



World Health  
Organization

REGIONAL OFFICE FOR **Africa**

# FOUR-YEAR INTEGRATED NURSING AND MIDWIFERY COMPETENCY-BASED



## PROTOTYPE CURRICULUM FOR THE AFRICAN REGION

# **FOUR-YEAR INTEGRATED NURSING AND MIDWIFERY COMPETENCY-BASED PROTOTYPE CURRICULUM FOR THE AFRICAN REGION**

WORLD HEALTH ORGANIZATION  
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# Foreword

These regional prototype curricula for nursing and midwifery education and training are in part a step towards creating a means for implementing the World Health Assembly (WHA) resolutions (the most recent being WHA 64.7, 2011) of regional interest and the global and regional strategic directions on strengthening the contribution of nursing and midwifery to health systems development. The curricula are also consistent with the “Roadmap for scaling up the human resources for health (HRH) for improved health service delivery in the Africa region 2012-2025” adopted at the 62nd Session of the Regional Committee for African Health Ministers held in 2012. One of the six strategic areas in road map is scaling up education and training of health workers.

A strong health workforce is the backbone of a well-functioning health system. The education, recruitment, deployment and retention of health workers including nurses and midwives, remain major challenges for many health care systems, especially those of Africa. These challenges have a negative impact on the quality of health services and, consequently, on the health of a given population as health coverage is greatly compromised.

To respond to these challenges, access by everyone to a well-trained, motivated health worker is key. To address these challenges, the World Health Organization, its Member States and other partners are putting in place mechanisms, structures and processes which include ensuring maintenance of standards and regulation for the education and practice of health workers.

The three distinct curricula for (i) general nursing; (ii) midwifery and (iii) integrated nursing and midwifery have been developed through a series of consultations that took place between 2009 and 2010. The information from the assessments was a key factor to guide the process of developing the regional curricula. The information also provided good justification to move forward with the initiative.

The assessments, which utilized different method of collecting the information, including a review of existing curricula from 21 countries, revealed a number of inconsistencies in the education and training of nurses and midwives in the countries of the region. Great variations exists among countries and especially among francophone, anglophone and lusophone countries. Some of the gaps which were identified include lack of a curriculum document to give a total picture of the programme and educational experiences in a lot of cases; there are variations admission requirements, names of diplomas.

There are also currently a lot of variations in content or content areas including lack of balance between theory and practice, a great lack of clinical course descriptions and related clinical competencies to be achieved with no clear linkages between content and programme goals and learning outcomes. Concerning teaching and learning methods the lack of relevant teaching and learning materials in most educational institutions affect delivery methods that are not specifically linked to achieving specific competencies. Good learning experience includes assessment, yet even with developments that have occurred overtime most training is still using traditional methods. There are many challenges with clinical assessments due to lack of standardized tools and also lack of clarity of what specific competencies need to be assessed during each clinical placement. The assessments are focused on pass or fail grades and not necessarily mastery of desired competencies.

The critical shortage of well qualified nursing and midwifery teachers and weak accreditation systems also negatively affect the teaching and learning capacity. Lack of, and/or weak nursing and midwifery regulatory bodies to control and reinforce quality of nursing and midwifery education and practice is also a challenge but the WHO Africa region with its partners and stakeholders have started to facilitate capacity building mechanisms embodied in the regional HRH roadmap and other instruments and tools such as the regional regulatory framework recently developed.

The developed regional curricula have focused on addressing the gaps which have been identified during the assessment. Each of the curriculums is expected to be used by countries as tools to guide improvements in their national and local educational initiatives. A Teachers Guide has been developed to facilitate the adaptation process of the developed curricula which takes into account countries' specificities

These three regional prototype curricula for training nurses and midwives are the first developed by the WHO Regional Office for Africa in collaboration with key stakeholders within and outside Africa to strengthen the production of nursing and midwifery workforce in countries in a harmonised and consistent manner with the flexibility of country adaptations as relevant.

We hope that this document will serve as a useful resource for improving the quality of nursing and midwifery education and practice and in creating a momentum towards harmonized approaches in the educational preparation and practice of nurses and midwives in the African Region for improved nursing and midwifery services for our populations.



**WHO Regional Director for Africa,  
Dr Matshidiso Moeti**

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The list of individual contributors is in **Annex 1**.



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# Acronyms

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
ARV	Antiretroviral (Drug)
BP	Blood Pressure
CBO	Community-Based Organization
CCRS	Clinical Competence Rating Scale
CHBC	Comprehensive Community Home-Based Care
CTG	Cardiotocography
DSM	Diagnostic Statistical Manual
ECSACON	East, Central and Southern Africa College of Nursing
EHCP	Essential Health Care Package
FP	Family Planning
GIT	Gastrointestinal Tract
HIV	Human Immunodeficiency Virus
HQ	Headquarters
ICM	International Conference of Midwives
ICN	International Council of Nurses
ICT	Information and Communication Technology
IMCI	Integrated Management of Childhood Illness
IQ	Intelligent Quotient
IV	Intravenous
NGO	Non-Governmental Organization
ORS	Oral Rehydration Solution
OSCE	Objective Structural Clinical Examination
PAP	Papanicolaou Cervical Cytology Test
PBL	Problem-Based Learning
PEP	Post Exposure Prophylaxis
PHC	Primary Health Care
PMTCT	Prevention of Mother-to-Child Transmission
QPAU	Quality Promotion and Assurance Unit
SRH	Sexual and Reproductive Health
SWOTs	Strengths, Weaknesses, Opportunities, Threats
TB	Tuberculosis
TPR	Temperature Pulse and Respiration
UNAIDS	The Joint United Nations Programme on HIV/AIDS
VCT	Voluntary Counselling and Testing
WACN	West African College of Nursing
WAHO	West Africa Health Organization
WHO	World Health Organization
WHR	World Health Report

# 1. Introduction

# 1. Introduction

## 1.1 Background

Nursing and midwifery education in the African Region is plagued by many weaknesses, which include the weak linkage between the curricula and priority health problems, lack of clearly defined competencies, theory-practice gaps and, consequently, insufficiency to produce graduates competent enough to respond to the health needs of the population. To address these inadequacies, the World Health Organization (WHO) African Region developed this prototype, competency-based, pre-service, integrated curriculum to guide countries in their efforts to improve the quality of nursing and midwifery education.

This curriculum incorporates the principles of the primary health care approach and cross-sectoral action to handle the social determinants of health. Within that context, the curriculum covers disease prevention, health promotion, illness treatment and rehabilitation. This approach will contribute to provision of universal health coverage and health systems strengthening through the delivery of high quality and safe nursing and midwifery services. The curriculum is also a useful tool to guide the nursing and midwifery institutions in the Region in the production of competent and relevant nursing and midwifery professionals who will be able to respond to priority health needs and emerging issues in the Region by providing holistic health care that is ethical, safe and evidence informed, positively impacting health and quality of life of individuals, families, groups and communities.

This four-year, integrated nursing and midwifery pre-service curriculum has two main parts: an introductory section and 35 competency-based modules. The introduction includes (i) the context, which is an overview of the health and systems challenges in the Region to which the curriculum is responding, (ii) the rationale or justification for developing this curriculum, and (iii) the key elements that form the structure of the curriculum. The modules section provides the content of the curriculum that aims to prepare a graduate who will be both a nurse and a midwife.

This curriculum is intended to be covered in a minimum of four years. It may also serve as a reference document for harmonization of pre-service competency-based curricula.

The process of developing this curriculum was extensive and highly consultative and took place from 2009 to 2013. It included review of existing curricula from 20 countries<sup>1</sup>, structured evaluation of nursing and midwifery programmes in selected countries, and 6 technical consultative meetings involving 98 experts from francophone and anglophone countries, partners and key stakeholders from WHO priority programmes.

## 1.2 Context

WHO estimates that Africa, home to about 11% of the world's population, has a mere 3% of the world's health workers struggling against 24% of the global disease burden (WHO 2006). Health systems in Africa rely heavily on nurses and midwives; for example, nurses and midwives comprise more than 50% of the health workforce and provide up to 90% of services in some countries (WHO 2007).

1. Benin, Botswana, Burkina Faso, Cameroon, Cote d'Ivoire, Cape Verde, Democratic Republic of Congo, Ghana, Guinea, Liberia, Malawi, Mali, Niger, Nigeria, Senegal, Sierra Leone, South Africa, Swaziland, Togo, Zambia, Zimbabwe

Health trends show that new and re-emerging communicable and non-communicable diseases are on the rise worldwide. These diseases include HIV/AIDS, tuberculosis, malaria, cancer, diabetes mellitus and mental health illnesses. In 2011, 34 million people were living with HIV/AIDS worldwide with 69% of them in sub-Saharan Africa (UNAIDS 2012). While the incidence of tuberculosis is falling in five of the six WHO regions, the global annual growth of 0.6% is attributed to the rapid increase in infections in sub-Saharan Africa (WHO 2007).

The African continent, which accounts for 20% of the world's births, contributes 40% of maternal deaths, many of which would be preventable with proper and accessible health care (WHO 2006). Maternal, new-born and child health still remains a major public health problem in the African Region. The maternal mortality ratio in the African Region, estimated at 500 per 10 000 live births, is the highest in the world, and progress towards improving the situation is slow. The main direct causes of maternal mortality include haemorrhage, abortion, sepsis, eclampsia and obstructed labour (WHO 2010, 2012). Countries south of the Sahara have the highest neonatal mortality rates, averaging 34 deaths per 1000 live births (AU 2013). Neonatal and maternal death risks are directly related in the health outcomes. The major causes of neonatal deaths are pre-term births, severe infection and asphyxia. Evidence shows that maternal and neonatal deaths can be prevented through using skilled care attendants. It is hoped that strengthening the quality of education and practice of nurses and midwives will significantly contribute to accelerated reduction of maternal and neonatal mortality.

WHO emphasizes the necessity of strengthening of health systems<sup>2</sup> to improve the quality and efficiency of health service delivery (WHO 2011). Some global and Regional initiatives have articulated commitment and called for programmes to strengthen the health systems in Africa, including the health workforce (WHO 2012), but the imbalance in quantity and quality of human resources for health remain some of the most serious impediments to scaling up interventions for improving health outcomes in most African countries (USAID 2010). Health systems are labour intensive and to handle the advancing technology and complex health problems they require a well-educated and experienced health workforce who is better prepared at meeting these needs than the lower categories of workers (WHO 2007, Frenk et al. 2010). Nurses and midwives are not only a critical component of the human resources for health in Africa but also are known to function at all levels of care, contributing to improved coverage of health services for the population as a whole (WHO 2011, 2012). The cost implications of training these cadres of health workers and their utilization are often subjects of debate among health systems operators who often want and are able to lower costs through using lower categories of health workers (Buchan and Dal Poz 2002, WHO 2002). Investing in education of nurses and midwives is critical (WHO 2012).

Education and training programmes for nurses and midwives in Africa vary widely in approaches, models and level of training (WHO 2012). In some countries the programmes allow qualification in two specializations such as nursing and midwifery or nursing and public health, whereas in other countries only a single specialization is allowed, for example just nursing or midwifery. These qualifications are recognized for entry into the first-level of the nursing profession in most countries.

Concerns have been raised about the education and training of nurses and midwives. Some of these relate to the (i) programme quality; (ii) admission requirements inconsistencies; (iii) curricular that are fragmented, content driven rather than competency-based, predominantly disease and hospital oriented, and poorly aligned to the needs of the health care system and the populations; and (iv) poor quality of teachers who implement the curricula (Frenk et al. 2010, WHO 2011, WHO 2012, WHR 2006).

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2. A health system consists of all the organizations, institutions, resources and people whose primary purpose is to improve health.

## 1.3 Rationale for this curriculum

This curriculum was developed to address the health and health-systems challenges identified in the African Region. The complexity and acuity of health problems in the African context make it imperative that the health worker be a multi-skilled individual with enhanced competencies to provide comprehensive care, manage the various disease conditions in diverse health-care settings for people of all ages and make referrals for appropriate services accordingly. Nurses and midwives should be able to deal with challenges such as epidemiological and demographic disease shifts, medical and technological advances, rises in public health demand, health systems reforms, and the obstacles of poverty, and gender and human rights (WHO 2007). Ensuring that health workers have the appropriate combinations of skills required to practise within different health delivery contexts requires multidisciplinary and multi-sectoral collaboration.

This curriculum emphasizes self-directed and learner-centred approaches to teaching and learning for the development of competencies, which include transferable life skills such as critical-thinking, teamwork, problem-solving ability, communication, technology abilities and lifelong learning. This curriculum is generic and countries can adapt, adopt or use it as a base to improve or review their curricula.

