

NURSING+
MIDWIFERY

Registered Undergraduate Student of Midwifery (RUSOM) Program 2022

MUM Handbook



Western Health

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Our Vision

Together, caring for the West - our patients, staff, community and environment.

Our Values

Compassion - Consistently acting with empathy and integrity.

Accountability- Taking responsibility for our decisions and actions.

Respect- Respect for the rights, beliefs and choice of every individual.

Excellence - Inspiring and motivating, innovation and achievement.

Safety- Prioritising safety as an essential part of everyday practice.

Our Purpose

Working collaboratively to provide quality health and well-being services for the people of the West.

Introduction

Purpose

This document is a practical guide to assist the Midwifery Unit Managers at Western Health in the implementation of third-tier paid workforce model known as the Registered Undergraduate Student of Midwifery model (RUSOMs). This role is clearly defined in clause 106 of the Nurse and Midwives (Victorian public sector) (single interest employers) enterprise agreement 2020-2024 (the EA).

This guide draws on the experiences of Victorian public health services that have already successfully implemented the RUSOM role in their nursing teams and we would like to especially thank Ballarat Health Services who generously shared their resources with other health services. In addition, this resource draws upon the knowledge gained through the 2020-2021 RUSON Pilot at Western Health and subsequent evaluation and recommendations.

Context

What is a RUSOM?

A RUSOM is a person currently enrolled at a university to undertake undergraduate nursing or midwifery studies, who is registered with the Australian Health Practitioner Regulation Agency as a student midwife, and who at commencement, has successfully completed not less than 12 months of the Bachelor of Midwifery (or graduate entry to practice nursing degree) degree or 24 months of the combined Bachelor of Nursing & Midwifery degree.

How do we know that the RUSOM model works?

We know from experience in other health services as well as the Western Health RUSOM pilot program that RUSOMs are a welcome addition to the nursing, bringing benefits for both patients and staff.

RUSOM Scope of Practice

Duties and breadth of RUSOM role

The RUSOM works as part of the nursing team, assisting registered midwives with patient care interventions and activities as directed, in accordance with the nursing care plan and under the delegation, and supervision, of qualified and experienced registered midwives. The RUSOM role is above standard nurse or midwife to patient ratios.

A list of activities that may be delegated in accordance with the professional judgement of the supervising Registered Midwife can be found in the scope of practice document on the nursing and midwifery intranet page. The duties and activities in this document can be delegated in accordance with the level of achieved educational preparation, and assessed competence of the RUSOM by an experienced Registered Midwife.

[RUSON/M Program - Nursing & Midwifery \(wh. <https://westerly.wh.org.au/nursing-midwifery/workforce/ruson-m-program/org.au>\)](https://westerly.wh.org.au/nursing-midwifery/workforce/ruson-m-program/org.au)

The RUSOM can only work within the parameters of the position description.

The position descriptions for a RUSOM can be located on the nursing and midwifery intranet page.

[RUSON/M Program - Nursing & Midwifery \(wh. <https://westerly.wh.org.au/nursing-midwifery/workforce/ruson-m-program/org.au>\)](https://westerly.wh.org.au/nursing-midwifery/workforce/ruson-m-program/org.au)

Establishing delegation and supervision

In order to establish a clear framework for the delegation of tasks and activities and the provision of effective clinically focused supervision, there must be a clear and shared understanding of the role that the RUSOM plays within the nursing team, and of the skills and competencies that a RUSOM will be expected to demonstrate.

Competencies are required to be signed off from an experienced Registered Midwife as “Independent” prior to the RUSOM undertaking the activity without direct supervision. Competencies can be signed off on first attempt. The RUSOM competency tool is provided in their workbook.

Integrating RUSOMs in your Team

Recruitment

Initial recruitment and on-boarding of the RUSOMs will be facilitated by the NMWU team. Any vacant EFT throughout the year after the initial recruitment should be replaced and is the responsibility of the MUM the RUSOM is employed to.

