



# SA Health Capability Sets for Rural Midwives



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**“Being a rural midwife enables me to utilise all my midwifery skills and more”**



# Foreword

Midwives are uniquely placed to provide woman-centred, evidence-based and sustainable care solutions that deliver best outcomes for women and their families regardless of their geographical location.

The SA Health Capability Sets for Rural Midwives articulate the foundational requirements and skill sets that enable midwives to confidently practice to their full scope in a rural or remote setting. Aligned with the SA Health Statewide Midwifery Framework and the Rural Nursing and Midwifery Workforce Plan 2021-2026, these capability sets provide a considered and informed approach to growing capability and capacity of the midwifery workforce to respond to the many challenges facing the provision of rural maternity services.

Along with the SA Regional Nursing and Midwifery Education Framework, the SA Health Capability Sets for Rural Midwives provides a comprehensive approach to shaping the future of regional midwifery practice in South Australia.

I would like to acknowledge and thank all involved in the development and update of the SA Health Capability Sets for Rural Midwives. I further acknowledge SA Health midwives, educators and leaders working in regional South Australian maternity services for their commitment, support, insight and contribution to the development of these capability sets.

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# Contributions and acknowledgements

The SA Health Nursing and Midwifery Office acknowledge the Traditional Owners of Country throughout South Australia and recognise their continuing connection to lands, water and communities. We pay our respect to Elders past and present and extend that respect to all Aboriginal peoples today. We respect their collective knowledge, culture and heritage beliefs and commit to working together to create better health outcomes for future generations.

We honour the many Aboriginal women who have birthed on country for countless generations and recognise the importance of preserving and upholding cultural values during pregnancy, birth and transition to early parenting.

The initial SA Health Capability Sets for Rural Midwives were created in 2020. The document was updated in 2024 to ensure the skill sets were up to date with current and contemporary evidence-based midwifery practice.

Regional Local Health Networks (LHNs) value the hard work and dedication of midwives, nurses and medical staff who bring their compassion and expertise to rural women and families receiving maternity services.

Birthing sites in regional South Australia are predominantly level 3 services, however there are also two level 4 sites. These sites are geographically dispersed and spread across thousands of kilometres. The models of care offered in regional South Australia are GP led care, specialist medical care models, team midwifery and midwifery group practices working in partnership with the medical workforce. Most of the hospital wards are 'mixed units' where care for non-maternity consumers is also required.

Providing maternity services in rural and remote settings affords a wide range of opportunities for midwives at all levels and spectrums of their careers. It can present experiences where the midwife is able to draw on their breadth of knowledge in unique and sometimes challenging situations.

Preparedness and willingness to work with the clinical team on shift is imperative in a rural and regional setting. Midwives will not be asked to work outside their scope of practice but will be supported to care for consumers whom they typically may have not cared for previously. Every team member adds value to the care experience to ensure positive outcomes for women, babies and their families.