## 1.4 The process of developing this curriculum

The process of developing this curriculum was extensive and highly consultative and took place from 2009 to 2013. It started with an evaluation of existing basic nursing and midwifery curricula in the Region. This was followed by desk reviews of existing curricula from 20 countries<sup>3</sup> and the West Africa Health Organization (WAHO), the harmonized curriculum for West African countries, the model curricula for direct-entry and post-basic midwifery from the International Confederation of Midwives (ICM), and the model curriculum for midwifery from WHO. Six technical consultative meetings involving 98 experts from francophone and anglophone countries, partners and key stakeholders from WHO priority programmes were held. The first meeting shared the results of the WHO survey on the state of nursing and midwifery education regional and country, identified priority interventions, conceptualized the process for developing the curriculum and worked with stakeholders to build consensus on the need for the prototype curriculum. The meeting also provided an opportunity to engage stakeholders from the priority health programmes

(HIV/AIDS, malaria, tuberculosis, non-communicable diseases, nutrition, maternal, neonatal and child health and health systems strengthening) all who made valuable contributions on the priority interventions that the training programmes should address to produce relevant health workers to effectively deliver the required interventions. The second consultative meeting focused on mapping the curriculum and developing its framework. The following three meetings dealt with the development of the three specific curricula and agreed on the implementation guidelines. The sixth meeting focused on validation of the curricular through reviewing the drafts to (i) identify gaps, (ii) ensure content relevance, harmony with existing WHO documents on education and training of health workers and consistency in relation to the expected outcomes, and (iii) assess the technical validity of the content and edit the drafts.

3. Benin, Botswana, Burkina Faso, Cameroon, Cape Verde, Cote d'Ivoire, Democratic Republic of Congo, Ghana, Guinea, Liberia, Malawi, Mali, Niger, Nigeria, Senegal, Togo; Sierra Leone, South Africa, Swaziland, Zambia, Zimbabwe



## **2. Structure of this Curriculum**

## 2. Structure of this Curriculum

This curriculum is intended to be covered in a minimum of four years or eight semesters. It consists of 35 modules, with 1 credit hour equivalent to 15 hours of classroom time and 45 hours of practice. The theory to practice ratio is one to three, which means that one hour of lectures is equivalent to three hours of clinical experience. The details are shown in Table 1.

### 2.1 Vision statement

The vision for this curriculum is to produce a competent nurse-midwife who contributes to improvement of health outcomes for individuals, families, groups and communities through providing quality, culturally sensitive and evidence-based nursing and midwifery health services.

### 2.2 Mission statement

To develop competent and confident graduates who will be leaders in providing safe and compassionate quality care in response to the nursing, midwifery and health needs of individuals, families, groups and communities in different health care settings.

### 2.3 Goal

The aim of this curriculum is to produce competent professionals who will respond to priority health needs and issues by providing holistic nursing and midwifery care that is ethical, safe and informed by best available evidence and sound theoretical knowledge to positively impact the health and quality of life of individuals, families, groups and communities.

**Table 1: Curriculum structure**

Year	Code	Semester 1	Hrs	Cr	Code	Semester 2	Hrs	Cr
<b>1</b>	COM 101	Communication and ICT	45	3	NURS100	Professional, ethical and legal aspects of nursing	30	2
	SOC 102	Sociology	60	2	PSY 102	Psychology	45	3
	APH 101	Anatomy and physiology	60	4	NUD 102	Nutrition and Dietetics	30	2
	NURS 101	Fundamentals of nursing (theory)	30	2	NURS102	Health assessment (theory)	45	3
	NURS 103	Fundamentals of nursing (clinical)	135	3	NURS 104	Health assessment (clinical)	135	3
	MIP 101	Microbiology and parasitology	45	3	BIO106	Introduction to Biochemistry	30	2
	<b>Total</b>	<b>6</b>	<b>375</b>	<b>17</b>		<b>6</b>	<b>315</b>	<b>15</b>
<b>2</b>		<b>Semester 3</b>				<b>Semester 4</b>		
	NURS 201	Community health nursing (theory)	45	3	NURS 202	Paediatric nursing (theory)	45	3
	NURS 203	Community health nursing (clinical)	135	3	NURS 204	Paediatric nursing (clinical)	135	3
	PHARM 201	Pharmacology	45	3	NURS 206	Medical and surgical nursing 2 (theory)	60	4
	NURS 205	Medical and surgical nursing 1 (theory)	60	4	NURS 208	Medical and surgical nursing 2 (clinical)	170	4
	NURS 207	Medical and surgical nursing 1 (clinical)	170	4				
	<b>Total</b>	<b>5</b>	<b>454</b>	<b>17</b>		<b>4</b>	<b>410</b>	<b>14</b>

Year	Code	Semester 1	Hrs	Cr	Code	Semester 2	Hrs	Cr
		<b>Semester 5</b>				<b>Semester 6</b>		
<b>3</b>	MID 301	Foundations of midwifery and Anatomy & Physiology in midwifery	75	5	MID 300	Midwifery science 2 (theory)	60	4
	MID 303	Midwifery science 1 (theory)	45	3	MID 302	Midwifery practice 2 (clinical)	<b>170</b>	<b>4</b>
	MID 305	Midwifery practice 1 (clinical)	170	4	MID 304	New-born baby (theory)	45	3
	NURS307	Introduction to research	45	3	MID 306	New-born baby (clinical)	135	<b>3</b>
	<b>Total</b>	<b>4</b>	<b>335</b>	<b>15</b>		<b>4</b>	<b>410</b>	<b>14</b>
		<b>Semester 7</b>				<b>Semester 8</b>		
<b>4</b>	NURS 401	Mental health and psychiatric nursing (theory)	45	3	NURS 400	Community midwifery (theory)	<b>45</b>	<b>3</b>
	NURS 403	Mental health and psychiatric nursing (clinical)	135	3	NURS 402	Community midwifery (practical)	<b>170</b>	<b>4</b>
	NURS 405	Health services management (theory)	45	3				
	NURS 407	Health services management (clinical)	135	3				
	<b>Total</b>	<b>4</b>	<b>360</b>	<b>12</b>		<b>2</b>	<b>215</b>	<b>7</b>
<b>Grand total</b>							<b>2904</b>	<b>104</b>

## 2.4 Learning outcomes

On successful completion of the four-year nursing and midwifery programme, the graduate should be able to:

- Apply knowledge, skills and attitudes from basic nursing and social, psychological and biomedical sciences in providing care for all age groups within the context of primary health care.
- Apply knowledge and skills from psychosocial and biological sciences and midwifery theories and concepts, including midwifery management process and nursing sciences, in managing health needs and problems affecting women in the reproductive age group and new-born babies.
- Provide culturally sensitive quality nursing and midwifery care to clients taking into consideration the ethical, legal and professional aspects of the practice.
- Communicate effectively using current technologies with members of health-care teams, clients and other stakeholders in the delivery of health-care services.
- Collaborate with clients, members of multidisciplinary health teams and other key stakeholders in planning, implementing and evaluating care for individuals, families and communities to provide quality nursing and midwifery services.
- Demonstrate responsibility and accountability in the provision of nursing care.
- Apply the midwifery management process in the provision of care for women with healthy preconception, pregnancy, intrapartum and postpartum stages and in managing neonates.
- Demonstrate professional competence in the management and referral of women with pregnancy, labour or postpartum complications and their new-born babies, including for obstetric and neonatal emergencies.
- Take responsibility for personal and colleagues' continuing professional development needs to maintain or advance competencies and improve the quality of care.
- Provide leadership in nursing and midwifery practice, management, education and governance.

## 2.5 Philosophy

The philosophy underpinning this curriculum encompasses five interrelated elements: health, nursing and midwifery, person or client, the environment, the learner and the learning process. The philosophy of this curriculum is embedded in the belief that *health* is a dynamic process with many facets, including the degree of wellness and well-being and the quality of life that a client experiences. *Nursing and midwifery* care in the African Region should, therefore, encompass promotion of health, prevention of illness and care of the ill, the disabled and the dying. This involves autonomous and collaborative care of persons throughout the lifespan, families, groups and communities in all settings. It requires promoting the provision of care in a safe *environment*, including for human rights and respect of human dignity.

The curriculum emphasizes self-directed learning with the teacher acting as a facilitator of the learning process. In that role, the teacher uses innovative teaching and learning strategies that promote active participation of the learner throughout the learning process.

## 2.6 Conceptual framework

The conceptual framework for this prototype curriculum encompasses a set of elements around which the different aspects of the nursing and midwifery content are organized to form a set of meaningful and related units. It shows how the curriculum content and educational experiences should be organized in order to develop the expected competencies. The framework depicts the *learner* as the central factor in the learning process and who, with the support, guidance and direction of the *teacher*, or the facilitator of learning, is able to develop into a competent nurse. The graduate will emerge as a competent health-care provider, change agent, communicator, decision-maker, leader or manager. Other concepts include the *learning environment* and the *learning experiences*, which are crucial for the success of the learner (see **Figure 1**).

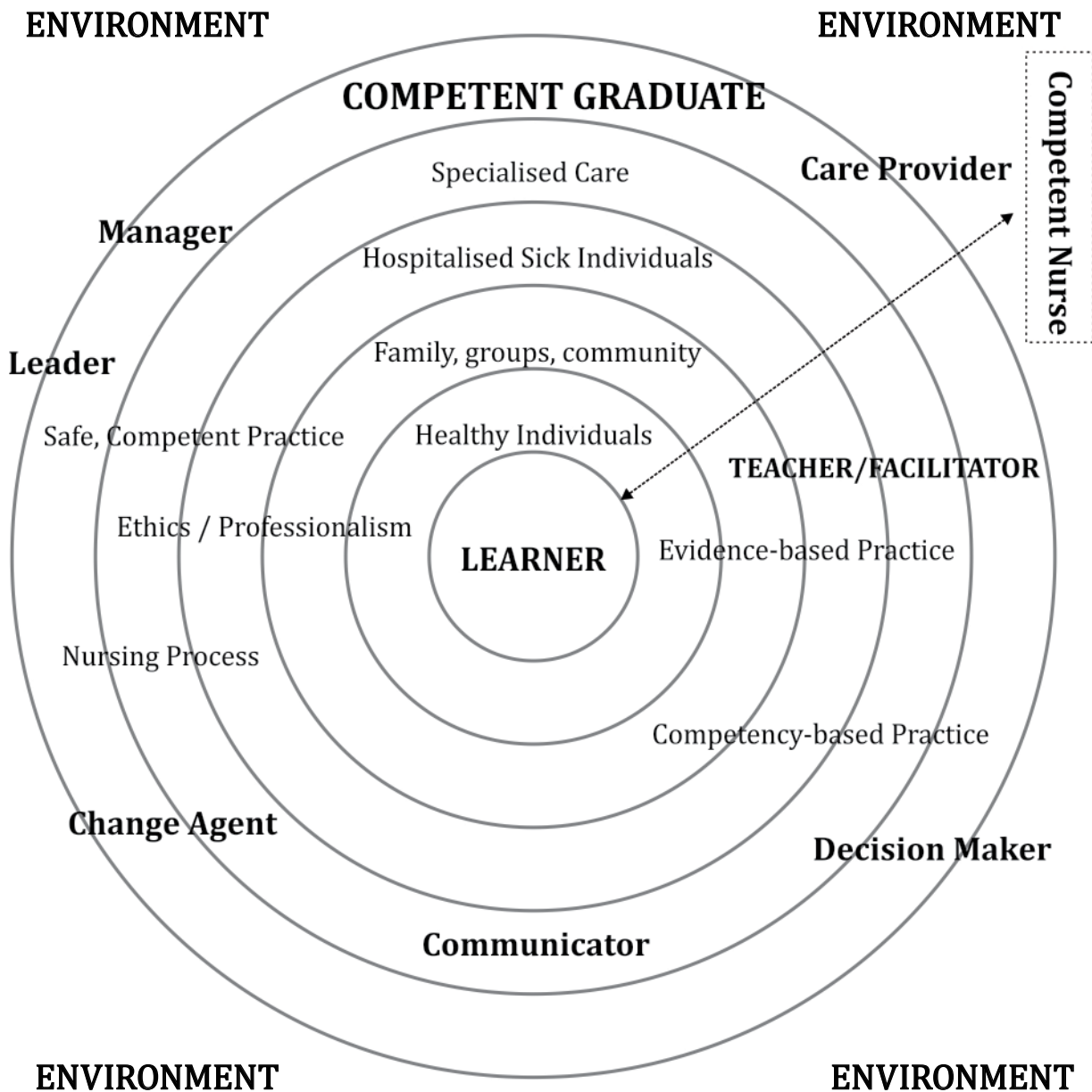
The concepts presented on the horizontal axis in **Figure 1** are introduced early in the programme and applied in all the other learning experiences across the three levels of the programme. These concepts include:

- The nursing process: assessing the patient and planning and providing health care service and evaluating its effectiveness.
- The health-care system: primary, secondary and tertiary health-system settings.
- Primary health care: health promotion and illness prevention, curative and rehabilitative care, and adoption of a patient-centred and integrated approach.
- Ethics: nursing core values, professionalism and advocacy for patients' rights.
- Evidence-based practice: accessing, gathering, synthesizing, utilizing and generating information.