EBA requirements

The Midwives EA stipulates only one RUSOM is to be rostered per shift.

Rostering

The RUSOMs will be recruited to your ward as part of your team and each inpatient ward will be allocated 2.95 EFT which equates to RUSOMs covering 16 hours per day, 7 days a week.

The same quality roster rules apply to rostering the RUSOMs; they are able to be rostered across all 3 shifts. The following shift times are required to be used:

- RUM D 0700-1530
- RUM E 1300-2130
- RUM N 2100-0730

It is preferred that each day, there will be a RUSOM rostered to ensure coverage on 2 shifts. This will guarantee that the 2.95 EFT of RUSOMs will be spread evenly across the fortnight.

As members of your team, the RUSOMs directly report to you. They have been provided with information about roster requests, including Annual leave, and Personal leave.

In the event of unplanned personal leave, the RUSOMs are advised to contact the MUM or MIC prior to their shift. If a RUSOM does not attend their shift a well-being check should be made.

Rostering challenges

An important aim when recruiting RUSOMs is to minimise rostering challenges caused by the impact of clinical placements. Considerations to alleviate rostering challenges could include:

- widening the catchment of RUSOM to multiple universities (where possible) to reduce clinical placement unavailability, thereby increasing the number of shifts that can be covered throughout the year
- ensuring that there is a combination of second and third-year students employed, as well as employing a greater pool of students to enhance availability
- RUSOMs should identify their scheduled clinical placements as early as possible so that leave without pay or annual leave can be granted for these periods.

What if a RUSOM on my ward has obtained RM registration?

A variation must occur to process the change in pay to that of a registered midwife; however the scope of practice remains as a RUSOM until the RUSOM's graduate program commences.

Code of Conduct

The Western Health Code of Conduct can be accessed on the Intranet and expectations should be no different to any other team member. For some RUSOMs this may be their very first professional employment opportunity so a nurturing environment and good team role modelling will fast track their knowledge and awareness of expected professional behaviours.

Uniform

There is no specific RUSOM uniform and each RUSOM will be delineated with their name badge, ID and RUSOM sticker. University uniforms are not an acceptable alternative.

Management & Support arrangements

As with any other ward staff member, each RUSOM is employed by individual wards and managed by you (Midwifery Unit Manager).

You are responsible for:

- conducting formal performance reviews
- approving and coordinating requests for leave and other entitlements
- establishing training and development plans
- Supporting staff and dealing with other personnel or welfare issues.

In addition, the RUSOMs will be supported by the following:

- Professional Leads –Tony McGillion (Director of Nursing and Midwifery, Inspiring Innovation) & Sue Sweeney (Director of Midwifery Professional Practice)
- Education
- Ward Staff
- RUSOM debrief Sessions

Debriefing is an opportunity to discuss, reflect, and learn from our experiences and a time to consider how things are going, identify what is going well, and consider areas support is needed. By reflecting on, and recognising the knowledge, skills, and attitudes used in their experiences, the RUSOMs will be able to better develop personal awareness and insight into their practice, helping them to identify and manage stress.

People & Numbers to Know

Tony McGillion Director of Nursing and Midwifery (Inspiring Innovation) 0466 925 108

Sue Sweeney Director of Midwifery (NMWU) 0466 801 447

NMWU Recruitment 8345 4040, recruitnmwu@wh.org.au

Frequently asked questions (FAQs)

1. Can a RUSOM work on all shifts?

Yes. RUSOMs can work all shifts.

2. Can a RUSOM work night duty?

Yes. RUSOMs can work night duty.

3. Can a RUSOM work on a public holiday?

Yes. RUSOMs can work on public holidays.

4. Can a RUSOM work with a team of midwives or just one midwife?

RUSOMs work with the team based model of care. This may refer to a team of 1, 2, 3 or 4 midwives. RUSOMs usually commence with work being assigned to them by the AMUM or midwife in Charge or Team Leader, who delegates their duties. This may include being assigned to work with one midwife, one team of midwives or multiple teams of midwives over the shift.

