

UTS:

WORLD HEALTH ORGANIZATION COLLABORATING CENTRE  
FOR NURSING, MIDWIFERY & HEALTH DEVELOPMENT

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**EXPRESSION OF INTEREST**  
**CLINICAL MIDWIFERY FACILITATOR**  
**PAPUA NEW GUINEA**

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<b>Position Title:</b>	<b>Clinical Midwifery Facilitator (CMF)</b>
<b>EOI Closing Date/ Time:</b>	<b>5pm AEST – 24 October 2013</b>
<b>Position Location:</b>	<b>Positions are likely to be available in: Port Moresby Goroka Madang Vunapope</b>
<b>Estimated Start Date:</b>	<b>January 2014</b>
<b>End Date:</b>	<b>31 December 2015</b>

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**OVERVIEW**

**WHO Collaborating Centre (WHO CC) for Nursing, Midwifery and Health Development** at the University of Technology (UTS) with the National Department of Health (NDoH) and the **Health and HIV Implementation Service Provider (HHISP)** in Papua New Guinea, is seeking eight (8) Clinical Midwifery Facilitators (CMFs) to support improvement in the standard of midwifery education and practice as a part of the **AusAID** funded Maternal Health Care Initiative (MHCI) in Papua New Guinea. The partner universities are the University of PNG, Pacific Adventist University, Lutheran School of Nursing, St Mary's School of Nursing (Divine Word University) and the University of Goroka.

The key role of the Clinical Midwifery Facilitator is to provide assistance with academic and clinical teaching and learning, using contemporary and culturally relevant approaches. The roles will work in partnership with and support existing PNG staff in both clinical and academic settings utilising a capacity building approach.

**POSITION PURPOSE**

Work alongside and support the clinical and academic teaching staff in PNG to improve the standard of midwifery practice and maternal health care, through enhanced clinical teaching and learning experiences of midwifery students, and achievement of regulatory and professional practice standards.

## GOVERNANCE & ACCOUNTABILITY

As outlined above there will be shared governance and accountability for the Initiative between WHO CC UTS, HHISP and NDoH. The CMFs will be recruited by the WHO CC UTS and employed on an accessUTS contract (accessUTS is the commercial arm of UTS). HHISP will be responsible for logistical issues in PNG including security. Regular communications and team meetings will be held with all stakeholders throughout the Initiative to ensure clear lines of governance and accountability.

The specific details relating to governance, accountability and reporting and performance review will be determined in collaboration with HHISP and NDoH with Caroline Homer as the Director of the Initiative.

## JOB SPECIFICATION

**The CMF will utilise capacity building approaches with their national midwifery counterparts in all aspects of the role, to improve midwifery education and practice in PNG, specifically in the assigned university and clinical settings. Through this approach, the CMF will:**

- Contribute to the development of midwifery educators' skills in both teaching and in practice.
- Work with the educators to build capacity and the provision of additional support to students.
- Work with the educators to ensure that all required clinical practicum are completed by students, assessed and recorded in keeping with national standards.
- Provide appropriate and relevant support to the midwifery teaching team to prepare, teach, assess and record students' performances.
- Work alongside academic and clinical colleagues in order to support team teaching and integration of theory into practice.
- Work with educators and clinicians to support high quality clinical supervision of students in the practicum sites in conjunction with clinical staff.
- Assist, when invited, with capacity building of the PNG Midwifery Society Work with counterparts and the PNG Nursing Council to support the regulation of midwifery in PNG
- Participate, when invited, in relevant meetings/workshops and in-service, being a role model and promoting contemporary midwifery evidence based practice.
- Prepare and submit activity reports as required

These appointees will receive mentoring support from professional staff at WHO CC UTS.

## SKILLS AND ATTRIBUTES

The preferred candidates must:

- Have current registration as a midwife within Australia, New Zealand or the European Union; and
- Ability to meet requirements for registration as both a nurse and midwife with the PNG Nursing Council.

They should also have:

- Recently been engaged in midwifery practice and or education, preferably in a limited resource environment;
- Demonstrated competence as a midwifery educator, preceptor or mentor;
- Excellent written and verbal communication skills
- Experience of working in a capacity building approach;
- Experience of working in a different culture.