The framework also shows concepts concerned with the learner's progress in the programme, reflecting how the comprehensiveness of the curriculum content advances over time. It depicts the theory (knowledge) and skills that students build on over the course of their educational experience. Students are first exposed to activities of daily living of healthy individuals of all ages, families, groups and communities, then of hospitalized individuals and later of patients with specialized needs such as nursing and psychiatry and other mental health issues.

All aspects of the nursing curriculum, whether they are theoretical or clinical, are integrated to give cohesiveness to the whole curriculum. This integration is articulated in various ways, including through the course content, learning outcomes and graduate characteristics, as well as the teaching, learning and assessment strategies employed. All these processes take place in an environment selected for the purpose of nursing learning experiences but that is also influenced by external factors.

**Figure1: Conceptual framework for the integrated, competency-based curriculum**





## 2.7 Characteristics of the graduate of this programme

The graduate from this programme will be a competent, safety-conscious, responsible, accountable, compassionate and self-directed nursing and midwifery care provider, leader, manager and educator. He or she should be a critical thinker, relying on evidence and functioning effectively in a variety of health-care settings with1 in the context of primary health care.

## 2.8 Entry requirements

The four-year, integrated nursing and midwifery curriculum is designed for candidates who have completed secondary school education or meet the country-specific requirements for entrance into tertiary or higher education institution.

## 2.9 Nature of the programme

This is a full-time, generic pre-service curriculum offered for a minimum of four years or eight semesters. Clinical experience should be emphasized throughout the programme and should take place in carefully selected settings that facilitate proper learning and skill acquisition for effective practice by the learners. For a competency-based curriculum, internships are critical to develop the capability of the graduates of the programme to practice effectively and efficiently. It is strongly recommended that the countries accommodate opportunities for this. The programme will be certified according to the accreditation system of the specific country.

## 2.10 Expected competencies

The competencies developed in this programme include knowledge, skills and attitudes crucial for the professional nurse-midwife to function adequately within all health-care systems and the community. These competencies, which will be progressively developed in different levels of the programme, are:

- Interpersonal relationships and communication
- Professionalism
- Ethical and legal health-care practice
- Teamwork and collaboration
- Accountability
- Continued competence development
- Evidence-based practice
- Quality improvement
- Safety
- Patient- and client-centred care
- Health promotion
- System-based approach to nursing and midwifery
- Integration of basic sciences in nursing and midwifery
- Integration of clinical knowledge and skills in patient care
- Leadership

These competencies are based on information from various African and international nursing practice competency frameworks, including the East, Central and Southern Africa College of Nursing (ECSACON)<sup>5</sup> WHO,<sup>6,7,8</sup> the International Council of Nurses (ICN)<sup>9</sup> and the International Confederation of Midwives (ICM).<sup>10</sup> In addition, relevant documents from the Colleges of Medicine of Wayne and Massachusetts Universities, USA, the University of British Columbia School of Nursing, Canada and the Australian College of Nursing<sup>11</sup> were consulted.

To draw up the competencies list, several national health strategic documents and WHO regional strategies were reviewed, and discussions were held on key interventions with representatives from WHO priority programmes such as those on HIV/AIDS, Sexual Reproductive Health, tuberculosis and malaria, and maternal, child and adolescent health, as well as other relevant regional partners. Cross-validation of the competencies was undertaken comparing the list with existing curricula from 20 countries in the African Region representing francophone and anglophone countries.<sup>12</sup>

## 2.11 Prerequisites

For students to progress to the next level, they must first fulfil the requirements of the preceding level.

## 2.12 Teaching and learning methods

The methods chosen are those that best promote self-directed learning, critical thinking and acquisition of required essential competencies. Therefore, a combination of teaching and learning methods has been adopted to ensure adequate and appropriate information flow and learner participation. The teaching and learning methods suggested include lectures, case presentations, visual aids, individual and group assignments, seminar presentations, skills laboratory work, group learning, problem-based learning, demonstrations, artificial models and simulations, role play, standardized clinical experience with patients, case studies or projects, e-learning, readings, discussions, reflection on experience, and feedback on learning and performance.

Clinical teaching and learning should take place in carefully selected clinical settings with rich and diverse learning experiences in line with the curriculum outcomes and the graduate's competencies. It should be facilitated by both the classroom teachers and clinicians serving as mentors or preceptors. The availability of reading resource materials and an adequately stocked library will enhance the teaching and learning experiences of learners.

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5. ECSACON

6. WHO Regulatory Framework

7. WHO, IMCI

8. WHO, SRH

9. ICN Framework of Nursing competencies

10. ICM Essential Midwifery Competencies

11. All other – Wayne, Mass, B. Col, etc.

12. Benin, Botswana, Burkina Faso, Cameroon, Cape Verde, Cote d'Ivoire, Democratic Republic of Congo, Ghana, Guinea, Liberia, Malawi, Mali, Niger, Nigeria, Senegal, Sierra Leone, South Africa, Swaziland, Zambia and Zimbabwe

## 2.13 Assessment methods and strategies

A range of formative and summative assessment strategies should be used for theoretical and clinical aspects of the programme. They should include assignments and projects, tests, clinical reflection, clinical practice, checklists, observation, skills portfolios, case presentations, peer reviews, patient assessments and reviews, logbooks, written and practical final examinations using the objective structured clinical examination (OSCE) structure, and other relevant assessment measures. Evaluation and assessment should use objective and credible tools.

## 2.14 Clinical placement

Clinical experience for nurses and midwives should take place in hospitals; clinics, schools, industries, workplaces; and community settings under the supervision of educators and the mentors (clinical staff) who are nurses or midwives and with the cooperation and assistance of other qualified health professionals. It is essential that the placement settings be carefully selected to ensure not only the quality of the environment but also the ability and motivation of clinical staff who mentor and supervise the learners at the various stages of the programme. The placement should take place only after or concurrently with classroom teaching. The learner should be supervised in a way that provides opportunities for the learner to integrate theory and practice. There should be agreement between the educational institution and the clinical placement institution on how the internship will be conducted.

## 2.15 Module evaluation

Training Institutions should recognize the importance of regular and continuous evaluation of the modules to ensure consistency and appropriateness of the expected outcomes to the graduates of the programme. Mechanisms for continuous and systematic evaluation of the module content should be put in place to ensure continued improvement and effectiveness of the curriculum. Recommendations made or adopted from the module evaluation should be used to effect the appropriate modifications to the curriculum.

## 2.16 Curriculum timescale

The four-year integrated nursing and midwifery curriculum comprises 8 semesters of 15 weeks each (see table 2). The academic year has 42 weeks each of 40 hours, for a total of 1680 hours. The full academic load for the semester depends on the programme level, beginning with six modules per semester in the first year, followed by five modules in the first semester in the second year and then four modules per semester for the rest of the programme, except the last semester for which the full load is two modules to allow students enough time for timeous completion of the programme requirements. Two weeks are set aside for evaluation. The students' six-week vacations after the first and second semesters are not included in **Table 2**.

**Table 2: Programme timescale**

Semester	Module		Year 1		Year 2	
			Oct–Jan	Mar–Jun	Oct–Jan	Oct–Jan
<b>1</b>	1	Communication ICT	<b>6</b>			
	2	Sociology				
	3	Anatomy and physiology				
	4	Fundamentals of nursing (theory)				
	5	Fundamentals of nursing (clinical)				
	6	Microbiology & parasitology				
<b>2</b>	7	Professional, ethical and legal practice		<b>6</b>		
		Psychology				
	8	Nutrition and dietetics				
	9	Health assessment (theory)				
	10	Health assessment (clinical)				
	11	Introduction to biochemistry				
<b>3</b>	13	Community health nursing(theory)			<b>5</b>	
	14	Community health (clinical) Pharmacology				
	15	Medical and surgical nursing I (theory)				
	16	Medical and surgical nursing I (clinical)				
	17					
<b>4</b>	18	Paediatric nursing (theory)				<b>4</b>
	19	Paediatric nursing (clinical)				
	20	Medical-surgical nursing 2 (theory)				
	21	Medical-surgical nursing2 (clinical)				

Semester	Module		Year 3		Year 4	
			Mar–Jun	Mar–Jun	Oct–Jan	Mar–Jun
<b>5</b>	22	Foundations of midwifery and A&P in midwifery	<b>4</b>			
	23	Midwifery science 1(theory)				
	24	Midwifery practice 1 (clinical)				
	25	Introduction to research				
<b>6</b>	26	Midwifery science 2 (theory)		<b>4</b>		
	27	Midwifery practice 2 (clinical)				
	28	New-born baby (theory)				
	29	New-born baby (clinical)				
<b>7</b>	30	Mental health/psychiatric nursing (theory)			<b>4</b>	
		Mental health/psychiatric nursing				
	31	Health service management (theory)				
	32	Health services management (clinical)				
<b>8</b>	33					
	34	Community midwifery (theory)				<b>2</b>
	35	Community midwifery (clinical)				

## **SECTION 2:**

### **THE NURSING CURRICULUM MODULES, MODULE DESCRIPTIONS, CONTENT 1, TEACHING/ LEARNING/ ASSESSMENT METHODS AND RESOURCES**

## **3. Curriculum Content and Resources**

## 3. Curriculum Content and Resources

### 3.1 Year 1

#### 3.1.1 Introduction

The general emphasis in Year 1 is on basic modules that expose learners to the health needs of the individual client, the family and the community and the context within which health care is provided. Learners will gain knowledge, skills and attitudes for nursing and midwifery in theory sessions and from clinical experience. They will build on these skills in subsequent years.

#### 3.1.2 Learning outcomes

On successful completion of **Year 1** the learners will be able to:

1. Integrate and apply the knowledge from biomedical, psychological, social, nursing and midwifery sciences in the provision of care.
2. Initiate and maintain therapeutic communication with clients or their families and other health workers.
3. Utilize knowledge on family structures, culture, religion and other aspects to positively influence the health of individuals, families and communities.
4. Appreciate their role as members of a multidisciplinary health team.
5. Appreciate the ethical and legal principles of nursing and midwifery and provide nursing and midwifery care within the professional, ethical and the legal frameworks guiding the practice.
6. Recognize personal needs for continual learning and utilize appropriate learning resources and opportunities.



### 3.1.3 Semester 1 Modules

#### 3.1.3.1 Communication and ICT

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Communication and information communication technologies(ICT)
5. Module Code	6. COM 101
7. Year	8. One
9. Total hours/credits	10. 45/3

#### Module description

This module is the foundation for all nursing and midwifery modules. It equips learners with communication skills as well as skills to use information and communication technology (ICT). It focuses on interpersonal, intergroup, intercultural, global, therapeutic, effective and nonviolent communication. It also develops learners' competency in the use of ICT.

#### Aim

This module aims to equip the learner with appropriate knowledge and skills for effective academic and therapeutic communication utilizing various modes of communication.

#### Learning outcomes

On successful completion of this module, the learner will be able to:

11. Demonstrate knowledge of the principles and processes of interpersonal and therapeutic communication and relationships.
12. Apply the principles and processes of interpersonal and therapeutic communication to communicate effectively with clients, peers, members of the care team, families, and communities within a multicultural environment.
13. Demonstrate skills in the use of common information and communication technology tools and their application in nursing and midwifery practice.
14. Conduct online literature searches using various databases on nursing and health.
15. Use ICTs to communicate and manage information.

#### Content

- Intrapersonal and interpersonal communication
- Intercultural communication
- Academic communication and writing
- Computer-mediated communication
- Management of information

## Teaching methods

Lecture, critical reading, group discussion, presentations, brainstorming sessions, role play, enquiry-based and self-directed learning, computer demonstration, hands-on practice, tutorials, work book exercises.

## Assessment strategies

### Formative assessment (40%)

Written test on communication, including a word processing exercise and literature searching and referencing.

### Summative assessment (60%)

Theory paper on communication skills, theory paper on ICT.

## Reading materials

1. Country-specific work books on the use of the computer and different types of software
2. Country-specific computerized health care and nursing records
3. Habraken J (2007). Microsoft Office 2007 all in one. Indiana: Que Publishing.