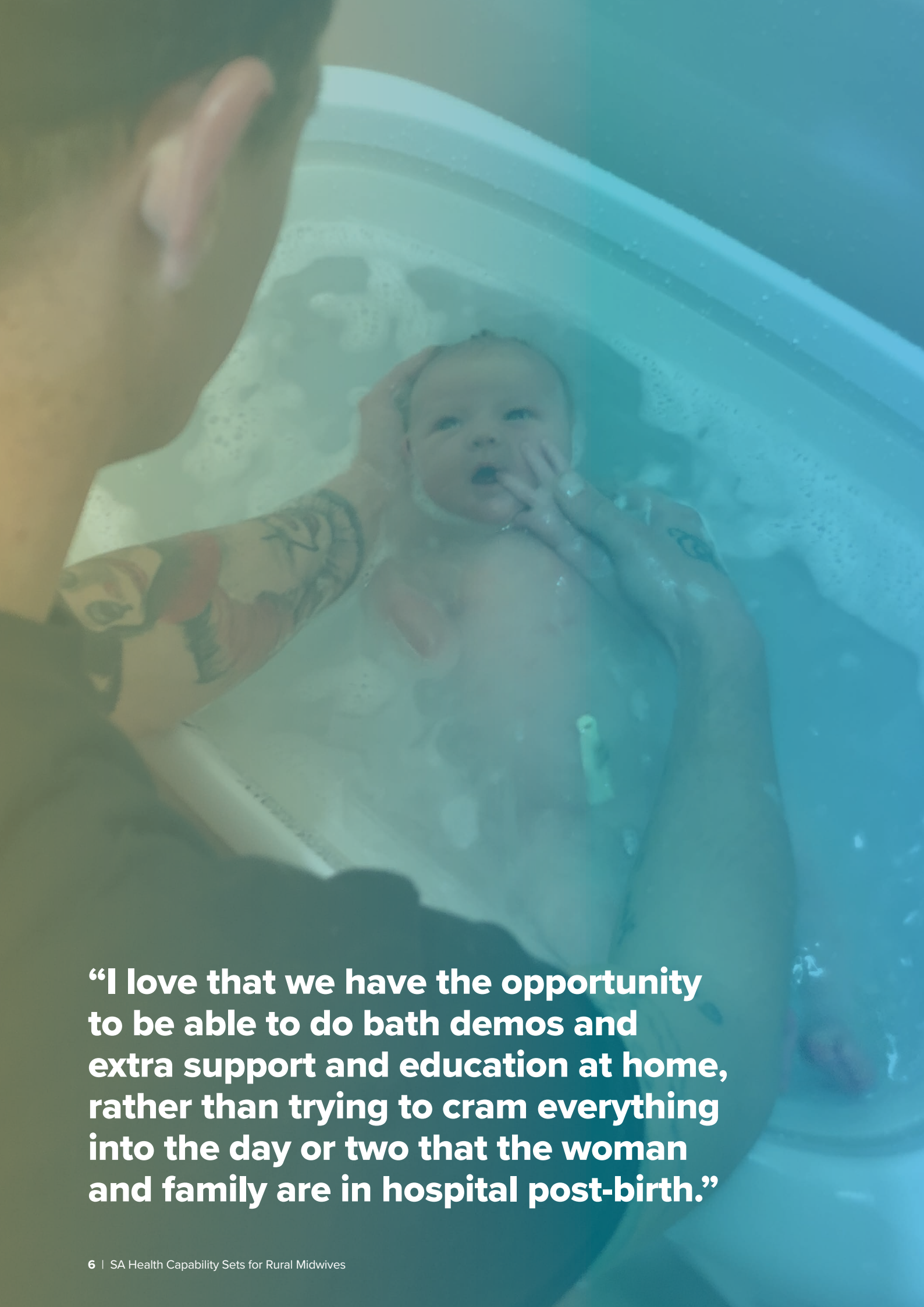
**“Work as a rural midwife means working to our full scope across the continuum of a woman’s pregnancy, including antenatal, intrapartum and postnatal care. It means having to think creatively and outside of the box, often times with limited resources and limited options for referral to specialist staff, and a high level of responsibility as autonomous practitioners making thorough patient assessment and care crucial.”**



Midwifery practice in rural and remote South Australia prides itself on its diversity of clinical expertise to ensure that care is provided to the highest standard.

In regional South Australia a midwife is not expected to 'know it all' or have every capability skill defined in this document. SA Health acknowledges that each midwife has a varying level of confidence and capability, underpinned by the diversity of their experience. What is important is to share the expectation of the breadth of work and capabilities provided by midwives working

in these settings. Some of the included capabilities are shared with metropolitan colleagues and some are more unique to a regional setting, however it is often the broad span of practice held by rural and remote midwives where the difference lies. Working rurally can be a supportive and nurturing experience. There are many opportunities to develop and grow an individual's scope of practice, build on professional clinical skills, and grow professionally and personally. Together we support each other and together we can make a difference to the women, babies and families in our care.



**“I love that we have the opportunity to be able to do bath demos and extra support and education at home, rather than trying to cram everything into the day or two that the woman and family are in hospital post-birth.”**

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# Introduction

SA Health Capability Sets for Rural Midwives are designed to clearly articulate and identify the expected requirements for each midwife working in a rural or remote setting. While experienced midwives bring transferable skills and knowledge to the workplace, they may not have had exposure to particular capabilities required for rural and remote settings. They may also not have had the opportunity to apply their current knowledge and skills to rural or remote women or neonates with specific needs. This document articulates general, antenatal, intrapartum and postnatal clinical capabilities. Within each of these capabilities there are core defined and measurable key performance indicators (expectations) for each capability, including key resources as identified throughout the document.


Identification of these capability sets was undertaken by holding focus groups with midwives working in rural and remote settings across South Australia to ascertain their perspective regarding the skills and capabilities they ideally expect their colleagues to possess to work safely and confidently in these settings. The capability sets were further validated by a midwifery clinical advisory group to refine, amend and provide further expansion where necessary. Each capability has a confidence rating that is measured using a traffic light system. This system serves as an indicator of expertise along the spectrum identified in the table below.

