



## **INTEGRATED MATERNITY CARE COURSE:**

### **ASSESSMENT INFORMATION FOR STUDENTS**

#### **Course Outline, as validated by the University of Greenwich (as in Course handbook)**

Course leader: Denise Tiran MSc RM RGN ADM MTD PGCEA  
Academic credit: 30 credits at level 3

*Aims of the Course:* the course aims to provide students with the opportunity to:

- examine critically the concept of increasing integration of complementary and alternative medicine (CAM) into the conventional maternity services
- acquire the knowledge and skills of specific elements of CAM in order to facilitate appropriate and safe choices for pregnant and childbearing women, including a critical analysis of the risks and benefits
- analyse the feasibility and practicalities of incorporating these specific elements into their personal professional practice
- reflect on the issues of professional accountability, legal and ethical dilemmas and health and safety when complementary therapies are offered to pregnant and childbearing women in order to act as an advocate for integrated maternity care

*Learning outcomes of the course:* by the end of the course students will be able to:

- demonstrate an in-depth knowledge of a defined range of one or more complementary strategies which may be of use to pregnant, labouring or newly delivered mothers
- account for the popularity of and demand for CAM by the general public and by pregnant women in particular and acknowledge the need for greater integration into the conventional maternity services

- analyse critically the available evidence and demonstrate a wide knowledge of the published literature to support the safety and efficacy of different complementary strategies in order to facilitate women to make informed choices according to individual needs

*Indicative content:* The specific content related to different complementary therapies is negotiated according to identified needs of the purchasing organisation, but will take a woman-focused approach by enabling students to examine both the complementary and the conventional care which may be appropriate for a woman with a particular condition. Possible subjects include the implementation of aromatherapy in the labour ward, alternative options for women with breech presentation, or an examination of pertinent issues related to the use of complementary therapies throughout the childbearing episode, incorporating information on a range of natural remedies about which pregnant women request information (eg raspberry leaf tea, homeopathic arnica, dealing with pregnancy sickness, etc).

The following is included for all students:

An overview of the main CAM therapies in use today; complementary medicine in the context of contemporary healthcare, both conventional and alternative; reasons for the increased demand from both consumers and professionals; access to CAM therapies during pregnancy and childbearing

Indications, precautions, contraindications, side-effects, complications, mode of action of the chosen therapy(ies), with direct application to maternity physiology and potential pathology; research evidence of the chosen therapy(ies) for both safety and efficacy

Legal, ethical and professional issues related to education, regulation, research and delivery of CAM therapies, including registering organisations, indemnity insurance issues, professional standards and boundaries, health and safety factors, communication and multidisciplinary collaboration, record keeping and consent

*Teaching and learning activities:*

- a taught course, equivalent to three full days, provides an opportunity for introduction of the subject within a group environment to facilitate discussion
- informal lecture-discussions, group work, practical sessions where appropriate and guided independent study feature in the taught course
- reflective exercises and clinical scenarios are also used to encourage students to apply their developing CAM knowledge to pregnancy and childbirth physiology and delivery of services
- the taught course is followed by email support for students until the end of the six month period from the point of registration. Guided study in the form of appropriate worksheets is made available online and students are able to contact the course tutor with queries about application of theory to their own clinical practice and obtain help in preparing the final assignment

*Assessment strategy:*

This is a 30 credit, level 3 course. Formative assessment involves the use of on-line guided study and consultancy such as worksheets and reflective case studies. Summative assignment, to be submitted six calendar months after the initial registration period, is a 4000 word essay or project work incorporating a risk-benefit assessment of an element of complementary medicine for a specific condition during pregnancy, labour or the puerperium. Students explore the potential for incorporation of the chosen therapy(ies) into their own area of clinical practice and are expected to compare the advantages and potential disadvantages,

effectiveness and safety of their chosen aspect(s) of CAM with standard conventional management and care.

