prepare their portfolios for their supported practice discussion. Both midwives and consumers felt that the process of review and training was “excellent”, “inspirational” and “constructive”. Overall, the midwives who participated in the pilot testing found Midwifery Practice Review reported that it provided a valuable way of reflecting on their practice in a supportive environment. The consumers who participated said that they felt ‘honoured’ and ‘privileged’ to be involved in such a process.

After the pilot testing phase, the Midwifery Practice Review process was further refined. This involved meetings with the Project Management Committee and discussions at the national one day seminar as part of the Annual General Meeting of the Australian College of Midwives. The revised methodology for Midwifery Practice Review was also presented to a second meeting of the Advisory Group and feedback was considered and



incorporated as appropriate. During this phase of the project, the project team also worked closely with the midwives working on the development of a national Continuing Professional Development (CPD) program, to ensure that the Midwifery Practice Review program would be an integral part of the overall CPD framework

#### *National Reviewer Training on the Midwifery Practice Review Process*

The next phase of the project brought together midwives and consumers from around Australia for a national workshop. The purpose of this workshop was to train and support midwives and consumers who were interested in applying to become the first group of reviewers. Each state and territory branch of the Australian College of Midwives was asked to nominate two midwives and two consumers to attend the workshop.

The initial National Reviewer Training Workshop was held over two days at the end of November 2006. Whilst two consumers and two midwives from every state and territory were invited to attend this workshop, 22 participants representing every state and territory made up the final numbers of attendees. The workshop took a facilitative and interactive format with discussion, participant involvement, observation of role plays and participation in the Midwifery Practice Review process. Much of the two days was spent practising undertaking reviews and providing feedback to one another on the process. A second National Reviewer Training Workshop was held in June 2007 with more than 30 participants.

#### *Finalising and implementing Midwifery Practice Review Process*

A series of documents for Midwifery Practice Review, the terms of reference, position statements, policies and marketing material for the implementation and evaluation of Midwifery Practice Review were completed. The Midwifery Practice Review process designed for practicing midwives by practising midwives was launched at the 15<sup>th</sup> ACM Biennial Conference in September 2007.

## **DISCUSSION**

The Midwifery Practice Review was developed through the process of consultation and pilot testing. An outline of the final version of Midwifery Practice Review from the Midwife's Handbook is presented in Figure 2. Participation in the Midwifery Practice Review program is voluntary. The Midwifery Practice Review program focuses only on midwives directly involved in providing care to women. It is not designed for midwives in equally important roles as educators, managers, policy-makers and researchers. Midwives are encouraged to undertake Midwifery Practice Review on a three yearly basis.

Midwifery Practice Review is relevant and open to all practising midwives in Australia. It is a formal, robust and transparent process that supports and enables midwives to reflect on their own midwifery practice in relation to recognised professional standards and identify, prioritise and act upon individual professional development and learning needs for the provision of safe, high quality care to women and their families within the full scope of practice.

Midwifery Practice Review sits within and is an integral component of the Australian College of Midwives' broader CPD framework which is now known as MidPLUS. Midwives who undertake Midwifery Practice Review are automatically enrolled in the MidPLUS program if they are not already. Continuing Professional Development points are awarded for a midwife's successful completion of Midwifery Practice Review.

Certain challenges became evident during the development and pilot testing of the process. Firstly, there is a need to balance rigor of the process with being supportive and constructive. Many midwives feel anxious about the process and it is essential that the process is supportive and nurturing. Equally, it is important that the process is rigorous and has value for the midwives who undertake it.

The utility of the Midwifery Practice Review process while it remains voluntary has been questioned. Currently, Nursing and Midwifery Regulatory Authorities (NMRAs) do not mandate participation in such a process and the processes to demonstrate proof of

competence vary widely across Australia [10, 11]. In jurisdictions where there is an emphasis on declaring 'competence to practise' according to national competency standards, the uptake of Midwifery Practice Review is expected to be greater than in jurisdictions where no such impetus exists [12]. There is a role for NMRAs to require midwives to show their continuing competence to practise. Professional standards, such as the demonstration of competence, are for the protection of the public interest. The requirement for practitioners to demonstrate that they are keeping up-to-date and are competent to practise is a worldwide issue. Incorporation of the peer review processes like Midwifery Practice Review into employment contracts, position descriptions and performance appraisals will assist with greater uptake. It is likely that implementation of the Council of Australian Government's reforms to achieve national registration of health professionals by 2009 will result in more uniform requirements for demonstrating ongoing competence. Midwifery Practice Review could then become increasingly attractive to practicing midwives.

This project has a number of limitations. It was not possible to obtain the views of all Australian midwives during the development process. It is possible that only midwives who were informed and aware of the project or those who had information technology skills (that is, could use the internet) chose to participate. In addition, it is likely that only midwives who were members of the Australian College of Midwives participated in the development process. While this is acknowledged, significant efforts were made to ensure that as many midwives as possible could contribute. This included open invitations to workshops, information presented at state conferences and professional forums, information in professional newsletters, which were widely distributed, availability of an on-line survey form and an invitation for written submissions. The Advisory Group also provided an important contribution from midwifery leaders in education and practice roles across the country, and from representatives of other health professions and consumers. The Project Management Committee also ensured input from leaders in regulation and professional matters.