5. Can a RUSOM work with a student midwife on placement?

RUSOMs can work with student midwives as part of a health care team but both the RUSOM and Student midwife need to be supervised by a Registered Midwife and have the 'activity' they are doing delegated to them by the Registered Midwife.

6. Can a RUSOM work as a special for a patient?

RUSOMs are not allowed to care for their own patient or patients in accordance with legislation from the Safe Patient Care Act.

7. Can a RUSOM work with their own load of patients?

Can a RUSOM have one or two or three patients of their own?

RUSOMs cannot care for their own patient or load of patients. Their role is always supernumerary (does not carry a patient load) in the midwifery team.

8. Can a RUSOM insert an indwelling catheter etc.?

RUSOMs can only complete activities or nursing tasks that are on their ward specific activity list. Even if they are capable and competent of inserting an indwelling catheter, they are not allowed to do so if it is not on the approved list.

This example (insertion of an indwelling catheter) can be used in other situations where RUSOMs are asked to do tasks that are not on their activity list.

RUSOMs may be capable of doing a technical skill as a result of a learning lab at university or experience at university but this does not permit them to perform at this higher level when working as a RUSOM.

RUSOMs are only permitted to complete technical skills as per the activity list.

A RUSOM may tell you that,

'Yes, I can do THAT but I am not allowed to as it is not on my activity list'.

This a safe statement and should be encouraged and acknowledged.

9. How can I check what technical skills a RUSOM can do?

Refer to the RUSOM scope of practice document on the nursing and midwifery intranet page and review the duties and activities that the RUSOM has been assessed as competent. The RUSOM should be keeping a record log of the activities and duties that have been assessed in their workbook.

10. Can a RUSOM do a toileting round?

RUSOMs are able to meet patient hygiene needs as per their activity list, so are able to assist patients with their toileting requirements.

However, as they are working under the supervision and delegation of a Registered Midwife it will be highly unlikely that this one midwife would be providing care for an entire unit and as such, delegate this to the RUSOM.

RUSOMs can meet hygiene needs of a group of clients as delegated by the RM.

WH would like to ensure that the RUSOMs work is enjoyable and variable and as such, doing a toileting round of an entire unit (20-30 patients) is not something we envisage should be part of the RUSOM's core work.

Meeting hygiene needs for a group of patients (as delegated by the RM) is likely to happen during every shift as this is an activity of daily living for patients.

11. Can two RUSOMS work on the same shift?

As per the EA, only one RUSOM can work per shift.

12. Can a RUSOM call in sick for their duty?

RUSOM's are WH employees and as such, have the same benefits and entitlements as all other employees. RUSOMS must phone in sick to the MIC or MUM at least 2 hours prior to their shift and produce the appropriate certificates as needed. If the RUSOM fails to call in sick, the MUM or MIC must complete a welfare check.

13. What happens when a RUSOM needs to attend clinical placement and can't work their rostered shifts?

RUSOMS are contracted to work minimum 0.1 EFT to a maximum of 0.8 EFT

RUSOMS are encouraged to request rostered days off and shift preferences just like other WH staff in order to ensure they can meet their contracted hours with WH and still meet their future requirements for registration.

WH Unit Managers (you) will work with the RUSOMS to accommodate their requests and ensure the contracted hours are worked and clinical placement shifts are able to be accommodated. Leave without pay can be provided to RUSOMS for clinical placement and should be recorded in RosterOn.

14. Are RUSOMS entitled to take annual leave and personal leave days?

RUSOMS are WH employees and have the same benefits and entitlements as other employees. This means that they can request annual leave days via the roster request system in their unit and also take personal leave if required.

15. Do RUSOMS have a RUSOM uniform?

Can they wear their student midwife uniform as a RUSOM?