Examples of possible assignment subjects include:

- a risk-benefit assessment of a range of aromatherapy essential oils for pregnant and childbearing women
- a risk-benefit assessment of conventional and complementary methods of management of a woman with a breech presentation or nausea and vomiting
- a risk-benefit assessment of complementary and conventional methods of relieving pain in labour

*Recommended reading and resources:*

*SEE ALSO THE SUGGESTED READING LIST IN YOUR COURSE INFORMATION PACK, AND ON THE WEBSITE, THE SUGGESTED READING SECTION ON THE WEBSITE AND THE LIST OF PUBLICATIONS BY DENISE TIRAN FOR MORE REFERENCES*

Ernst E Pittler MH Stevinson C White A 2001 *The Desktop Guide to Complementary and Alternative Medicine – an evidence-based approach* Mosby Edinburgh

Harkness R Bratman S 2003 *Handbook of Drug-herb and Drug-supplement Interactions* Mosby St Louis Missouri

Mackereth P and Tiran D (eds) 2002 *Clinical Reflexology : a Guide for Health Professionals* Elsevier Science London

McKenna DJ Jones K Hughes K 2002 2<sup>nd</sup> ed *Botanical Medicines – the Desk Reference for major herbal supplements* Haworth Herbal Press New York

Tiran D 2003 *Nausea and Vomiting in Pregnancy: an Integrated Approach to Care* Elsevier Science London

Tiran D 2002 Complementary medicine in pregnancy: the use of self-administered remedies for nausea and vomiting *Complementary Therapies in Nursing and Midwifery* 8(4): 19-26

Tiran D, Mack (eds.) 2000, 2<sup>nd</sup> ed. *Complementary Therapies for Pregnancy and Childbirth* Balliere Tindall, London

Tiran D 2000 2<sup>nd</sup> ed. *Clinical Aromatherapy for Pregnancy & Childbirth* Harcourt Health Sciences London

Tiran D 1999 A Holistic Framework for Maternity Care *Complementary Therapies In Nursing and Midwifery* 5:127-135

West Z 2001 *Acupuncture in Pregnancy and Childbirth* Churchill Livingstone Edinburgh

Other contemporary texts and research and review papers will be utilised during the course and students will be encouraged to search the professional databases (eg [www.nccam.nih.gov](http://www.nccam.nih.gov) ) for evidence of safety and efficacy of complementary therapies. Students will be facilitated to apply generic evidence to the specific clinical field of pregnancy and childbirth and to consider opportunities for their own future research.

## ADDITIONAL GUIDANCE FOR MIDWIVES UNDERTAKING ASSIGNMENTS

This information is intended to supplement that included in the course handbook – you must also refer to the course assessment information in the back of the course handbook which details what the assessment task is, the grading criteria and how to submit the essay.

The assignment is a level 3 essay and the word count has now been extended to **4000 words**, in line with University of Greenwich changes. This is approximately 12 A4 sheets, double-spaced. You are allowed a 10% leeway ie between 3600 and 4400 words (+ or – 400) but may lose marks if the word count is outside these limits. **CHANGE IN WORD LIMIT IS NOT APPLICABLE TO ASSIGNMENTS FROM COURSES HELD BEFORE MAY 2006**

1) Remember that the essay is an ANALYSIS of the RISKS and BENEFITS of using (aromatherapy / reflexology / moxibustion / complementary therapies in general) in some aspect of midwifery practice - this means a balanced essay debating the issues, with supporting research references. It is not just an essay *about* an aspect of the subject that interests you, but is a means of justifying what you intend to do to implement the therapy in your practice. Imagine that you are trying to persuade the most sceptical of your colleagues that your therapy adds some value to the care of women – but that you are also able to debate the possible problems / dangers / interactions etc and justify your actions – in much the same way as you would persuade the colleague about the value of giving birth at home or in the birthing pool. It is certainly not an essay about *how to do it* – so some aspects that we have discussed in the course, such as training, may not need to be discussed, and others, such as policies and protocols should be addressed in relation to risks and benefits ie protocols are necessary to protect both the women and the midwife.

2) The essay should be structured with an introduction, middle and conclusion and should be written in the third person; personal opinions are acceptable if identified as such but should ALWAYS be supported by reference to the work of others. It may help to use a structure such as one of the following as a starting point for the content of your essay:

Questions	OR	Issues
What?		Physiological and pathological issues
Why?		Psychological and emotional issues
Where?		Sociological and cultural issues
When?		Ethical and legal (incl accountability) issues
How?		Economic and practical eg time constraints
Who?		Communication and education issues
<p>The following issues would certainly be expected to be <i>discussed</i>:</p> <ul style="list-style-type: none"> <li>Health and safety</li> <li>Indications, precautions and contraindications</li> <li>Safety versus effectiveness</li> <li>Evidence for all of the above</li> </ul>		

You need to have a broad discussion and – at level 3 – some critical analysis of the issues you include – but there should also be some specific detail eg in relation to doses, method of and length of administration, interaction with drugs or conventional treatments, impact on progress eg in labour etc. You should always include both positive and negative points in your argument - imagine you are having a political discussion – a sort of verbal or written “tennis match” – so that if a point you make is argued against by the “opposition” you can pick it up again and throw it back with another positive point. Try not to give just factual information, but to *discuss* it – eg when discussing reflexology in labour care you might home in on the apparent lack of evidence but balance this by a debate about the cost

effectiveness in relation to pain relief or retained placenta vs the cost of pethidine or epidural – including the cost of time spent in relation to these.