The size of the project was limited by the number of midwives who participated, the number of sites for consultation and pilot testing and the timeframe. It is difficult to determine whether the number of midwives and consumers who undertook pilot testing and the national training workshop is adequate; however, it was encouraging that the feedback was positive. The time frame and budget for the study also meant that it was not possible to undertake more pilot testing processes. The sample included in the pilot testing process, did, however, represent a broad range of midwives who work in maternity care in Australia in urban, regional, rural and remote settings. Each state and territory was represented and respondents identified working in a range of models of care, including public and private hospital maternity units and midwifery continuity of care schemes. These are broadly representative of the models of care options available in Australia. Despite these limitations, the process that was developed is rigorous and has been positively assessed by midwives and consumers who have undertaken it. Evaluation of the program is planned for 18 months or so following the launch of the program in September 2007.

## **CONCLUSION**

This project developed and validated an Australian Midwifery Practice Review process. This is a national process for midwives which reinforces individual midwives' responsibility and accountability in providing quality midwifery care through safe and effective work practice. The process has been incorporated into the ACM's Midwifery Practice Review program, which is available to practicing midwives across Australia. While employers will continue to need to support the ongoing competence of their midwifery staff, the Midwifery Practice Review program provides an independent, nationally consistent mechanism for midwives to reflect upon their own practice and identify priorities for maintaining and enhancing their own practice.

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**Table 1: Key documents used in initial literature search**

ACM Accreditation Process for Independent Midwives [13]
The NSW Health Credentialling Framework for Midwives [5]
The Midwifery Council of New Zealand Recertification Programme [8, 14]
UK Post-Registration Education and Practice (PREP) standard [9]
American College of Nurse Midwives: Continuing Competency Assessment Program [15]
International Board of Lactation Consultant Examiners [16]
Australian and New Zealand College of Mental Health Nurses ([17])
Credentialling for Nurse Pap Smear Providers (Victoria) [18]

**Table 2: Survey respondents and attendees at workshops- State or territory of residence**

<b>State or territory</b>	<b>Survey N (%) N=</b>	<b>Workshop N (%) N=</b>
Victoria	32	35
New South Wales	22	20
Queensland	28	44
South Australia	15	19
Western Australia	20	37
Northern Territory	2	24
Tasmania	10	19
Australian Capital Territory	7	19
<b>TOTAL</b>	<b>136</b>	<b>217</b>

**Table 3: Stated role of the survey respondents**

<b>Role of respondent</b>	
Midwife in maternity unit	109
University education	2
Independent practice	7
Other – research, hospital educator	6
Community-based midwifery	3



**Figure 1: Stages of the project and associated activities**

Stage	Activities
Review the literature	<ul style="list-style-type: none"> <li>• Literature review</li> <li>• Feedback from PMC</li> </ul>
Develop and seek feedback on an initial draft of the Midwifery Practice Review process	<ul style="list-style-type: none"> <li>• Consultation workshops in each state and territory</li> <li>• Meetings with leaders from Nursing and Midwifery Regulatory Authorities in each state and territory</li> <li>• Advisory Group meeting</li> <li>• Feedback from PMC</li> </ul>
Pilot test the Midwifery Practice Review process	<ul style="list-style-type: none"> <li>• Observation of <i>The NSW Health Credentialling Framework</i></li> <li>• One-day workshops in Queensland and the Australian Capital Territory</li> </ul>
Develop and test a National Reviewer Training program	<ul style="list-style-type: none"> <li>• An initial National Reviewer Training Workshop in November 2006.</li> <li>• A second National Reviewer Training Workshop was held in June 2007</li> </ul>
Finalise the Midwifery Practice Review process	<ul style="list-style-type: none"> <li>• Documents including Handbooks for midwives and reviewers developed and printed.</li> <li>• Information available on the ACM website</li> <li>• Integration with ACM's MidPLUS program articulated.</li> </ul>

**Figure 2: A summary of the initial draft Midwifery Practice Review process**

The draft Midwifery Practice Review process involved a number of steps:

Step 1 Prepare a portfolio

Step 2: Notify ACM

Step 3: Send in Documentation (Portfolio)

Step 4: Face to face review

- Panel Discussion (midwife and consumer)
  - Portfolio review
    - Mandatory education
    - Competencies and Practice
    - Examples of documentation
  - Reflection on practice
    - Written (from the portfolio) or verbal
- Practical skills station with a second midwife
- Immediate feedback is provided

Step 5: Professional Development and Support Plan

Step 6: Written Feedback

**Figure 3: A summary of Midwifery Practice Review from the Handbook**

Midwifery Practice Review is a **formal peer review mechanism** for demonstrating your qualifications, experience, professional standing and other relevant professional attributes as a midwife.

Midwifery Practice Review supports midwives to reflect on their practice in relation to recognised professional standards and legislative requirements to identify, prioritise and act upon individual professional development needs for the provision of safe, high quality care to women and their families within the full scope of midwifery practice.

The Midwifery Practice Review process involves three (3) components:

1. Self Assessment, Self Reflection and Preparation
2. A face to face Review Discussion
3. Assistance, guidance and support in relation to your Professional Development Plan

The Midwifery Practice Review process is designed to be facilitative, supportive and encouraging. It is not a punitive process.

It is recognised that you may have anxiety about the process; therefore you may wish to attend one of the Australian College of Midwives' Midwifery Practice Review Preparation Workshops to assist you with your preparation. More information about workshops to prepare for Midwifery Practice Review is on the College website.

If you are not happy with the Midwifery Practice Review process there is a process for handling complaints or grievances.

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