## Competencies

### Competency 1: Therapeutic communication

Interact effectively with clients fostering mutual respect and shared decision-making to enhance client satisfaction and health outcomes.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Understands the principles of effective communication and different means of communication</li> <li>• Uses correct grammar, spelling and health-care terminology</li> <li>• Understands the physiological, psychosocial, developmental, spiritual and cultural influences on effective communication</li> </ul>	<ul style="list-style-type: none"> <li>• Accepts responsibility for communicating effectively</li> <li>• Values mutually respectful communication</li> <li>• Values personal therapeutic interaction in patient care</li> <li>• Appreciates the dynamics of physical and emotional presence in communication</li> <li>• Appreciates the influences of physiological, psychosocial, developmental, spiritual, and cultural influences on personal ability to communicate</li> </ul>	<ul style="list-style-type: none"> <li>• Uses clear, concise and effective written, electronic and verbal communication</li> <li>• Chooses the appropriate means of communication for a specific situation</li> <li>• Assesses the barriers to effective communication associated with language, developmental level, medical condition or disability, anxiety, learning style, etc.</li> <li>• Makes appropriate adaptations in the communication approach based on patient and family assessments</li> <li>• Establishes rapport with clients</li> <li>• Uses effective interviewing techniques</li> <li>• Provides opportunity to ask and respond to questions</li> </ul>

**Competency 2: Teamwork and collaboration: inter professional communication**

Communicate effectively with member of the team and peers.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands differences in communication styles among nurses, and other members of the health team</li> </ul>	<ul style="list-style-type: none"> <li>Values effective communication amongst member of team</li> </ul>	<ul style="list-style-type: none"> <li>Compile a comprehensive nursing care report about the patient's condition as part of communicating with other members of the team Written patient reports and nursing care entries are clear and understandable to other members of the team</li> <li>Communicates clearly patient's condition and activities performed when handing over to other members (e.g. when going off or going for lunch or taking patient to x-ray department)</li> </ul>

**Competency 3: Ethics and professionalism**

Respect diversity of clients when communicating health information.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the influences of different learning styles on the education of clients and families</li> <li>Demonstrate knowledge of principles of teaching and learning applicable to diverse groups</li> <li>Understands the concept of health literacy and how to adapt it for different groups</li> <li>Understands the process of cooperative learning</li> </ul>	<ul style="list-style-type: none"> <li>Respects diversity of patients and families</li> <li>Values the patient's and family's right to know the reason for chosen interventions</li> </ul>	<ul style="list-style-type: none"> <li>Assesses with respect factors that influence the patient's and family's ability to learn, including readiness to learn, preferences for learning style, and levels of health literacy</li> <li>Assists patients and families in accessing and interpreting health information and identifying healthy lifestyle behaviours</li> <li>Provides relevant and sensitive health education information and advice to patients and families in a considerate manner</li> </ul>

**Competency 4: Legal practice**

Keep records according to the ethical and legal frameworks of the profession.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands legal frameworks guiding documentation of interventions</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the legal implications of record keeping</li> </ul>	<ul style="list-style-type: none"> <li>Documents interventions and nursing outcomes according to professional standards and work unit policy</li> </ul>

## Competency 5: Information technology

Use information and technology to communicate and manage information.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands concepts included in basic computer competencies</li> <li>Explains why information and technology skills are essential for the professional nurse</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the importance of basic computer competence to contemporary nursing practice in managing knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrates proficiency in:</li> <li>Using the computer and managing files</li> <li>Word processing</li> <li>Excel spreadsheet</li> <li>Accessing and using various nursing and health related databases</li> <li>PowerPoint presentations</li> <li>Web browsing and communication</li> <li>Performs basic troubleshooting when using computer applications</li> <li>Extracts selected electronic resources for integration of obtained knowledge into academic assignments</li> <li>Evaluates electronic information and its sources and incorporates selected information into academic assignments</li> <li>Utilises IT to communicate with peers and members of the team</li> </ul>

### 3.1.3.2 Sociology

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Sociology
5. Module code	6. SOC 102
7. Year	8. One
9. Total hours/ credits	10. 60/4

## Description

This module introduces the learner to sociology as related to nursing and midwifery health care provision. The learner will gain knowledge on society and its characteristics, norms, customs and beliefs, family structures, gender and other social determinants of health and their influence on health-seeking behaviours and eventual health outcomes. The effects of social factors on the health of special populations, including vulnerable and marginalized groups, will also be considered.

## Aim

The module aims to develop the learner's awareness of patients' cultural and religious beliefs, customs and taboos, family structure, gender and other social determinants of health in order to appropriately promote healthy behaviours among clients, families and communities, including special populations and marginalized groups.

## Learning outcomes

On successful completion of this module, the learner will be able to:

1. Demonstrate knowledge of the basic concepts of sociology and their effect on health and the practice of nursing and midwifery.
2. Demonstrate knowledge of social units, including the structure of family and special groups, including ethnic, marginalized and vulnerable groups, and related health factors.
3. Demonstrate knowledge of the social determinants of health.
4. Apply knowledge on the social determinants of health including gender, culture, religion, social problems, violence, etc. in health promotion, disease prevention and health-care provision.

## Content

### Sociology and Nursing

- Sociology terminology applicable to nursing and health
- Socialisation, religion, culture, sub-culture, social norms, beliefs, values, customs and practices – implications to health
- Health beliefs and practices and their influence on health, health promotion and illness prevention
- Demography and determinants of health
- Sociology of illness and health
- Religion and health
- Concepts of social stratification, social influence, and empowerment
- Economic status, power and social inequalities

### Family

- Types of families and functions
- Marriage and types of marriages
- Roles and relationships of family members, health and family

### Gender, ethnicity and health

- Gender roles
- Domestic violence and Gender-based violence
- Girl and boy child in Africa implications to health

## Sociology of social problems

- Violence as a social problem; definition, theories of violence, prevalence and quality of life
- Health effects of homelessness, unemployment
- Rape as social problem; definition, theories about rape, rape and of life
- Crime as a social problem, definition, theories about crime and quality of live
- Suicide
- Health enhancing versus risk-taking behaviours; smoking, alcohol abuse, drugs and other substance abuse

## Teaching methods

Group discussions, seminars, problem-based learning and scenarios, role play, lecture, videos and field trips to special organizations such as those dealing with survivors of gender-based violence and displaced children, and reflective diaries.

## Assessment strategies

### Formative assessment

Test, field trip report.

### Summative assessment

Three-hour written examination.

## Reading materials

1. Adorno TW: Introduction to sociology. Stanford University Press.
2. Groves E (2007).An introduction to sociology. Longmans, Green and Company.
3. Nettleton S (2006). The sociology of health and illness. Polity Press.
4. White K (2009). An introduction to the sociology of health and illness. Sage Publications (CA).

## Competencies

### Competency 1: Care Provision

Utilize knowledge on family structures, culture, religion and other factors to positively influence the health outcomes of individuals, families and communities.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates familiarity with family structures, culture, religion and other factors that influence health of individuals, families and communities</li> <li>Understands the social determinants of health</li> <li>Identifies contributions of other health team members, families and others needed to reach goals</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the importance of the family structure, culture, religion etc. in health of individuals and others</li> <li>Respects the contribution of patients' culture, religion and family to health and health practices</li> <li>Values perspectives and expertise of all health team members and their contribution to patient care</li> </ul>	<ul style="list-style-type: none"> <li>Adapts patient-care based on relevant factors relating to culture, gender, religion, etc.</li> <li>Incorporates information on culture, family structure and religion in the provision of relevant care</li> <li>Integrates contributions of others in assisting patients, families and others to achieve optimal health</li> </ul>

### Competency 2: Health promotion

Understand the use of advocacy as a means of health promotion.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the importance of advocacy in health promotion</li> <li>Identifies patient-care activities that ensure involvement of the patient and engender trust</li> </ul>	<ul style="list-style-type: none"> <li>Values information from different sources as vital for adequate planning of and advocacy for patient health</li> <li>Responds to patient needs in a manner that fosters respect and trust and collaboration with other team members</li> </ul>	<ul style="list-style-type: none"> <li>Engages in advocacy in partnership or collaboration with other health and relevant groups for positive health outcomes</li> <li>Coordinates care activities and maintains collegial professional relationships</li> </ul>

### 3.1.3.3 Anatomy and Physiology

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Anatomy and Physiology
5. Module Code	6. APH 101
7. Year	8. One
9. Total hours/credits	10. 60/4

## Description

This module covers anatomy and physiology of a normal body as the basis for developing the skills to recognize abnormality and for providing comprehensive, quality nursing care and health promotion information to individuals, families and communities.



## Aim

The aim of this module is to provide learners with knowledge on the anatomy and physiology of a normal human body as they relate to nursing and midwifery.

## Learning outcomes

1. On successful completion of this module the learner will be able to demonstrate knowledge of:
2. The normal structure and specific components of the human body, such as cell tissues and organs.
3. The anatomical location, structure and physiological functions of each major system of the human body.
4. The normal functions of the human body, specifically cell tissues and organs.
5. The relationships among cells, tissues, organs and bodily systems and their interactions.
6. The normal human physiological growth and development.

## Content

- Structure of the human body
- Respiratory system
- Hemopoietic system
- Cardiovascular system
- Fluids and electrolytes
- Integumentary system
- Digestive system
- Urinary system
- Locomotor system
- Muscular system
- Integration, protection and control of the body
- Nervous system
- Endocrine system
- Female and male reproductive systems and their structure and functions

### Special senses

- Structure and functions

## Teaching methods

Lectures, problem-based learning, discussion, tutorials, laboratory demonstration sessions in small groups, e-learning, video recording and other audio-visual aids such as posters and models, and directed study.

## Assessment strategies

### Formative assessment (40%)

Assignments, laboratory practice, worksheets and reports, tests.

### Summative assessment (60%)

Three-hour examination paper.

## Reading materials

1. Marieb EM (2006). Essentials of anatomy and physiology, 10th ed. New York: Benjamin Cummings.
2. Drake R, Vogl W, Mitchell AWM (2005). Gray's anatomy for students. Toronto: Elsevier.
3. Stuart F (2008). Human physiology, 10th ed. New York: McGraw-Hill.
4. Stuart F (2008). Laboratory guide to human physiology. New York: McGraw-Hill.
5. Marieb EN (2005). Anatomy and physiology. San Francisco: Pearson.
6. Saladin KS (2008). Human anatomy, 2nd ed. New York: McGraw-Hill.
7. Tortora GJ, Grabowski SR (2003). Principles of anatomy and physiology, 10th ed. London: Wiley MacMillan.

## Competencies

### Competency 1: Care provision

Demonstrate understanding of the integration of basic science into nursing and midwifery practice.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of the anatomy and physiology of the normal human body, specifically the cells, tissues, organs and systems</li> <li>• Understands body mechanics and its importance in patient care</li> </ul>	<ul style="list-style-type: none"> <li>• Recognizes abnormalities in the structure and functions of the human body</li> <li>• Promotes proper safety and comfort measures to ensure normalcy of the human body</li> </ul>	<ul style="list-style-type: none"> <li>• Describes the structure and functions of the human body including the systems</li> <li>• Demonstrates the ability to illustrate body parts including the systems</li> <li>• Identifies potential risks to patients from abnormalities in body mechanics and takes appropriate action</li> <li>• Demonstrates ability to correctly assess and examine the patient</li> </ul>

### 3.1.3.4 Fundamentals of Nursing (Theory)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Fundamentals of nursing (Theory)
5. Module Code	6. NURS 101
7. Year	8. One
9. Total hours/credits	10. 30/2

## Description

This module forms the base for all the other nursing and midwifery modules. It covers the foundations of nursing and midwifery. It deals with self-care and basic health needs and activities of daily living for sick or well individuals and their families, covering all age groups and using a systematic approach. The process and requirements of health education that lead to positive health behaviours are dealt with.

## Aim

The aim of this module is to prepare the learner in competencies required for providing basic nursing and midwifery clinical care.

## Learning outcomes

At the end of this module, the student will be able to demonstrate knowledge of the:

1. Contribution of nursing and midwifery to health and health-care system of the country.
2. Role of nurses and midwives in multidisciplinary health teams, nursing and midwifery regulatory bodies and professional associations and in enhancing nursing and midwifery.
3. Requirements of the ethical and legal frameworks guiding the nursing and midwifery profession and practice.
4. Operation of the health-care system of the country and the different role players.
5. Basic needs of clients of different age groups.
6. Assessment of basic needs of clients using different nursing models.
7. Steps of the nursing process.
8. Safety in nursing and midwifery and standard precautions to take with patients to ensure their safety.
9. Principles of biophysics in the provision of nursing care.