## Key purposes

1. Support recruitment and rural exchange strategies by providing clear expectations to staff members of the capabilities required to practice midwifery in a regional setting.
  - a. Not all confidence ratings need to be 'green' as they serve as a basis for understanding the work undertaken by midwives in rural and remote settings only.
- b. Identifying capabilities in a particular colour zone enables managers to:
  - i. understand areas of required professional development for an individual midwife
  - ii. identify staff who possess skills and knowledge in particular areas who can coach and mentor colleagues who are less experienced.
3. Complement current Professional Review and Development process as a strength-based assessment and aid identification of need for ongoing support and education.
4. Support the lifelong learning and culture building of teams and the profession by facilitating peer professional practice support. Peer professional practice support enables groups of clinicians to come together to coach and mentor each other under the guidance of a senior clinician.
5. Establish targeted professional development opportunities to meet the expectations within these documents.

**Please note** the following capability sets do not replace mandatory training requirements prescribed by a regional LHN but are complementary to these. It is essential all mandatory training requirements are up to date prior to participating in any regional exchange program.



A photograph showing a woman in a blue vest smiling and looking at a pregnant woman's belly. A young girl is also looking at the belly. The scene is set in a clinical or hospital environment. The image has a blue and yellow color overlay.

**“I was afraid, coming out to a small country town, that I would be expected to know everything and wouldn’t be supported as a new grad the way I would in a metro hospital – I couldn’t have been more wrong.”**



# Confidence ratings

RATING	DESCRIPTION
<b>1</b> <b>Aware, new and learning</b>	<ul style="list-style-type: none"> <li>&gt; I possesses minimal knowledge, understanding and experience in this area of practice.</li> <li>&gt; I would prefer supervision and/or prompting to complete the care activity with a more experienced clinician.</li> <li>&gt; I have limited problem solving abilities in relation to this/these care task(s).</li> <li>&gt; I don't have a lot of confidence with this/these skill(s).</li> </ul>
<b>2</b> <b>More familiar and becoming confident</b>	<ul style="list-style-type: none"> <li>&gt; I possess good knowledge of key aspects of this type of care.</li> <li>&gt; I still focus more so on the task but am learning to see the bigger picture.</li> <li>&gt; I require less supportive prompting to complete the care activity.</li> <li>&gt; This/these care task(s) are becoming more familiar.</li> <li>&gt; I am starting to feel more confident.</li> <li>&gt; I am starting to use critical thinking skills to help solve problems but still need support.</li> <li>&gt; I am starting to interpret what I am seeing/doing to alter care that I am providing.</li> <li>&gt; I feel that I am performing to an acceptable level in accordance with policy and guidelines.</li> </ul>
<b>3</b> <b>Confident and accomplished</b>	<ul style="list-style-type: none"> <li>&gt; My knowledge and experience around the aspects of this type of care/ task(s) is extensive.</li> <li>&gt; I am very confident and don't require any prompting to complete the care/ task(s).</li> <li>&gt; I know what to expect in a given situation and adapt and modify my responses/care seamlessly to these changes.</li> <li>&gt; I continually use my critical thinking skills to solve complex problems in regard to this type of care/task(s).</li> <li>&gt; This care is highly familiar and I could provide this care in a number of different environments.</li> <li>&gt; I am often searching for evidence to support my/our practice using a wide range of resources.</li> <li>&gt; I routinely recognise and manage complications related to this type of care/task(s).</li> <li>&gt; I am often utilised as a resource to mentor/teach/coach less experienced staff with this type of care/task(s).</li> </ul>

