SCOPE OF PRACTICE for Midwives in Australia
ACM SCOPE OF PRACTICE FOR MIDWIVES IN AUSTRALIA

This statement applies to all midwives whatever their practice setting or professional context, including clinical practice, education, research or professional leadership or management.

DEFINITION

**Scope of practice** is defined as roles, functions, responsibilities and activities that:

- a registered midwife is educated and competent to carry out\(^1\);
- meet legislative requirements, professional standards, and local or organisational policy;
- are accepted as contemporary midwifery practice by the profession;
- meet women’s and infants’ health needs and enhances their health outcomes\(^2\);
- aim to provide evidence-informed care; and
- are collaborative through consultation and partnership with the woman and other health care professionals\(^3\).

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INTERNATIONAL CONFEDERATION OF MIDWIVES (ICM) DEFINITION

The scope of practice for midwives in Australia is underpinned by the International Confederation of Midwives (ICM) International Definition of a Midwife, which is endorsed by the Australian College of Midwives (ACM):

‘A midwife is a person who has successfully completed a midwifery education programme that is recognised in the country where it is located and that is based on the ICM Essential Competencies for Basic Midwifery Practice and the framework of the ICM Global Standards for Midwifery Education; who has acquired the requisite qualifications to be registered and/or legally licensed to practice midwifery and use the title ‘midwife’; and who demonstrates competency in the practice of midwifery.

Scope of Practice:

The midwife is recognised as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labour and the postpartum period, to conduct births on the midwife’s own responsibility and to provide care for the newborn and the infant. This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the accessing of medical care or other appropriate assistance and the carrying out of emergency measures.

The midwife has an important task in health counselling and education, not only for the woman, but also within the family and the community. This work should involve antenatal education and preparation for parenthood and may extend to women’s health, sexual or reproductive health and child care.

A midwife may practise in any setting including the home, community, hospitals, clinics or health units.

The Midwife in Australia carries out roles, functions, responsibilities and activities which a registered midwife

APPLICATION IN AUSTRALIA

is educated, competent and has authority to perform*, in line with Australian national, jurisdictional and local legislation, regulatory registration standards and requirements, professional guidelines and policies.

These include, but are not limited to:

- Australian national and jurisdictional legislation including the Health Practitioner Regulation National Law Act 2009 (Queensland)8 and subsequent amendments;
- Nursing and Midwifery Board of Australia (NMBA) regulatory documents9;
- Australian College of Midwives' guidelines10 and position statements11, including the National Midwifery Guidelines for Consultation and Referral12;
- other relevant national, jurisdictional and local professional policies and guidelines.

When deciding if a role, function, responsibility or activity is within their scope of practice, the midwife must comply with the NMBA's Decision-Making Framework13; that is, a midwife may carry out a particular activity if they:

- have received appropriate education and experience to carry out the activity safely;
- have been deemed to be competent by a supervisor;
- are confident in their ability to carry out the activity; and
- have appropriate authorisation, for example, from an employer.

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A MIDWIFE IN AUSTRALIA:

- is authorised to provide maternity care on their own responsibility to women with non-complicated pregnancy, labour and birth and during the postnatal period up to six weeks after their baby is born.
- provides care that is holistic, culturally safe, respectful and compassionate, and acknowledges the unique needs of the woman\(^{14}\).
- provides evidence-informed information to support the woman’s decision making across the childbirth continuum. This support may extend to the woman’s sexual and reproductive health, as well as newborn and infant health.
- uses clinical reasoning and exercises clinical judgment to monitor and detect complications that may arise in the woman and her baby.
- may practise in any setting including home, birthing units, community health centres and hospitals, in urban, rural and remote geographical locations.
- regardless of setting, works in collaboration and partnership with the woman and other health professionals in a dynamic process of facilitating communication, trust and pathways to ensure the provision of safe, woman-centred care\(^{15}\), and promotes normal physiological pregnancy and birth, and care for the newborn and infant.
- works with other midwives and health professionals to facilitate consultation and referral when needing to access medical care or other assistance. The midwife initiates and provides relevant emergency measures as appropriate.


RESOURCES