## Content

- The nurse in the health-care setting
- Nursing process
- Health perceptions
- Health and illness
- Effects of hospitalization or illness
- Health-care delivery system
- Theories, nursing models and interactive processes
- Introduction to selected theories, models and the nursing process
- Provision of a safe environment
- Basic client needs
- Activities of daily living
- Assessment and management of selected signs and symptoms of a client:
  - Fever
  - Hypothermia
  - Nausea and vomiting
  - Diarrhoea
  - Transfer, discharge and referral of a client
- Emergency care:
  - Aims and principles of first aid
  - Bandaging and splinting
  - Methods of lifting and transferring patients
- Management of clients for the following emergency conditions:
  - Spinal or chest injuries
  - Drowning
  - Wounds
  - Burns and scalds
  - Epileptic fits or infantile convulsions
  - Fainting and exhaustion
  - Fire or ward accidents
  - Poisoning
  - Injuries from corrosives, strong acids or alkalines
- Pain assessment and management
- Management of death or dying
- Managing relatives of a dying patient
- Last offices and rites
- Grieving process

## Teaching methods

Discussion sessions, seminars, lectures, demonstrations, self-directed study, interactive videos, reflective diaries, medication dosage computation worksheets, self-paced learning, simulation of clinical skills in the laboratory, buzz groups.

## Assessment strategies

### Formative assessment (60%)

Individual and group assignments, mid-module tests, reflective diaries.

### Summative assessment (40%)

Three-hour examination paper.

## Reading materials

1. Sanoski C, Vallerand A (2012). Davis's drug guide for nurses, 13th ed. Philadelphia: FA Davis Co.
2. Doenges M, Moorhouse M, Murr A (2010). Nurse's pocket guide: diagnoses, prioritized interventions and rationales, 12th ed. Philadelphia: FA Davis Co.
3. Lynn P (2011). Taylor's clinical nursing skills: a nursing process approach, 3rd ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
4. Smeltzer S, Bare B, Hinkle J, Cheever K (2010). Brunner and Suddarth's textbook of medical-surgical nursing, 12th ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
5. Taylor C, Lillis C, LeMone P, Lynn P. (2011). Fundamentals of nursing, 7th ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
6. Van Leeuwen A, Poelhuis-Leth D. (2011). Davis's comprehensive handbook of laboratory and diagnostic tests with nursing implications, 4th ed. Philadelphia: FA Davis Co.

### 3.1.3.5 Fundamentals of Nursing (Clinical)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Fundamentals of Nursing (Clinical)
5. Module Code	6. NURS 103
7. Year	8. One
9. Total hours/credits	10. 135/3

## Description

This is the clinical component module that builds on the fundamentals of nursing theory module. It equips the learners with the knowledge, skills and attitudes required to provide basic nursing care to clients, covering the whole lifespan. It allows for the integration of basic sciences with fundamental nursing practice, and nursing theory with clinical practice. Skills laboratories, health facilities and community venues should be used for clinical placement.

## Aim

This module aims to equip the students with the knowledge, skills and attitudes required to provide basic nursing care to individuals, families and communities.

## Learning outcomes

On successful completion of this module the learners will be able to:

1. Conduct physical examinations in a respectful and culturally sensitive manner.
2. Conduct comprehensive assessments of the health needs of clients using a wide range of technologies.
3. Integrate knowledge on biomedical and psychosocial sciences in the process of assessing clients.
4. Develop and execute individualized basic nursing care plans for clients of all ages.
5. Provide first aid to clients with emergency needs.
6. Build a working relationship with individuals and families in self-care situations.
7. Demonstrate safe practice in executing designated basic nursing skills.
8. Function effectively as a member of the health-care team.
9. Accurately document information obtained from clients and on interventions.

## Teaching methods

Demonstrations, work books, case studies, reflective diaries, learning logs.

## Assessment strategies

### **Formative assessment (60%)**

Practical demonstrations, development of nursing care plan of a client, completion of a practical skills work book, presentation of case studies, reflective diary or learning log.

### **Summative assessment (40%)**

Objective, structured clinical evaluation (OSCE), case presentations, problem-solving examination.

## Skills

The focus of this module will be on developing a range of basic nursing skills required in the provision of care to clients. There will be hands-on practice sessions throughout this module. The content includes:

- Admission procedure
- Hand washing
- Bed making
- Bathing
  - Bed bath
  - Shower bath
  - Assisted bath
- Oral care
- Height and weight measurement
- Taking and recording temperature and blood pressure
- Physical assessment
- Completion of a nursing care plan template
- Moving, lifting and positioning patients
- Measuring and recording fluids
- Care of hair and nails
- Serving of meals
- Feeding of clients
- Insertion of a naso-gastric tube
- Oxygen administration
- Sputum collection and disposal
- Examination of specimens
- Urinalysis
- Suctioning
- Decontamination
- Bandaging
- Splinting
- Artificial respiration
- Cardiac massage
- Fire drill
- Gloving
- Use of protective clothing
- Introducing the flatus tube
- Transfer and discharge procedures
- Last offices

## Reading materials

1. Doenges M, Moorhouse M, Murr A (2010). Nurses pocket guide: diagnoses, prioritized interventions and rationales, 12th ed. Philadelphia: FA Davis Co.
2. Freshwater D, Norris C (2004). Blackwell's nursing dictionary. Wiley-Blackwell.
3. Lynn P (2011). Taylor's clinical nursing skills: a nursing process approach, 3rd ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
4. Martin E, McFerran T (2008). A dictionary of nursing, 5th ed. Oxford University Press.
5. Sanoski C, Vallerand A (2012). Davis's drug guide for nurses, 13th ed. Philadelphia: FA Davis Co.
6. Smeltzer S, Bare B, Hinkle J, Cheever K (2010). Brunner and Suddarth's textbook of medical-surgical nursing, 12th ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
7. Taylor C, Lillis C, Lemone P, Lynn P (2011). Fundamentals of nursing, 7th ed. Philadelphia: Lippincott, Williams, Wilkins & Wolters Kluwer.
8. Van Leeuwen A, Poelhuis-Leth D (2011). Davis's comprehensive handbook of laboratory and diagnostic tests with nursing implications, 4th ed. Philadelphia: FA Davis Co.
9. Weller BF (2009). Bailliere's nurses' dictionary: for nurses and healthcare workers, 25th ed.

## Competencies

### Competency 1: Care provision

Conducts a comprehensive assessment of a client in a caring, respectful and culturally sensitive manner.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes information that needs to be collected from the client's health history prior to the physical assessment</li> <li>Demonstrates knowledge of the range of tools used in assessment of a client</li> <li>Differentiates normal from abnormal vital signs and physical assessment findings</li> </ul>	<ul style="list-style-type: none"> <li>Values culturally sensitive approaches for conducting comprehensive assessments of basic needs of a client</li> <li>Values the necessity of informed nursing diagnosis that is generated in partnership with the client</li> </ul>	<ul style="list-style-type: none"> <li>Conducts safe and effective basic head-to-toe physical assessment, and includes history and vital signs in the assessment</li> <li>Uses a wide range of tools in conducting a comprehensive assessment of a client</li> <li>Generates an accurate nursing diagnosis that is based on the needs of the client</li> </ul>



**Competency 2: Care Provision**

Plan, implement and evaluate individualized needs-based nursing care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the nursing process and explains how it is used</li> <li>Identifies the benefits of applying the nursing process in clinical practice</li> <li>Describes how appropriate data from patient assessment are used to plan and deliver care</li> <li>Integrates understanding of the necessity of activities of daily living in provision of client-centred care</li> </ul>	<ul style="list-style-type: none"> <li>Is respectful of patients' or their families' choices and preferences</li> <li>Values patients' expertise in their own health and symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Utilizes the nursing process to assess, analyse and plan nursing care for individuals with a variety of health-care needs</li> <li>Sets long-term and short-term goals to determine outcomes of care</li> <li>Works with the patient to develop mutually agreed-upon objectives to meet goals</li> <li>Considers patient comfort and safety in delivering care, allowing for possible limitations commonly found with older patients</li> </ul>

**Competency 3: Legal practice**

Keep records correctly according to the legal and ethical frameworks of the profession.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the principles and theory of record keeping</li> </ul>	<ul style="list-style-type: none"> <li>Values proper record keeping in the provision of health care</li> </ul>	<ul style="list-style-type: none"> <li>Documents client information, interventions and nursing outcomes accurately on appropriate forms or records and according to professional standards and work unit policy</li> </ul>

**Competency 4: Safe environment**

Observe principles of safety, risk management and infection control in the provision of nursing care to clients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the concepts and theories of safety and risk management</li> <li>Describes actual and potential risk factors that compromise health and well-being</li> <li>Understands infection control and infection prevention and control measures</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes that both individuals and systems are accountable for safety, risk management and infection prevention and control</li> <li>Appreciates the importance of infection control in provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Conducts an assessment of the client for potential risks such as the risk to develop pressure sores or for injury</li> <li>Uses appropriate body mechanics and ergonomic aids to protect self and others from bodily injury, for example by using appropriate devices such as transfer sheets to move patients</li> <li>Promotes patient activity through encouraging exercise and ambulation</li> <li>Applies universal precautions in the provision of care</li> <li>Takes appropriate safety precautions according to clients' risk assessment or history</li> </ul>

## Competency 5: Ethical and Legal Practice

Functions within the legal frameworks of the country.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the medical and nursing errors and hazards common in the practice</li> <li>Understands the concept of accountability in nursing practice</li> <li>Describes the legal and regulatory factors that apply to nursing practice</li> <li>Understands the ethical principles, values, concepts and decision-making considerations that apply to nursing and patient care</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the complexity and sensitivity of clinical management of medical and nursing errors and adverse events</li> <li>Accepts responsibility for personal behaviour</li> <li>Values professional standards of practice</li> <li>Values and upholds legal and regulatory principles</li> <li>Values the application of ethical principles in daily practice</li> </ul>	<ul style="list-style-type: none"> <li>Uses safety measures to protect patients, self and colleagues from injury and hospital-acquired infections</li> <li>Reports to the leader of the nursing care team adverse findings or errors relating to clients caused in performance of care duties</li> <li>Takes responsibility for own errors made and hazards caused in providing care</li> <li>Demonstrates accountability for own nursing activities</li> <li>Follows recognized professional standards of practice</li> <li>Implements plans of care within legal, ethical and regulatory framework of nursing practice</li> <li>Participates in efforts to resolve ethical issues in daily practice</li> </ul>

## Competency 6: Care provision

Apply first aid principles in the execution of emergency care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates knowledge of the general principles of elementary first aid</li> <li>Demonstrates awareness of the location of emergency resources such as the resuscitation cart, which should be in the clinical area at all times</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the importance of the patient's respect and dignity even in emergency situations</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes and promptly assesses emergency situations</li> <li>Manages emergencies using first aid principles and measures</li> <li>Correctly utilizes bandages and other materials in the emergency kit</li> </ul>

## Competency 7: Teamwork and collaboration

Function effectively as a member of the health team.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the personal role and roles and responsibilities of different members of the health team</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes personal responsibility for contributing to effective team functioning</li> <li>Values the perspectives and expertise of other team members</li> <li>Appreciates the importance of collaboration</li> </ul>	<ul style="list-style-type: none"> <li>Collaborates with and consults other members of the health-care team, specifically those involved in moving and handling interventions for the patient, such as physiotherapists, in a timely manner</li> <li>Demonstrates awareness of personal strengths and limitations as a team member</li> </ul>

### 3.1.3.6 Microbiology and parasitology

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module title	4. Microbiology and parasitology
5. Module Code	6. MIP 101
7. Year	8. ONE
9. Total hours/credits	10. 45/3

## Description

This module introduces the learner to various types of microorganisms and the immune system, as well as parasitological and its relation to illness and health and infection control, and the role of nurses and midwives. The laboratory experiences cover specimen collection, handling and processing for isolation and identification of microorganisms and parasites involved in infection processes. The theoretical knowledge on infection control covered in this module is applied in the fundamentals of nursing clinical module.

## Aim

The aim of this module is to enable learners to understand the application of the knowledge on microbiology and parasitology in disease prevention and control in nursing and midwifery practice.

## Learning outcomes

On successful completion of this module, the learners will be able to demonstrate:

11. Knowledge of disease-causing microorganisms and parasites.
12. Knowledge of harmful microorganisms and parasites.
13. Knowledge of measures to control and prevent the spread of infectious diseases.
14. Understanding of concepts and principles of microbiology and parasitology and their application in the care of clients.
15. Understanding of the principles of disease transmission, including the elements of source, mode of transmission, portal of entry and virulence of pathogens.
16. Correct application of specimen-handling principles and techniques in the collection and handling of specimens.