# Fundamental capabilities

DEMONSTRATE FUNDAMENTAL REQUIREMENTS TO WORK IN A RURAL AND/OR REMOTE MIDWIFERY SERVICE	1	2	3
Possess a driver's licence and willing to drive substantial distances.			
Confident and comfortable to work as a solo practitioner within any given rural midwifery context.			
Possess verbal and written communication skills to effectively and safely plan and handover care using the ISBAR tool.			
Possess a high level of situational awareness in relation to local services, resourcing and pre-emptive care requirements.			
Familiar with the SA Pregnancy Record (SAPR) in relation to standard maternity care, scheduling of required investigations, following up of results and addressing antenatal care gaps.			
Meet the <b>mandatory</b> requirements of the SA Health <a href="#">Perinatal Emergency Education Strategy (PEES) Policy</a> , including: <ul style="list-style-type: none"> <li>&gt; Fetal Surveillance Education Program (FSEP) (noting minimum practitioner level for regional midwives as per PEES)</li> <li>&gt; Maternal Safety Education</li> <li>&gt; Newborn Life Support (NLS)</li> <li>&gt; Newborn Advanced Life Support (NALS).</li> </ul>			
Aware of SA Health policy and clinical directives which include but are not limited to: <ul style="list-style-type: none"> <li>&gt; <a href="#">Standards for Maternal and Neonatal Care in SA 2020</a></li> <li>&gt; <a href="#">Clinical Directive Obese Obstetric Woman Management in SA 2019</a>.</li> </ul>			
Advocate and operate within the <a href="#">SA Perinatal Practice Guidelines (SAPPGs) regional protocols, guidelines and procedures</a> accessed via the Regional Health Hub.			
Understand local <a href="#">Standing Medication Orders (SMOs) and Nurse / Midwife Initiated Medications (NMIMs)</a> endorsed regionally (may be site specific).			
Understand processes and requirements for mandatory reporting as per SA Health Policies <a href="#">Mandatory Reporting of Suspicion that a Child or Young Person is or may be at Risk</a> and <a href="#">Child Safe Environments (Child Protection)</a> .			
Aware of local breastfeeding supports available such as the <a href="#">Australian Breastfeeding Association</a> .			
Aware of Baby Friendly Hospital Initiative (BFHI) principles as per <a href="#">SA Health Breastfeeding Policy Directive</a> .			
Understand the <a href="#">ACM National Midwifery Guidelines for Consultation and Referral</a> and implications for care including: <ul style="list-style-type: none"> <li>&gt; aware of local escalation processes</li> <li>&gt; able to enact rapid referral pathways to alternative or collaborative care providers</li> <li>&gt; aware of local on-call rosters and preferred contact methods</li> <li>&gt; knowledge of retrieval process as per SAPPG <a href="#">Perinatal Advice and Emergency Transport</a>.</li> </ul>			

DEMONSTRATE FUNDAMENTAL REQUIREMENTS TO WORK IN A RURAL AND/OR REMOTE MIDWIFERY SERVICE	1	2	3
Prepared and willing to support the clinical team on shift, including: <ul style="list-style-type: none"> <li>&gt; understanding general tasks may need to be undertaken (e.g. emptying bins, cleaning instruments)</li> <li>&gt; providing general support to the care of non-maternity in-patients.</li> </ul>			
Liaise and prepare the woman and relevant stakeholders for transfer to tertiary care setting as required following local procedures and SAPPG <a href="#">Perinatal Advice and Emergency Transport</a> .			
Aware of i-STAT especially in sites with no pathology service on site.			
Aware of Integrated Point of Care Clinical Systems (iPOCCS).			
Proficient in peripheral cannulation.			
Proficient in venepuncture.			
Completion of EMR training if working at EMR-enabled sites.			
Aware of local policies regarding working away from a fixed base or working alone if performing community visits. <ul style="list-style-type: none"> <li>&gt; <a href="#">SA Health Remote or Isolated Work Safety Policy Guideline</a>.</li> <li>&gt; <a href="#">Regional LHNs Remote and Isolated Work Procedure</a>.</li> </ul> Completing <a href="#">Remote and Isolated Work Safety Checklist</a> as per policy.			

# Capability set for

## antenatal care

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE ANTENATAL CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<p>Possess thorough assessment skills in relation to antenatal care and screening, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; history taking</li> <li>&gt; observation</li> <li>&gt; auscultation of fetal heart</li> <li>&gt; abdominal palpation</li> <li>&gt; schedule of investigations as per SAPPG <a href="#">Antenatal Care: Routine Care in Normal Pregnancy</a>.</li> </ul>			
<p>Understand the Centre of Perinatal Excellence (COPE) guideline <a href="#">Mental Health Care in the Perinatal Period: Australian Clinical Practice Guideline</a> including access to iCOPE digital screening.</p> <p>Understand the SAPPG <a href="#">Anxiety and Depression in the Perinatal Period</a>, including administering Edinburgh Postnatal Depression Scale (EPDS) and Antenatal Risk Questionnaire (ANRQ) as indicated.</p>			
<p>Perform cardiocography and interpret findings, refer as necessary and pre-empt care requirements as per SAPPG <a href="#">Fetal Surveillance (Cardiocography)</a>.</p>			
<p>Aware of <a href="#">Anti-D Prophylaxis Clinical Guideline</a>.</p>			
<p>Manage threatened premature labour and premature rupture of membranes as per SA PPG <a href="#">Preterm Labour and Birth: Prevention, diagnosis and management</a>.</p>			
<p>Proficient in speculum skills, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; cervical assessment</li> <li>&gt; vaginal fluid assessment, including collection for ferning assessment</li> <li>&gt; perform/assist with ruptured membranes assessment</li> <li>&gt; perform/assist with fetal fibronectin (fFN) collection and interpretation of results</li> <li>&gt; collection of high vaginal swabs (HVS) or low vaginal swabs (LVS) and awareness of self-collection techniques and consumer education.</li> </ul>			
<p>Understand management of early pregnancy complications as per SAPPG <a href="#">Bleeding in Early Pregnancy Ectopic Pregnancy, Miscarriage &amp; PUL</a>.</p>			
<p>Perform fetal ultrasound to determine position to confirm or validate physical assessment findings.</p>			
<p>Understand antenatal investigations and reviewing results, including:</p> <ul style="list-style-type: none"> <li>&gt; following up all investigations</li> <li>&gt; understanding of normal ranges during pregnancy</li> <li>&gt; recommending appropriate management</li> <li>&gt; communicating with consumer and medical and/or midwifery care providers in a timely manner.</li> </ul>			

**POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE ANTENATAL CARE IN A RURAL AND/OR REMOTE CONTEXT**

1

2

3

Understand and apply pregnancy immunisation schedules with knowledge of SAPPG [Vaccines Recommended in Pregnancy](#).

Aware of and ability to work within the [Obese Obstetric Woman Management in South Australia Clinical Directive](#).

Aware of and ability to work within the SAPPG [Anaemia and Iron Infusion \(Perinatal\)](#).

Aware of and ability to work within the SAPPG [Decreased Fetal Movements](#).



# Capability set for intrapartum care

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE INTRAPARTUM CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<p>Demonstrate proficiency and confidence to provide a woman-centred labour and birth experience utilising the SAPPG <a href="#">Labour and Birth: Routine care in normal labour and birth</a>.</p>			
<p>Provide early labour and active labour care, including:</p> <ul style="list-style-type: none"> <li>&gt; maternal history taking</li> <li>&gt; maternal observations</li> <li>&gt; abdominal palpation</li> <li>&gt; intermittent and/or continuous auscultation of fetal heart rate as required</li> <li>&gt; vaginal examination</li> <li>&gt; body mass index (BMI) assessment</li> <li>&gt; education of woman and her support people</li> <li>&gt; obtaining informed consent</li> <li>&gt; using best practice recommendations for labour and birth care.</li> </ul>			
<p>Understand Induction of Labour (IOL) techniques and competence in the management of IOL as per SAPPG <a href="#">Induction and Augmentation of Labour</a>, including:</p> <ul style="list-style-type: none"> <li>&gt; balloon catheter</li> <li>&gt; prostaglandin (pessary, gel)</li> <li>&gt; artificial rupture of membranes (ARM)</li> <li>&gt; intravenous (IV) oxytocin</li> <li>&gt; management of hyperstimulation.</li> </ul>			
<p>Proficient in quality use of antibiotics when indicated as per the SA PPG <a href="#">Antibiotics in the Peripartum Period</a>, including:</p> <ul style="list-style-type: none"> <li>&gt; group B streptococcus (Intrapartum prophylaxis)</li> <li>&gt; caesarean section</li> <li>&gt; manual removal of placenta</li> <li>&gt; third or fourth degree perineal tears</li> <li>&gt; preterm prelabour rupture of membranes (PPROM)</li> <li>&gt; prelabour rupture of membranes <math>\geq</math> 37 weeks (PROM)</li> <li>&gt; clinical suspicion of chorioamnionitis.</li> </ul>			



POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE INTRAPARTUM CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<p>Proficient in pain assessment and management, including:</p> <ul style="list-style-type: none"> <li>&gt; analgesia and pain management techniques for early labour, labour and birth</li> <li>&gt; pharmacological and non-pharmacological pain relief options for early labour, labour and birth, such as: <ul style="list-style-type: none"> <li>– positioning</li> <li>– warm water</li> <li>– Transcutaneous Electrical Nerve Stimulation (TENS)</li> <li>– sterile water injections</li> <li>– nitrous oxide</li> <li>– opioid analgesia</li> <li>– epidural analgesia.</li> </ul> </li> </ul> <p>Aware of the SA PPG <a href="#">Analgesia for Labour and Birth (Pharmacological)</a>.</p>			
<p>Proficient in fetal surveillance, including:</p> <ul style="list-style-type: none"> <li>&gt; intermittent auscultation</li> <li>&gt; cardiotocography competence as per SAPPG <a href="#">Fetal Surveillance (Cardiotocography)</a> and the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) <a href="#">Intrapartum Fetal Surveillance Clinical Guideline</a>.</li> </ul>			
<p>Understand intrapartum bladder management in labour as per SA PPG <a href="#">Bladder Management for Intrapartum and Postnatal Women</a>.</p>			
<p>Manage obstetric emergencies, including:</p> <ul style="list-style-type: none"> <li>&gt; understand and delegate roles in an emergency</li> <li>&gt; clear communication, teamwork and situational awareness</li> <li>&gt; local orientation to possible emergency scenarios (local obstetric emergency management education participation is recommended if a session is scheduled, identifying differences and nuances in rural settings).</li> </ul> <p><b>Early call to an obstetric medical practitioner is recommended for all emergency management.</b></p> <ul style="list-style-type: none"> <li>&gt; Recognise and manage preterm labour. <ul style="list-style-type: none"> <li>– SAPPG <a href="#">Preterm Labour &amp; Birth: Prevention, Diagnosis and Management</a>.</li> <li>– Preterm Rupture of Membranes see SAPPG <a href="#">Preterm Prelabour Rupture of the Membranes</a>.</li> <li>– Magnesium sulphate (MgSO<sub>4</sub>) for neuroprotection see SAPPG <a href="#">Magnesium Sulphate for the Neuroprotection of the Fetus in Women at Risk of Preterm Birth</a>.</li> <li>– Seek early advice and prepare to transfer as per SAPPG <a href="#">Perinatal Advice and Emergency Transport</a> if &lt;37 weeks level 3 birthing site and &lt;34 weeks level 4 birthing site.</li> </ul> </li> <li>&gt; Manage hypertension in pregnancy as per the SAPPG <a href="#">Hypertensive Disorders in Pregnancy</a>, including: <ul style="list-style-type: none"> <li>– gestational hypertension</li> <li>– pre-eclampsia</li> <li>– severe pre-eclampsia</li> <li>– hypertension</li> <li>– chronic hypertension</li> <li>– superimposed pre-eclampsia due to chronic hypertension.</li> </ul> </li> </ul>			

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE INTRAPARTUM CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<ul style="list-style-type: none"> <li>&gt; Manage primary and secondary postpartum haemorrhage as per SAPPG <a href="#">Postpartum Haemorrhage</a> and RANZCOG <a href="#">Clinical Guidance Statement Management of Postpartum Haemorrhage (PPH)</a>, including:               <ul style="list-style-type: none"> <li>– insertion of tamponade (Bakri) balloon</li> <li>– bimanual compression.</li> </ul> </li> <li>&gt; Manage shoulder dystocia as per SAPPG <a href="#">Shoulder Dystocia</a>.</li> <li>&gt; Manage antepartum haemorrhage as per SAPPG <a href="#">Antepartum haemorrhage (including Uterine Rupture)</a>.</li> <li>&gt; Recognise and manage placental abruption emergency (call Category 1 caesarean section) SAPPG <a href="#">Antepartum Haemorrhage</a>, including:               <ul style="list-style-type: none"> <li>– placenta praevia</li> <li>– vasa praevia.</li> </ul> </li> <li>&gt; Manage cord prolapse as per SAPPG <a href="#">Cord Presentation and Prolapse</a>.</li> <li>&gt; Aware of breech presentation and management as per SAPPG <a href="#">Breech Presentation</a>.</li> <li>&gt; Manage maternal collapse as per SAPPG <a href="#">Collapse (maternal)</a>, including:               <ul style="list-style-type: none"> <li>– understand shockable and non-shockable rhythms</li> <li>– understand administration of medication in a cardiac arrest.</li> </ul> </li> <li>&gt; Familiar with Category 1 Caesarean Section Criteria as per <a href="#">Category One Caesarean Section Management Standards Clinical Directive</a>.</li> <li>&gt; Ability to prepare a woman for caesarean section, both emergency and elective with understanding of local protocols for theatre.</li> <li>&gt; Understand categories and booking to birth interval for site as per SAPPG <a href="#">Caesarean Section</a>.</li> <li>&gt; Understand use of fetal pillow.</li> </ul>			
Assist with fetal scalp blood sampling in labour as per the SAPPG <a href="#">Fetal Acid Base Balance Assessment</a> .			
Proficient in cord blood gas collection as per SAPPG <a href="#">Fetal Acid Base Balance Assessment</a> .			
Proficient in cord blood collection for all births and store until discharge or send for testing if mother Rhesus (Rh) negative as per Regional LHNs policy <a href="#">Maternity Rh (D) Immunoglobulin – Anti D Administration</a> .			
Understand perineal care and management. See SAPPGs <a href="#">Perineal Care and Repair</a> and <a href="#">Third and Fourth Degree Tear Management</a> . <i>Perineal suturing is not a prerequisite however is desirable.</i>			
Stabilise the woman and/or newborn in preparation for metropolitan transfer with medical, nursing, midwifery support and guidance including awareness of <a href="#">regional policies</a> .			
Manage the woman with diabetic mellitus and gestational diabetes as per SA PPG <a href="#">Diabetes Mellitus and Gestational Diabetes</a> .			
Aware of substance use in pregnancy and management as per SAPPG <a href="#">Substance Use in Pregnancy</a> .			
<p><b>Desirable</b></p> <p>Accredited to facilitate water birth as per SAPPG <a href="#">Labour and Birth in Water Clinical Directive</a>. <i>Many regional birthing sites are offering water immersion for first stage of labour and/or birth in water. An accredited midwife would support upskilling and accreditation of rural midwives.</i></p>			