RUSOMS do not have a specific uniform. The RUSOM must wear scrubs, ID badge, name badge and RUSOM sticker (attached to PPE or sleeve of scrub top) when working as a RUSOM.

No university branded items must be worn at work to avoid role confusion for the RUSOM, our staff, your university and our patients.

If a RUSOM doesn't have clean scrubs to wear on duty they may wear clothing that adheres to the WH dress code procedure (in addition to relevant PPE).

The RUSOM sticker (see image below) can be worn on the sleeve of the scrub top once face shields are no longer mandatory.



Appendix 1: Performance Review and Development Appraisals

Interim Appraisal

Due: 3 months into program

- This is completed by the MUM or delegate.
- Prior to the due date, the RUSOM will contact the MUM to make a time to complete the appraisal. Otherwise it is the MUMs responsibility to ensure the appraisal is completed.

Summative Appraisal

Due: 6 months into program

- This is completed by the MUM or delegate.
- Prior to the due date, the RUSOM will contact the MUM to make a time to complete the appraisal. Otherwise, it is the MUMs responsibility to ensure the appraisal is completed.

Both RUSOM and MUM retain a copy of the appraisal for their records.

APPRAISAL TOOL



Western Health

Performance Review and Development Plan for the Registered Undergraduate Student of Midwifery (RUSOM)

AT WESTERN HEALTH WE ARE COMMITTED TO HIGH QUALITY CARE THAT IS SAFE, PERSON-CENTERED, RIGHT AND COORDINATED – WE ARE COMMITTED TO BEST CARE. PLEASE SEE THE WESTERN HEALTH INTRANET FOR MORE DETAILS ON THE BEST CARE FRAMEWORK.

A performance review or appraisal is a regular assessment on how you are performing in your role as a RUSOM at Western Health. It can help to identify your individual learning needs, your continuing development requirements, and how you are performing in your RUSOM role. Appraisals are an integral part of your learning while a RUSOM at Western Health. You may be familiar with appraisals through your university placements. As a student midwife, your appraisals will be an additional tool in your applications for a graduate program.

Before your performance review, complete the **Appraisal Reflection**. Consider how you have reflected Western Health's Organisational Values and Best Care Framework. Once you have completed this, speak with the Midwife Unit Manager or delegate, to organise a time to meet and discuss your performance. This is an opportunity for your Reviewer to provide feedback on your performance and give you some overall comments. You can then reflect on the feedback you receive in the **Comments and Feedback** area.

YOU ARE RESPONSIBLE FOR KEEPING THE HARD COPY OF YOUR APPRAISALS.
FORWARD A SCANNED COPY TO YOUR MIDWIFE UNIT MANAGER FOR THEIR RECORDS.

Western Health Organisation Values

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Accountability	Empowering our staff to serve our community
Respect	For the rights, beliefs and choice of every individual
Excellence	Inspiring and motivating innovation and achievement
Safety	Working in an open, honest and safe environment

Personal Details

Name:

Date:

Position Title: RUSOM

Reviewer's Name & Designation:

Ward:

Interim Appraisal Reflection

What areas do you think you have performed well?

RUSOM

Educator/Reviewer

What areas do you think you could improve?

RUSOM

Educator/Reviewer

What is your plan moving forward?

RUSOM

Educator/Reviewer

Comments and Feedback	
Educator/Reviewer	RUSOM

RUSOM signature:		Date:
Reviewer signature:		

APPRAISAL TOOL

Performance Review and Development Plan for the
Registered Undergraduate Student of Midwifery
(RUSOM)



Western Health

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Personal Details

Name:

Date:

Position Title: RUSOM

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Ward:

Summative Appraisal Reflection

What areas do you think you have performed well?

RUSOM

Educator/Reviewer

What areas do you think you could improve?

RUSOM

Educator/Reviewer

What is your plan moving forward?

RUSOM

Educator/Reviewer

Comments and Feedback	
Educator/Reviewer	RUSOM

RUSOM signature:		Date:
Reviewer signature:		