## Content

### **Microbiology, microorganisms and parasitology**

- Microbiology
- Classification of microorganisms
- Microorganisms and disease: viruses, bacteria, fungi
- Other microorganisms
- Nematodes and human health: cestodes (tapeworms)
- Trematodes (flukes)
- Arthropods as vectors

### **Immunity: adaptive and innate**

- Vaccination and immunization

### **Body cells and the immune response**

- The lymphoid system
- Cell-mediated immune response
- Immune disorders

### **Infection, host resistance and infection control**

- The chain of infection
- Host response to infection; specific and non-specific host resistance
- Nosocomial infections

### **Infection control and universal precautions**

- Main routes of infection
- Infection process
- Reservoirs of infection
- Modes of transmission of infection
- Surgical asepsis
- Medical asepsis

### **Institution and community care policies for prevention of infection: cleaning, disposal of waste, use of protective clothing, isolation**

- Individual strategies for prevention of infection: personal hygiene, hand washing, early detection and reporting
- Screening and other control measures

### **Role of laboratory investigations**

- Basic laboratory equipment and procedures
- Culture media and growth requirements
- Protozoan and helminthic diseases
- Interpreting simple laboratory investigations

## Teaching methods

Group discussions, seminars, tutorials, problem-based learning, lectures, case presentations, e-learning, visual aids, individual or group assignments, seminar presentations, laboratory practicals, field trips to a local ministry of health laboratory, and hand-washing practice in the clinical skills laboratory.

## Assessment strategies

### Formative assessment (40%)

Hand washing, worksheet completion, theory test.

### Summative assessment (60%)

Three-hour written examination.

## Reading materials

1. Rajan TV (2008). Textbook of medical parasitology. BI Publications.
2. Roberts LS, Janovy J (2008). Foundations of parasitology, 8th ed. McGraw-Hill.

## Competencies

### Competency 1: Care Provision

Demonstrate knowledge of the integration of principles and concepts of microbiology and parasitology to nursing and midwifery.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the concepts and principles of microbiology and parasitology and their application in the care of clients</li> <li>Demonstrates understanding of the factors associated with the chain of infection, modes of transmission and rationale for using interventions to prevent or minimize the spread of infection</li> </ul>	<ul style="list-style-type: none"> <li>Positively promotes infection-control principles in the provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Applies the principles of infection control in the provision of care</li> <li>Utilizes the correct principles and techniques in collecting and handling specimens and identifying microorganisms and parasites involved in the infectious processes</li> <li>Interprets simple results from laboratory investigations to improve the provision of care</li> </ul>

## Competency 2: Health promotion

Understand the importance of infection control measures and other methods for prevention and control of diseases and infections.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Explain the pathophysiology of various parasitic and other infections</li> <li>Know the use of laboratory techniques for identification of various microorganisms</li> <li>Identify situations in which the use of various infection measures or barrier precautions is indicated</li> <li>Make appropriate referrals based on laboratory findings</li> </ul>	<ul style="list-style-type: none"> <li>Recognize the importance of immunizations and other measures in the control of infections</li> <li>Promote safe practice of infection control measures</li> <li>Recognize situations and patients at risk of different infections</li> <li>Seek appropriate assistance in relevant situations</li> </ul>	<ul style="list-style-type: none"> <li>Assess patient and implement necessary measures including immunization based on patient needs</li> <li>Carry out interventions in accordance with appropriate policies, guidelines and standards</li> <li>Adapt the use of infection control measures and precautions based on patient conditions</li> <li>Demonstrate correct application of medical and surgical asepsis</li> </ul>

## 3.1.4 Semester 2 Modules

### 3.1.4.1 Professional, Ethics and Legal Aspects of Nursing

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Professional, ethics and legal aspects of nursing
5. Module Code	6. NURS 100
7. Year	8. One
9. Total hours/credits	10. 30/ 2

## Description

This module serves as the base for both nursing and midwifery components of the programme. Real-life scenarios in practice requiring interventions by learners are used to build their competence in the application of relevant knowledge to the practice. As this module is offered concurrently with the health assessment clinical module, the theory covered is applied in clinical settings. The module introduces the learner to nursing and midwifery as professions and to the roles and responsibilities of a nurse-midwife. It covers professional, legal and ethical concepts and the frameworks guiding nursing and midwifery practice.

## Aim

This module aims to provide the learner with an understanding of nursing and midwifery as a profession, and of the ethical, legal and professional practice frameworks underpinning nursing and midwifery.

It provides the learner with knowledge on theories and principles used to deal with ethical dilemmas in the practice. Primary concepts relating to professionalism, personal and professional awareness, insight, self-regulation in practice, caring, advocacy and accountability are introduced.

## Learning outcomes

Upon successful completion of the module, learners will be able to:

1. Apply ethical theories and principles when addressing ethical issues in the practice of nursing;
2. Demonstrate awareness of nursing implications when faced with ethical dilemmas;
3. Understand professional practice principles that guide nursing practice;
4. Practise within the scope of health care as provided for in law and the code of conduct for nursing;
5. Demonstrate awareness of rights and obligations in the delivery of nursing and midwifery care;
6. Understand the roles of professionalism, professional associations and regulatory bodies in the practice of nursing.

## Content

### Ethics

- Ethics versus law
- Ethical theories: utilitarianism, deontology, egoism, faith-based
- Ethical principles; beneficence and non-maleficence, autonomy and respect for persons, justice (distributive)
- Ethical duties: confidentiality (disclosure), privacy, fidelity, veracity, informed consent, self-determination, non-discrimination
- Ethical dilemmas in health care: Use of ethical decision-making models

### Rights and health care

- Nurse rights and responsibilities
- Patient rights and responsibilities (International patient bill of rights)

### Professional self - regulation and resources

- Nursing and midwifery legislature
- Professional regulation for nursing and midwifery
- Professional organizations and regulatory bodies
- Professionalism and value clarification
- Codes of professional conduct
- Scope of practice for nursing and midwifery
- Regulation of nursing and midwifery education and practice

## Legal issues in nursing practice

- Implications of law on nursing and midwifery practice
- Fitness to practice
- Negligence
- Misconduct
- Malpractice

## Teaching methods

Care scenarios, cases presentations, role play, discussion sessions, buzz groups, tutorials, seminars, lectures, videos, self-directed study, problem-based learning, newspaper article critique, review of selected decided court cases.

## Assessment strategies

### Formative assessment (40%)

Group seminar, individual assignment, test.

### Summative assessment (60%)

Three-hour examination paper.

## Reading materials

1. Country-specific national nursing and midwifery legislation and regulation.
2. International Council for Nurses (2000). Code of ethics for nurses. Geneva: ICN.
3. Country-specific national code of conduct for nursing and midwifery
4. Searle C, Pera SA (2005). Professional practice: a southern African nursing practice, 4th ed. Portsmouth, NJ: Heinemann.
5. Mellish JM, Paton F (2004) An introduction to the ethos of nursing, 2nd ed., Portsmouth, NJ: Heinemann Publishers (Pty) Ltd.
6. ECSACON Professional RF (2002)
7. WHO Regional Professional Regulatory Framework (2013)
8. [www.internationalmidwives.org](http://www.internationalmidwives.org)
9. [www.icn.ch](http://www.icn.ch)



## Competencies

### Competency 1: Professionalism

Demonstrate understanding of the ethical theories and principles as applicable to nursing and nursing practice.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Is familiar with the professional code of ethics and understands its application to clinical practice</li> <li>Understands the role of ethics and regulation in the practice of nursing</li> </ul>	<ul style="list-style-type: none"> <li>Values patients as humans and their expectations of the nurse</li> <li>Recognizes the importance of ethics and regulation in clinical practice</li> </ul>	<ul style="list-style-type: none"> <li>Applies the professional nursing code of ethics and professional guidelines to clinical practice</li> <li>Implements a plan of care within legal, ethical and regulatory frameworks of the nursing practice</li> </ul>

### Competency 2: Ethical and legal practice

Demonstrate understanding of the professional standards of practice and uses the knowledge in providing care that ensures the rights of and obligation to patients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Identifies professional nursing roles and responsibilities</li> <li>Recognizes the interdependence of roles of the various members of the health-care team and their contributions to patient care</li> </ul>	<ul style="list-style-type: none"> <li>Values professional standards of practice</li> <li>Promotes positive image of nursing</li> <li>Upholds and supports ethical and legal standards of nursing</li> <li>Advocates for and protects patients from discriminating attitudes</li> </ul>	<ul style="list-style-type: none"> <li>Uses recognized professional standards in practice and makes ethically sound decisions</li> <li>Functions as a team member interdependently and collaboratively with others</li> <li>Consults and advises other team members as applicable</li> </ul>

### Competency 3: Accountability

Understand the legal and regulatory frameworks applied to nursing knowledge.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the legal and regulatory factors that apply to nursing</li> <li>Understands the factors that promote professional development</li> <li>Understands the role of professional organizations in development of nursing</li> </ul>	<ul style="list-style-type: none"> <li>Values and upholds legal and regulatory statutes at all times</li> <li>Values the mentoring relationship for professional development</li> <li>Recognizes the responsibility to function within acceptable behavioural norms appropriate to the discipline of nursing and the health-care organization</li> </ul>	<ul style="list-style-type: none"> <li>Provides care within expected standards and regulatory framework</li> <li>Demonstrates accountability for own nursing practice</li> <li>Practices in a manner that supports professional discipline</li> <li>Actively participates in professional programmes and encourages acceptable norms of behaviour among colleagues</li> <li>Applies the professional nursing code of ethics and professional guidelines to clinical practice</li> </ul>

### 3.1.4.2 Psychology

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module title	4. Psychology
5. Module Code	6. PSY 102
7. Year	8. One
9. Total hours/credits	10. 45/ 3

### Description

This module introduces the learner to the concepts and theories of psychology with an emphasis on growth and development, as well as factors that influence behaviour across all stages of the lifespan. The module also provides for application of these concepts and theories in providing nursing care of individuals.

### Aim

This module aims to facilitate the learner's understanding of the principles of human behaviour as applied to provision of psychological support to individuals and families.

### Learning outcomes

On successful completion of this module the learner will:

11. Demonstrate understanding of the basic theories of psychology.
12. Explain the relevance of psychology to nursing practice.
13. Analyse the critical factors for growth and development in all stages of the lifespan.
14. Identify the factors that influence human behaviour.
15. Apply psychological concepts in counselling clients.
16. Collaborate with individuals, families and the community to foster positive health behaviour.

### Content

- Introduction to psychology
- Growth and development through the lifespan
- Factors influencing growth and development
- Motivation and motivation theories
- Theories of learning
- Psychosocial counselling
- Psychological assessment process and tools

### Teaching methods

Lectures, discussions, demonstrations, role play, simulation, community project, field visits.

## Assessment strategies

### Formative assessment (30%)

Midterm test, assignment.

### Summative assessment (70%)

Written examination.

## Reading materials

1. Upton D (2009). Introducing psychology for nurses and health care professionals. Pearson Education.
2. Payne S, Smith & P, Jarrett N. (2007). Psychology for nurses and the caring professions. McGraw-Hill International.
3. Niven N (2006). The psychology of nursing care. Palgrave Macmillan.

## Competencies

### Competency 1: Care Provision

Utilize knowledge of principles of psychology and motivational theories in the care of patients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the principles of psychology and their application to health</li> </ul>	<ul style="list-style-type: none"> <li>Provides for and includes psychosocial counselling in the care of patients</li> <li>Adapts care provision to patients' psychosocial frame and maintains positive relationships with all health-team members</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the importance of psychological and emotional needs of patients</li> </ul>

### Competency 2: Therapeutic Communication

Effectively communicate with patients and other health team members.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Explain communication techniques based on psychology</li> </ul>	<ul style="list-style-type: none"> <li>Recognize differences in communication styles among patients and families, nurses and other health team members</li> </ul>	<ul style="list-style-type: none"> <li>Adapt care provision to the patient's psychosocial frame; maintain positive relationships with all health team members</li> <li>Provide for and includes psychosocial counselling in care of patients</li> </ul>

### Competency 3: Health promotion

Actively engage in health promotion activities through patient education for positive outcomes.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of motivational and teaching and learning theories and their role in health promotion</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the importance of psychological and emotional needs of patients</li> </ul>	<ul style="list-style-type: none"> <li>Adapts and health promotion activities and messages to patients' psychosocial frame</li> </ul>

#### 3.1.4.3 Nutrition and Dietetics

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module title	4. Nutrition and dietetics
5. Module Code	6. NUD 102
7. Year	8. One
9. Total hours/credits	10. 30/2

### Description

This module enables the learner to acquire knowledge on nutritional elements and nutritional needs of people, covering the lifespan. Psychosocial factors influencing eating habits are discussed as well as their importance in the promotion of health and provision of therapeutic diets to healthy or ill people. The role of nutrition in all aspects of patient management and the prevention of non-communicable diseases and malnutrition are emphasized. This module has a practical component carried out in the clinical skills laboratory in the ward, where learners get the opportunity to develop skills to prepare nutritious meals.

### Aim

This module is designed to help the learner to recognize the importance of nutrition to various stages of human development and health recovery and maintenance.

### Learning outcomes

On successful completion of this module, the learner will be able to:

- Describe nutritional elements and nutritional needs of clients in all lifespan stages.
- Explain nutritional elements and nutrients to assist clients and their families to make right choices among the readily available and affordable healthy foods for various age groups.
- Discuss the psychosocial factors that influence eating habits to promote a healthy lifestyle for health promotion.
- Discuss the different nutritional disorders and their management.
- Explain the specific diets for management of the sick patient.