# Capability set for

## postnatal care

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE POSTNATAL CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<p>Provide comprehensive standard post-natal care of the mother; as per SAPPG <a href="#">Postnatal care: Routine care of the well woman and neonate</a> including:</p> <ul style="list-style-type: none"> <li>&gt; fundus and vaginal loss checks</li> <li>&gt; nutritional requirements for mother especially if breastfeeding</li> <li>&gt; examination of placenta, send for testing if required or storage of placenta in designated fridge for seven days, bagged and labelled as per local practice</li> <li>&gt; SA Health <a href="#">Management of the Release of a Placenta for Private Use Clinical Directive</a> if family wishes to take home placenta</li> <li>&gt; postnatal bladder care as per SAPPG <a href="#">Bladder Management for Intrapartum and Postnatal Women</a></li> <li>&gt; provide evidence-based advice regarding breast and infant feeding, including breast and nipple care</li> <li>&gt; wound care requirements (such as perineal trauma and/or caesarean section wounds)</li> <li>&gt; care of and follow up of the mother with gestational diabetes</li> <li>&gt; Rh status follow up as indicated as per SAPPG <a href="#">Anti-D Prophylaxis</a></li> <li>&gt; emotional support and assessment in line with SAPPG <a href="#">Postnatal care: Routine care of the well woman and neonate</a> and COPE guideline <a href="#">Mental Health Care in the Perinatal Period: Australian Clinical Practice Guideline</a>.</li> </ul>			
<p>Ability to screen, assess and initiate local referral pathways in relation to mental health concerns as per SAPPG <a href="#">Anxiety and Depression in the Perinatal Period</a>, including awareness of online, telephone and local community supports.</p>			
<p>Ability to provide support to women after traumatic birth as per SAPPG <a href="#">Psychological Distress after a traumatic birth experience</a>.</p>			
<p>Able to support women experiencing perinatal loss as per SAPPG <a href="#">Perinatal Loss</a> and awareness of local resources and photographers etc.</p>			
<p>Provide education to mother and partner including but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; normal postnatal expectations, including: <ul style="list-style-type: none"> <li>– general wellbeing</li> <li>– diet, fluids, rest</li> <li>– vaginal loss</li> <li>– breast changes</li> <li>– perineum/wound care.</li> </ul> </li> <li>&gt; continence support available (see <a href="#">Continence Australia Pregnancy and Childbirth</a>)</li> <li>&gt; contraception and Sexual Health (see <a href="#">SHINE SA</a>).</li> </ul>			
<p>Understand data management and pregnancy outcome reporting (via <a href="#">Orchids</a>).</p>			