3) References *must* be up to date from books and journal papers which have been peer reviewed and which, themselves, include references to the work of others. Books should not normally be those intended for consumers (avoid publishers such as Thorsons) and should preferably be published from 1999 onwards; also ensure that you have the most up to date edition possible. The purpose of your references is to support the statements you make and to provide evidence of research or authoritative professional debate. You must be consistent in your referencing method – use the Harvard method as shown in the list of indicative reading in your handbook, or seek help from your professional librarian or tutors to ensure accuracy of the referencing method. *Every* reference to someone else's work *must* be included in your reference list at the end of the essay but you should also try to include a small bibliography in a separate list afterwards which shows evidence of wide reading on your chosen subject, but which you have not used as direct references in the essay. Many students lose a considerable number of marks on their referencing so *please* email me your list for checking if you are not sure. See the lists of suggested reading in your course pack and on the website

4) You must try to include research references to support your debate – use some of the references from the reading lists given to you on the course, or in the back of the course handbook and – for the aromatherapy course – in the back of the *Implementing Aromatherapy* booklet. A good source of contemporary research abstracts is the website [www.nccam.nih.gov/research](http://www.nccam.nih.gov/research) - go to the [camonpubmed](#) section, click here, and click again on the next page; you will then have your space bar for your search term. Although it is not usually academically appropriate only to use abstracts as references, (some abstract writers misinterpret the research findings) I will accept as read the research results you find on this website – but you must reference it to the original journal source, not to the nccam website.

4) If you are not sure about the angle your essay is taking contact me by email and don't leave it too late as the deadline for submissions approaches - it has been noticeable that those midwives who have used the online tutorial support have gained higher marks / passed than those who have not - indeed, some of those who have not made any contact at all until sending in the essay have actually been on totally the wrong track. I am happy to look at your plan, reference list and *one* draft of your essay before you submit the final attempt. I suggest you contact me within one month of the end of the taught course to negotiate your essay title / subject; I would then expect you to send a draft within 6 weeks / or you can first send a list of the journal papers and/or books you have read to ensure you are working at the correct academic level. Your first draft, if you intend to send one, should be emailed to me within three months of the end of the taught course and I will endeavour to send it back with comments within two weeks.

**5) DO NOT ON ANY ACCOUNT SEND YOUR ASSIGNMENT TO THE UNIVERSITY OF GREENWICH - IT WILL GET LOST IN THE SYSTEM - IT NEEDS TO COME TO EXPECTANCY FIRST!** Please send your assignment (typed, double-spaced, font size 10 or 12; a copy should be retained in case it gets lost) to Expectancy Ltd, 2, Marigold Way, Shirley Oaks, Croydon, CR0 8YD. I suggest recorded delivery with a certificate of posting to prove date of posting. Essays are not returned but mark sheets and certificates of achievement, if you are successful, will be sent to you as soon as possible. However please bear in mind that the system is quite slow and you may not get a result for some time – possibly three months.

**WHEN YOU SUBMIT YOUR ASSESSMENT PLEASE COMPLETE AND ATTACH THE FOLLOWING SUBMISSION FORM. PLEASE ENCLOSE AN A4 SIZE SELF-ADDRESSED ENVELOPE, STAMPED TO THE VALUE OF A LARGE LETTER**



**INTEGRATED MATERNITY CARE COURSE  
ASSIGNMENT SUBMISSION FORM**

**NAME**

**POSTAL ADDRESS FOR RETURN OF MARKS**

**EMAIL ADDRESS**

**REPEAT EMAIL ADDRESS**

**TELEPHONE**

**ALTERNATIVE TELEPHONE**

**DATES OF COURSE**

**VENUE**

**TITLE OF COURSE (AROMATHERAPY / REFLEXOLOGY ETC)**

**DATE ASSIGNMENT DUE**

**IF YOU HAVE BEEN GRANTED AN EXTENSION TO THE ASSIGNMENT SUBMISSION DATE, PLEASE ENTER THE REVISED DATE**