## Content

- Food and nutrition: organic and inorganic foods and their functions
- Organic: carbohydrates, proteins, fats and oils, vitamins
  - Inorganic: mineral salts
- Food sources and optimal nutrition for the promotion and maintenance of health and prevention of non-communicable diseases
- Metabolism
- Anabolism, catabolism, basal metabolic rate
- Metabolism in relation to gender, activity and special conditions
- Absorption, digestion, and vital functions of macronutrients (protein, carbohydrate and fat) and micronutrients (vitamins and minerals)
- Nutritional needs of various age groups
- Infant feeding: breastfeeding, breast milk, formula, supplementary feeding, introduction to family diet
- Children and adolescents: special considerations, nutritional disorders in adolescence (anorexia nervosa, bulimia)
- Pregnant women: special nutrition in pregnancy and during lactation
- The elderly: special geriatric nutritional needs
- Food security and availability
  - Preservation and storage of foods
  - Effects of food processing on basic nutrients
  - Hand and environmental hygiene
  - Factors influencing food consumption: economic, social, physical, natural disaster and conflict
  - Behavioural and cultural aspects of nutrition
  - Food habits: harmful, harmless and good habits
  - Factors affecting the choice of food: body needs, cultural and ethnic background, religion, socioeconomic status, availability of food, geographical area and health status
- Dietary management of deficiency and over-nutrition conditions
  - Protein-energy malnutrition (kwashiorkor)
  - Marasmus
  - Mineral deficiencies
  - Vitamin deficiencies
  - Dietary management of diabetes mellitus
- Other conditions: peptic ulcer, hypertension, obesity
- Interventions to maintain nutritional status in illness
- Nutrition in health education
- The role of the nurse in nutrition education
- Nutrition as an interdisciplinary approach to health care and disease prevention
- Clinical and practical aspects of nutrition and dietetics
- Assessment of nutritional status of a client
- Calculation of dietary requirements for clients of different age groups
- Nutrition plans for patients across the lifespan
- Healthy methods of food preparation

## Teaching methods

Problem-based learning, lectures, discussions, case studies, simulation and demonstration of skills, reflection, role play, e-learning, videos, practical experiences, health education, clinical conferences and seminar presentations.

## Practical component

- Clinical skills laboratory
- Assessment of the nutritional status of a client
- Determination of dietary requirements for clients of different ages
- Insertion, checking and removal of a naso-gastric tube
- Creation of a patient's nutrition plan for all ages

## Assessment strategies

### Formative assessment (50%)

Midterm test, assignment or project, practicals, e.g., in food preparation.

### Summative assessment (50%)

Three-hour written examination.

## Reading materials

1. Best, C. (2008). Nutrition: A Handbook for Nurses.
2. Grodner, M, Long, S & DeYoung, S. (2004) Foundations and Clinical Applications of Nutrition: A Nursing Approach; Mosby.
3. Susan G, Dudek RD. (2010) Nutrition Essentials for Nursing Practice. 6th Edition. Lippincott Williams & Wilkins.
4. Turker, S. (2011) Nutrition and Diet Therapy for Nurse. Prentice Hall.

## Competencies

### Competency 1: Health promotion

Demonstrate knowledge of the role of nutrition in health, illness and disease prevention.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Explains the role of carbohydrates, fats, protein, vitamins and minerals in a healthy diet, and disease conditions associated with nutrition deficiencies</li> </ul>	<ul style="list-style-type: none"> <li>• Appreciates the importance of different food groups and their role in normal and abnormal functioning of the body</li> </ul>	<ul style="list-style-type: none"> <li>• Advocates for and promotes the use different food groups different by patients for their role in the human body</li> <li>• Promotes healthy diets through ensuring balance of food groups in patients' diet</li> </ul>

**Competency 2: Integration of basic sciences in nursing health promotion**

Demonstrate understanding of nutritional changes throughout the life-cycle and during illness and other specific human conditions.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the nutritional needs for various life stages that if not met could result in disease</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the nutritional needs for different life stages such as infancy, childhood and pregnancy and disease conditions that could result if these needs are not met</li> </ul>	<ul style="list-style-type: none"> <li>Applies acquired knowledge in promotion of proper nutritional practices in all age groups</li> </ul>

**Competency 3: Care provision**

Assess the nutritional status of a client.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the requirements for comprehensive assessment of the nutritional status of clients of all ages</li> <li>Demonstrates knowledge of anthropometric measurements</li> <li>Demonstrates knowledge of individual daily dietary requirements</li> </ul>	<ul style="list-style-type: none"> <li>Values clients' input in conducting a nutritional assessment</li> </ul>	<ul style="list-style-type: none"> <li>Conducts a comprehensive assessment of the nutritional status of a client in a culturally sensitive manner</li> <li>Properly determines the anthropometric and clinical nutritional status of individuals</li> <li>Correctly identifies nutritional disorders</li> <li>Correctly determines an individual's daily dietary requirements</li> </ul>

**Competency 4: Care provision**

Plan and implement individualised care taking into consideration the nutritional status of a client as well as social determinant of health influencing the nutritional status of a client.

Knowledge	Attitudes and behaviours	Skills
	<ul style="list-style-type: none"> <li>Provides care that demonstrates sensitivity to clients' diversity, taking into consideration clients' culture, race, age, sexual orientation, gender, beliefs and values</li> </ul>	<ul style="list-style-type: none"> <li>Develops individualized nutrition plans for clients of all ages and those with special needs, such as children, adolescents, the elderly and pregnant women</li> <li>Prepares meals in a healthy way and serves them in an appetizing manner</li> <li>Accurately records the dietary and nutritional intake</li> <li>Accurately adheres to special diet regimens for hospitalized patients</li> </ul>

### 3.1.4.4 Health Assessment (Theory)

<b>Programme</b>	4 -year integrated nursing and midwifery
<b>Module title</b>	<b>Health assessment (theory)</b>
<b>Module Code</b>	NURS 102
<b>Year offered</b>	One
<b>Total hours/credits</b>	45/3 Credits

## Description

This module provides the learner with the knowledge and skills in health assessment and how to recognize abnormalities in clients of all ages and to formulate a clinical and nursing diagnosis. Emphasis is placed on the utilization of assessment findings for clinical decision-making. Practical experience for this module will be built into all the clinical modules but this module provides the opportunity for practice in the clinical skills laboratory or demonstration room. The module builds on the knowledge gained in modules on fundamentals of nursing, anatomy and physiology, the basic sciences, and communication and ICT.

## Aim

The aim of this module is to equip the learner with knowledge, skills and attitudes for assessment of the health of patients of all ages.

## Learning outcomes

On successful completion of this module, the learner will be able to:

1. Conduct systematic physical assessment of clients of all ages using appropriate technologies.
2. Comprehensively document a patient's health history incorporating biological, psychosocial, cultural and spiritual dimensions.
3. Analyse and interpret comprehensive health history data for clinical decision-making.
4. Generate a differential and an actual diagnosis.
5. Utilize appropriate safety measures during the physical assessment of client to minimize risks.

## Content

### Comprehensive health history

- Documentation of client health history
- Assessment modalities
- Technologies used in health assessment
- Safety measures considered in health assessment



## Systematic physical assessment

- Integument assessment
- HEENT (head, eyes, ears, nose and throat) and neck assessment
- Cardiovascular assessment
- Chest pulmonary assessment
- Abdominal assessment
- Breast assessment
- Genitalia, anal and rectal assessment
- Musculoskeletal assessment
- Neurological assessment
- Paediatric assessment
- Geriatric assessment
- Pregnancy assessment

## Investigations

- Laboratory
- Radiological
- Generating a diagnosis (differential and actual)
- Assessment of groups with special needs
- Clinical reasoning in the assessment of clients

## Teaching methods

Discussion, role play, lecture, observation, demonstration, assignments, audio-visual presentations, case studies and presentations, clinical simulation in the laboratory.

## Assessment strategies

Formative assessment (40%)

Weekly assignments.

Summative assessment (60%)

Three-hour written examination, practical examination.

## Reading materials

1. D'Amico D, & Barbarito, C. (2007). An introduction to health and physical assessment in nursing. Pearson Education.
2. Estes, M.E, & Estes, Z. (2006). Health assessment and physical examination, 3rd ed. Delmar Learning.
3. Prabhu FR, Bickey SL (2007). Guide to physical examination. Lippincott Williams and Wilkins.
4. Weber J, Kelley J (2007). Health assessment in nursing, 3rd ed. Lippincott-Rawan.

### 3.1.4.5 Health Assessment (Clinical)

1. Programme	2. 4 year Integrated Nursing and Midwifery
3. Module title	4. Health assessment (clinical)
5. Module Code	6. NURS 104
7. Year offered	8. One
9. Total hours/credits	10. 135/3

## Description

This module builds on the health assessment theory module. It provides the learner with the opportunity to enhance basic nursing skills. The clinical sessions provide the opportunity to carry out assessment of patients and on models in a hospital or clinical setting, either in the ward or outpatient department to develop relevant skills. The practicum allows for collaboration and consultations with members of the health-care team.

## Aim

The aim of this clinical module is to equip the learner with appropriate basic assessment skills required to function in a hospital or an outpatient setting

## Learning outcomes

On successful completion of this module, the learner will be able to:

11. Integrate knowledge on biomedical sciences in conducting assessment of clients and in reaching a final nursing diagnosis.
12. Conduct a comprehensive assessment of clients, taking into consideration the bio-psychosocial cultural factors influencing the health status.
13. Utilize a range of tools and technologies used for health assessment to make appropriate diagnosis.
14. Formulate management plans based on patient assessment findings, including arranging for referral as appropriate.
15. Collaborate with clients in all aspects of the consultation including but not limited to the initial and follow-up patient assessments and discussion of differential diagnoses, actual diagnosis and planning of care.
16. Organize for referral of clients.
17. Appropriately and accurately document patient assessment findings following the record-keeping principles.

## Clinical placement

Attachment at a clinical practicum site such as an outpatient department, primary health care clinic, general ward, crèche or home for aged people.

## Content

### Skills

- History taking
- Comprehensive physical assessment;
- Formulating care plans;
- Weighing of patients
- Measuring with the tape line
- Checking of the vital signs
- Auscultation
- Documentation of findings
- Record keeping
- Interpretation of findings
- Team work
- Patient referral
- Therapeutic communication
- Use of patient-assessment tools:
  - Tuning fork
  - Snellen chart
  - Hammer
  - Stethoscope
  - Tongue blade
- Clinical simulation in a nursing arts laboratory
- Competence in use of appropriate technology or multimedia tools

### Learning resources

- Clinical skills laboratory
- Blood pressure machine and stethoscope
- Tuning fork
- Ophthalmoscope
- Tongue blade
- Tape line

### Teaching methods

Interactive lecture, demonstration and return demonstration, audio-visual presentations, practical work book, reading and written assignments, independent laboratory practice.

### Assessment strategies

#### **Formative assessment (60%)**

Test, weekly physical assessment and recording of findings including work book assignments, health history, review of systems (ROS) and recording of data, quizzes, performance examination.

#### **Summative assessment (40%)**

Practical assessment in authentic clinical settings, OSCE (objective structured clinical examination), practicals.

## Reading materials

1. Bates B (2010). A guide to physical examination and history taking, 10th edition. Philadelphia: JB Lippincott Company.
2. Crouch AT, Allen C (2005). Vital notes for nurses: health assessment. Blackwell Publishing.
3. D'Amico D, Barbarito C (2007). An introduction to health and physical assessment in nursing. Pearson Education.
4. Jarvis C (2011). Physical examination and health assessment, 6th ed. Saunders.
5. Leasia MS (2007). A practical guide to health assessment. WB Saunders Company.
6. Weber J, Kelly J (2007). Health assessment in nursing, 3rd ed. Philadelphia, JB Lippincott.