## REPORTING REQUIREMENTS

CMFs will be required to:

- Provide briefings as directed by HHISP, NDoH and WHO CC UTS as requested.

- Provide report on their activities and scope of work as negotiated.
- Contribute to WHO CC UTS monitoring and evaluation processes as required.
- Contribute to WHO CC UTS mid-term report.
- Complete an Exit Report at the conclusion of the contract.

## **AUTHORITY TO ACT**

Representation, presentations and publications (including media) need approval both through WHO CC UTS prior to undertaking. At all times, discussions and negotiations need to be in consultation with national midwifery counterparts, local manager and WHO CC UTS, NDoH and HHISP.

## **KEY SELECTION CRITERIA**

### REQUIRED EXPERIENCE AND KNOWLEDGE

- Currently or recently engaged in midwifery practice preferably in a limited resource environment.
- Experience in capacity building in curriculum development, monitoring, implementation and/ or evaluation in midwifery education.
- Current and in depth knowledge of contemporary midwifery practice with a focus on maternal and newborn health care.
- Knowledge of the National Midwifery Education Framework in PNG and/or experience with similar frameworks in a similar context.
- Previous experience of midwifery practice in a challenging health care environment.
- Potential or proven ability to cope with culturally different practice settings, a degree of social isolation and a different standard of living.
- Knowledge of ICM / WHO global midwifery standards and relevant PNG policies.
- Capacity to critically reflect on own teaching methods, providing counselling to students and managing student matters.

### REQUIRED SKILLS

- Excellent written and verbal communication skills and capacity to work in collaboration and demonstrate mutual respect and problem solving with peers.
- Skills in developing and providing contemporary methods of teaching and learning.
- High level, recent clinical midwifery skills.
- Expertise in capacity building with individuals and groups.
- High level motivational, teaching/assessment and problem solving skills.
- Proficient in basic computing skills.
- Mentoring, preceptoring, negotiating and interviewing skills.
- Demonstrated capacity to build positive relationships across a broad demographic.
- An understanding of and capacity to work successfully across cultures with particular emphasis on working respectfully and successfully in the PNG cultural environment.

### REQUIRED QUALIFICATIONS

- Current registration to practice as a midwife in Australia, New Zealand or the European Union.
- Eligible for registration as both a nurse and a midwife with the PNG Nursing Council.
- Eligible for a PNG driver's license.
- Qualification and/or experience as a midwifery mentor, preceptor or educator.

## OVERVIEW OF MATERNAL HEALTH CARE INITIATIVE (MHCI)

The PNG National Department of Health with the World Health Organization Collaborating Centre at UTS (WHO CC UTS) and HHISP is leading an extension of the Maternal & Child Health Initiative (MCHI), which has been funded by AusAID, focussing on Millennium Development Goal 5 (Improve Maternal Health).

Papua New Guinea (PNG), with a population of about 6.6 million, low literacy levels and over 87% of its population widely dispersed in rural areas, has a high maternal mortality rate. Between the 1996 and 2006 Demographic and Health Surveys (DHS) the maternal mortality ratio (MMR) for PNG increased from 370 to 733 deaths for every 100 000 live births.<sup>1,2</sup> The UN officially released figures in August/September 2010 which stated that PNG's maternal mortality was 250/100,000.<sup>3</sup> (Uncertainty bounds 110-560). The UN figures are based on a statistical model while the DHS is based on a household survey. Despite the different figures and methodology, the clear message is that MDG 5 progress in PNG is still significantly off track and maternal mortality is unacceptably high in the range of 250 to 733 per 100 000 live births. The vast majority of maternal deaths (88-90%) are preventable<sup>4</sup> and human resource and health system policies are urgently being addressed to increase the number of births attended by skilled health personnel as only 39% of births in PNG are reported as being attended by a skilled birth attendant. Furthermore, only 55% of pregnant women have the minimum internationally recommended number of four antenatal visits.<sup>5</sup>

The Ministerial Taskforce on Maternal Health<sup>4</sup> identified an urgent need for 'functioning hospitals and other health facilities with midwives practising closer to the communities'. Ambitious human resources for health targets have been established to increase the number of obstetrically skilled doctors, registered midwives and community midwives. By 2015, the Government of Papua New Guinea aims to have achieved a significant increase in registered midwife numbers. Additionally, every health centre is to have a community health worker who has additional maternal health training. Registered midwives will be required to support and supervise the cadre of community maternal and infant health workers.