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE POSTNATAL CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
Ability to confidently undertake a comprehensive examination of a newborn.			
Have awareness of <a href="#">Regional SA Neonatal Protocols</a> available via the <a href="#">Regional Health Hub</a> .			
<p>Ability to stabilise the compromised neonate and provide supportive care, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; taking capillary blood</li> <li>&gt; monitoring blood glucose levels</li> <li>&gt; managing newborn hypoglycaemia as per SAPPG <a href="#">Neonatal Hypoglycaemia</a></li> <li>&gt; managing oxygen requirements including: <ul style="list-style-type: none"> <li>– high flow oxygen</li> <li>– continuous positive airway pressure (CPAP)</li> <li>– cot oxygen.</li> </ul> </li> <li>&gt; working in Level 4 site with designated nursery and paediatrician</li> <li>&gt; working in Level 3 where stabilisation is required prior to transfer</li> <li>&gt; caring for premature or ex-premature babies returning on oxygen therapy from metropolitan centres prior to discharge home</li> <li>&gt; inserting nasogastric tubes</li> <li>&gt; undertaking septic screens in partnership with paediatrician or designated medical officer</li> <li>&gt; administering antibiotics as per <a href="#">Neonatal Medication Guidelines</a>.</li> </ul>			
<p>Have sound assessment skills for newborn as per SAPPG <a href="#">Postnatal Care: Routine care of the well woman and neonate</a>, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; comprehensive standard post-natal care of the baby</li> <li>&gt; weight and measurements</li> <li>&gt; vitamin K</li> <li>&gt; Neonatal Screening Test (NST)</li> <li>&gt; hepatitis B vaccination</li> <li>&gt; hearing screening.</li> </ul>			

POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE POSTNATAL CARE IN A RURAL AND/OR REMOTE CONTEXT	1	2	3
<p>Provide education to mother and partner, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; nutritional requirements for newborn</li> <li>&gt; breastfeeding support, advice and guidance</li> <li>&gt; preparation, expectations and volumes of formula (where necessary)</li> <li>&gt; expected weight gain and variations for babies</li> <li>&gt; growth spurts (see <a href="#">ABA Fussy periods</a>)</li> <li>&gt; monitoring/plotting newborn growth and providing education on normal milestones</li> <li>&gt; settling techniques</li> <li>&gt; expectations for wet nappies and normal newborn bowel activity, as well as nappy care</li> <li>&gt; bathing</li> <li>&gt; cord care</li> <li>&gt; eye care</li> <li>&gt; baby massage</li> <li>&gt; blue book</li> <li>&gt; care in hot and cold weather</li> <li>&gt; safety requirements for safe transport with baby capsule or car seat</li> <li>&gt; awareness of Sudden Unexplained Death in Infancy (SUDI) and safe sleeping as per the <a href="#">South Australian Safe Infant Sleeping Standards Policy Directive</a></li> <li>&gt; smoking cessation supports for woman and/or her support people</li> <li>&gt; resources such as <a href="#">Raising Children Network</a> and <a href="#">Australian Breastfeeding Association</a></li> <li>&gt; emotional support resources for parents, including: <ul style="list-style-type: none"> <li>– <a href="#">Cope - New parents: adjusting to the changes and challenges in the first year</a></li> <li>– <a href="#">PANDA</a></li> <li>– <a href="#">Beyond Blue - Caring for a baby and mental health (birth to 12 months)</a>.</li> </ul> </li> </ul>			
<p>Proficient in administering medications, including to neonates as per <a href="#">Neonatal Medication Guidelines</a>.</p>			
<p>Manage jaundice as per <a href="#">Neonatal Jaundice Guidelines</a> and <a href="#">Regional SA Neonatal Protocols</a>, including, but not limited to:</p> <ul style="list-style-type: none"> <li>&gt; assessment of jaundice (visual, transcutaneous bilirubin (TcB), blood sampling)</li> <li>&gt; acceptable jaundice levels</li> <li>&gt; commencement and management of phototherapy</li> <li>&gt; use of phototherapy equipment (including Bili cocoons, Bili blankets, overhead lights).</li> </ul>			
<p>Understand and apply immunisation schedules for neonates and infants.</p>			

**POSSESS SOUND CLINICAL CAPABILITIES TO UNDERTAKE POSTNATAL CARE IN A RURAL AND/OR REMOTE CONTEXT**

1	2	3

Provide ongoing supportive care for babies with care requirements, including, but not limited to:

- > slow weight gain (monitoring/plotting newborn growth and providing education on normal milestones)
- > rashes
- > oral assessments
- > complex breastfeeding/feeding issues
- > settling techniques.

Knowledge regarding follow up care and local referral pathways for care, including:

- > postnatal midwifery services located in the community
- > postnatal midwifery visiting service offered as per local hospital policy
- > local Child and Family Health Service (CaFHS) referral pathway
- > support groups
- > local general practitioner (GP) services and referral.

Provide discharge information within **local context** and coordinate discharge care and required appointments in local community.



For more information

**Nursing and Midwifery Office**  
**Department for Health and Wellbeing**  
**11 Hindmarsh Square**  
**Adelaide SA 5000**

[www.sahealth.sa.gov.au/NursingandMidwifery](http://www.sahealth.sa.gov.au/NursingandMidwifery)

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