Currently four schools prepare midwives for qualifications to practise (the University of PNG in Port Moresby; Pacific Adventist University in Port Moresby; Lutheran School of Nursing in Madang; University of Goroka) with a fifth school to commence in 2014 (St Mary's School Vunapope). Although most facilities have a core of skilled and motivated tutors, over-all the skill level and qualifications of tutors and institution's capacities to provide for safe and high quality maternal and infant care are insufficient. Many clinicians require skills refresher programs. The, requisite teaching, clinical supervision and preceptoring skills also need to be upgraded if the entry to practice skills of graduates are to be improved and quality of services improved/.

The WHO CC UTS, in collaboration with HHISP is recruiting international expert midwives to work closely with academic and clinical personnel in the midwifery education programmes of the schools to support capacity-building of midwifery educators and clinicians. They will also work closely with obstetricians and other health care workers to enhance midwifery education. Throughout the process, the recruited midwives will play a major role in capacity building, providing peer support, mentoring, and utilising relevant evidence-based educational and practice materials, while working alongside counterparts and other health care workers.

Phase 1 of the MCHI was undertaken from 2012-2013. This Expression of Interest is for Phase 2.

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<sup>1</sup> National Statistics Office (2009) Demographic and Health Survey, Port Moresby

<sup>2</sup> WHO Western Pacific Region, Country health information profiles, Papua New Guinea, 2010. Manila, 2010

<sup>3</sup> World health statistics 2011, World Health Organization, Geneva 2011

<sup>4</sup> Papua New Guinea Report of the Ministerial Taskforce on Maternal Health in Papua New Guinea, Port Moresby, May 2009

<sup>5</sup> World Health Statistics 2011, World Health Organization, Geneva 2011

## SUMMARY OF POSITION BENEFITS

**Please note that any appointments are subject to the finalisation of funding arrangements for the Initiative.**

As part of this Maternal Health Care Initiative (MCHI) you will be employed for the period 1 January 2014 – 31 December 2015 (the start date can be negotiated) via accessUTS Pty Ltd (accessUTS is the wholly owned commercial arm of UTS). Salary and benefits will be paid in Australian (AUD) dollars.

CMFs receive the following:

1. A monthly professional fee which will be paid two weeks arrears, two weeks in advance in AUD on the 15<sup>th</sup> day of each month. The annual base salary for single employees is AUD \$159,687.33 + superannuation).
2. A start up benefit payment to assist with shipment of personal affects and for establishment of residence in PNG.
3. Flights for initial mobilisation and demobilisation at end of placement.
4. Annual Leave accrued at 2.5 days per month (or 30 days per year).
5. Professional Indemnity and Medical Malpractice insurance cover.
6. Travel and Expatriate Medical insurance (please note limits apply)
7. Comprehensive pre-departure and in-country briefings.
8. Assistance with finding suitable accommodation in PNG via HHISP
9. A rental assistance package
10. Ongoing security support provided by HHISP
11. International SOS (ISOS) membership for travel & medical assistance including emergency evacuation.
12. International SOS (ISOS) Clinic membership

## GUIDELINES FOR PREPARING YOUR APPLICATION

### **Current MCHI Clinical Midwifery Facilitators**

If you are currently working in Phase 1 of the MCHI, we invite you to submit a brief Expression of Interest.

It should be no more than 2 pages/1000 words, and must focus on demonstrating your effective performance and achievements in the current MCHI position especially in relation to mentoring and capacity building.

Please send your expression of interest to Kate Billings at [kate.billings@uts.edu.au](mailto:kate.billings@uts.edu.au)

### **New applicants to the role of MCHI Clinical Midwifery Facilitator**

Please submit an Expression of Interest that is in 3 parts:

1. An electronic version of your CV (less than 500kb).
2. A statement addressing the key selection criteria (maximum 3 pages). This document should describe how your skills, experience and qualifications will enable you to meet the requirements of the position.
3. Names and contact details of at least three (3) professional referees (preferably your current and previous supervisors or employers).

Please send your expression of interest to Kate Billings at [kate.billings@uts.edu.au](mailto:kate.billings@uts.edu.au)