## Competencies

### Competency 1: Integration of basic sciences in nursing and midwifery

Conduct a comprehensive health history of a patient integrating knowledge from biomedical and psychosocial sciences.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates knowledge of the basic scientific methods and processes utilized in collecting information from the clients</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the importance of the scientific process in collecting information from clients</li> <li>Guards against having personal values, beliefs and positional power influence or bias assessment of clients</li> </ul>	<ul style="list-style-type: none"> <li>Uses appropriate assessment tools and scientific techniques in assessing clients</li> <li>Assesses clients' physical, cognitive, developmental, environmental, social, spiritual and information needs</li> <li>Collects information on clients' health status through interviewing, observation and interpretation of laboratory data</li> <li>Conducts physical and mental status assessments by observation, inspection, palpation, auscultation and percussion</li> <li>Assesses the clients' vital signs such as temperature, pulse, blood pressure</li> <li>Analyses and interprets data obtained from client assessment to draw conclusions and make nursing diagnosis</li> </ul>

**Competency 2: Interpersonal relationships and communication**

Integrate communication methods in analysing and interpreting data from health history.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Integrates knowledge on various elements of patient-centred care in handling patients, such as:</li> <li>Patient preferences and values</li> <li>Coordination and integration of care</li> <li>Information, communication and education</li> <li>Physical comfort and emotional support</li> </ul>	<ul style="list-style-type: none"> <li>Respects and encourages patients to express their values, preferences and needs</li> <li>Values patients' expertise in their own health and symptoms</li> <li>Respects and encourages patient input in decisions about health care</li> </ul>	<ul style="list-style-type: none"> <li>Communicates patient values, preferences and expressed needs to other members of the health care team</li> <li>Seeks information from appropriate sources on behalf of patients when necessary</li> </ul>

**Competency 3: Integration of clinical knowledge and skills in patient care**

Apply the nursing process in differentiating between normal and abnormal assessment data.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Identifies components of the nursing process that are appropriate for individual, family, group, community and population health care needs for all age groups</li> </ul>	<ul style="list-style-type: none"> <li>Values the use of scientific inquiry as applied in the nursing process as an essential tool for provision of nursing care</li> <li>Appreciates the differences between data collection and assessment</li> </ul>	<ul style="list-style-type: none"> <li>Provides priority-based nursing care to individuals, families and groups through independent and collaborative application of the nursing process</li> <li>Demonstrates cognitive, affective and psychomotor nursing skills when delivering patient care</li> </ul>

**Competency 4: Quality improvement**

Demonstrate appropriate knowledge and skills in documenting assessment findings.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the principles of record keeping</li> </ul>	<ul style="list-style-type: none"> <li>Values quality improvement in the provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Describes the computerized systems currently in use to facilitate patient care</li> </ul>

**Competency 5: Patient- and / client-centred care**

Apply psychosocial, cultural and spiritual knowledge in assessing the patient

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes how diverse cultural, ethnic, spiritual and socioeconomic backgrounds function as sources of patient, family and community values</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate sensitivity to diversity.</li> </ul>	<ul style="list-style-type: none"> <li>Provides patient-centred care with sensitivity and respect for the diversity of human experience</li> <li>Implements nursing care to meet holistic needs of patients' socioeconomic, cultural, ethnic and spiritual values and beliefs that influence health care and nursing practice</li> <li>Demonstrates caring behaviours toward patients and significant others and groups of people receiving care</li> </ul>

**Competency 6: Quality improvement**

Adhere to safety measures during physical assessment of client.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Identifies human factors and basic safety design principles that affect safety</li> <li>Describes the benefits and limitations of commonly used safety technology</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the cognitive and physical limitations of human performance</li> <li>Recognizes the tension between professional autonomy and standardization of health care practices</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrates effective use of technology and standardized practices that support safety</li> <li>Demonstrates effective use of safety strategies</li> </ul>

**Competency 7: Teamwork and collaboration**

Participate in the process of assessing, diagnosing, planning, implementing and evaluating factors that are directly or indirectly affecting an individual's health.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands data collection methods appropriate for gathering individual data in meeting health care needs of clients</li> <li>Describes the scope of practice and roles of members of interdisciplinary and nursing health-care teams</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledges personal limitations in knowledge and clinical expertise before modifying clinical practices</li> <li>Values perspectives and expertise of all health-care team members</li> </ul>	<ul style="list-style-type: none"> <li>Uses current evidence and clinical experience to decide when to modify clinical practices</li> <li>Functions competently within personal scope of practice as a member of the health-care team</li> <li>Assumes assigned role as a member of the health care team</li> </ul>

**Competency 8: Data Management**

Document data gathered from a patient assessment.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the use and importance of nursing data for improving practice</li> </ul>	<ul style="list-style-type: none"> <li>Values the importance of nursing data in improving nursing and midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Individually or as a member of a group uses information effectively to accomplish a specific nursing purpose</li> <li>Uses information technology to enhance personal knowledge</li> <li>Uses technology and information to enhance patient care</li> </ul>

**Competency 9: Continued competence development**

Assesses personal strengths and weakness in practising nursing.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Identifies personal strengths, limitations and values that affect functioning as a member of a team</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes personal responsibility for contributing to effective team functioning</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrates awareness of personal strengths and limitations as a team member</li> <li>Initiates a self-development plan to improve team-membership skills</li> </ul>

### 3.1.4.6 Introduction to Biochemistry

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module title	4. Introduction to biochemistry
5. Module Code	6. BIO 101
7. Year	8. One
9. Hours/credits	10. 30/2

## Description

This module introduces the learner to the basic concepts of biochemistry. It covers the four major classes of biological molecules: carbohydrates, lipids, proteins and nucleic acids. The emphasis is on the chemical properties and three-dimensional structure of these molecules. Normal and abnormal biochemical values in several organs of the body are covered. The module provides a systematic and methodological application of general and organic chemistry principles.

## Aim

The module aims to enable the students to learn about the normal and abnormal biochemical food processes that relate to the functioning of the human body.

## Learning outcomes

On successful completion of this module the learner will be able to:

11. Describe food processes and the functioning of the human body.
12. Explain the functioning of the human body metabolism.
13. Manage clients whose bodily functions are affected by homeostatic imbalances.

## Content

- Basic concepts of biochemistry
- Bio-macromolecules: composition and principles of organization
- Energy and principles of bioenergetics
- Water and its properties
- Acids, bases and buffers
- Protein structure and stability
- Function and chemistry of proteins
- Enzymes
- Carbohydrates and glycobiology
- Food nutrients
- Intermediary and lipid metabolism
- Lipids and membranes
- Biological membranes and transportation
- Nucleotides and nucleic acids
- Digestion and absorption
- Specimen collection and renal function tests
- Electrolyte imbalance



## Teaching methods

Lectures, tutorials, small-group teaching, enquiry-based learning, practical demonstrations, observation, audio-visual presentations, discussions, group work, self-directed learning, reading and laboratory work to carry out measurements and basic biochemistry tests required by the nurse to interpret alterations.

## Assessment strategies

### **Formative assessment (40%)**

Test, practical demonstrations.

### **Summative assessment (60%)**

Written examination.

## Reading materials

1. Bhardwaj U, Bhardwaj R. (2011). Biochemistry for nurses. Pearson Education India.
2. Kumar A (2007). Textbook of biochemistry for nurses.
3. Venkatraman S (2011). Nutrition and biochemistry for nurses. Elsevier India.

## 3.2 Year 2

### 3.2.1 Introduction

The second year will introduce the learners to work with families and groups in the community and hospitalized patients. The modules in this level facilitate integration of foundational knowledge obtained during year one. The learners learn to work in teams and in partnership with clients, health teams and key stakeholders in the provision of care in a variety of settings.

### 3.2.2 Learning outcomes

At the end of year two of the integrated nurse-midwifery programme learners will be able to:

1. Integrate knowledge of bio-psychosocial sciences in the provision of nursing care to adult and paediatric patients with common acute and chronic conditions.
2. Develop, implement and evaluate individualized nursing care plans for adult and paediatric patients with common and acute conditions.
3. Apply a systematic approach to assessment of health status and provision of care to clients in communities and primary health care facilities.
4. Practice and act in accordance with prescribed legal, professional and ethical codes of conduct of nursing and midwifery, recognizing and acknowledging the rights of clients in all age groups, and seeking guidance where necessary.
5. Communicate effectively and therapeutically with children and their families as well as adult patients with medical and surgical needs.
6. Utilize appropriate media, community resources and social marketing techniques to mobilize and disseminate information to individuals, families, groups and communities.
7. Collect and critically appraise and utilize information on paediatric, medical, surgical and community health issues to inform decision-making and execution and evaluation of care.
8. Build partnerships with clients and members of the health team under the guidance of a supervisor in addressing the needs of paediatric, medical-surgical patients and other clients at the community level.
9. Advocate for the rights of hospitalized patients and clients in the community to access quality health care.
10. Evaluate personal performance in the provision of nursing care to clients and in learning, and take appropriate action as well as responsibility and accountability for personal actions.

## 3.2.3 Semester Modules

### 3.2.3.1 Community Health Nursing (Theory)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Community health nursing(theory)
5. Module Code	6. NURS 201
7. Year Offered	8. Two
9. Total hours/credits	10. 45/3

### Description

This module equips learners with knowledge of nursing in the community, covering the clients' home, schools, and health centres and other health and social work agencies. It introduces the learners to the concepts used in community health nursing, the legal and theoretical frameworks guiding community health nursing practice, and the functioning of the health-care system in the country. Concepts of primary health care (PHC), epidemiology and family-centred care as an approach to health-care delivery and the nursing process are applied. The module prepares the learner for school health nursing, disaster management, home-based care, forensic health, and health in the workplace and correctional services. Emphasis is placed on primary health care, health promotion and disease prevention. The module builds on knowledge presented in fundamentals of nursing, health assessment, bio-psychosocial sciences and communication.

### Aim

This module is aimed at equipping learners with the knowledge, attitudes and skills required to function effectively in various settings in the community.

### Learning outcomes

After successful completion of this module the learners will be able to:

11. Perform a comprehensive assessment of the health status of clients in the community, whether individuals, families, groups, the community, school children, workers or adolescents.
12. Generate an informed community diagnosis and an appropriate plan of care, working in partnership with clients.
13. Recognize the importance of collaborating with community members and representatives, community-based organizations, community health providers and other members of the team in addressing prevalent health care issues or problems.
14. Draw up strategies to promote the health of all clients in the community.
15. Discuss the epidemiological concepts, principles and methods in community health nursing practice to improve or enhance delivery of care.
16. Provide nursing care in the community, including disaster and community home-based nursing care.

## Content

- Theoretical basis of community health nursing
- Community assessment
- The art and science of community health nursing
- Epidemiology in community health nursing
- Family health
- Communicable disease prevention and interventions
- Health promotion
- Environmental health
- School health
- Community home-based care and palliative care
- Occupational health nursing
- Community development
- Community epidemiological study
- Community project planning and implementation
- Health programme evaluation
- Health education programme development
- Mobilizing of human and financial resources for community-based health intervention programmes
- Multidisciplinary team working
- Family planning, counselling on contraceptive choice and prescribing contraceptives
- Care of terminally ill patients in the community
- Disaster management at the community level
- 

## Teaching methods

Group discussions, problem-based learning, community-based learning, care scenarios, case presentations, reflective journals, lectures, role play, group projects, individual projects, assignments, self-paced learning material and workbooks.

## Assessment strategies

### Formative assessment (60%)

Two assignments test.

### Summative assessment (40%)

Three-hour written examination paper.

## Reading materials

1. Clark MJ (2008). Nursing in the community: dimensions of community health. Connecticut: Appleton & Lange, Stamford.
2. Clark MJ (2008). Community health nursing: caring for populations, 5th ed. Upper Saddle River (NJ): Prentice Hall.
3. Clark DMJ (2008). Community health nursing: advocacy for population health, 5th ed. New Jersey: Pearson.
4. McEwen M, Nies AM (2007). Community/public health nursing: promoting the health of populations, 4th ed. New York: Saunders.
5. Van Wyk N, Leech R (2011). Nursing in the community. South Africa: Pearson Education.

### 3.2.3.2 Community Health Nursing (Clinical)

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module Title	4. Community health nursing (clinical)
5. Module Code	6. NURS 203
7. Year Offered	8. Two
9. Total hours/ credits	10. 135/3

#### Description

This clinical module provides an opportunity for learners to carry out client assessments in a variety of community-based settings so as to develop relevant and appropriate interventions to promote health and prevent diseases in individuals, families and communities. The module covers community health assessment, epidemiology, family health assessment, adolescent health and family planning, school health, occupational health and disaster nursing. This module allows for collaboration, consultation and forging of partnerships with various stakeholders in the community and referral and continuity of care.

#### Aim

This module aims to equip learners with basic community health nursing competencies required to function in community-based settings.

#### Learning outcomes

On successfully completing this module the learners will be able to:

11. Conduct a comprehensive assessment of the health needs of all the clients at the community level using quantitative and qualitative strategies.
12. Appraise information gathered from a variety of sources in the community.
13. Collaborate with individuals, families, groups and communities in planning, implementing, monitoring and evaluating health-promotion or illness-prevention courses of action.
14. Mobilize individuals, families, groups and communities by using appropriate media, community resources and social marketing techniques.
15. Work as advocates and change agents for improvement or provision of needed health resources.
16. Act as resource person for communities, groups and individuals.
17. Plan for sustainability of implemented health-promotion programmes.

#### Clinical placement settings

Health centres, family-planning units, community sites, clients' homes, schools, crèches, families, workplaces, water works and sewerage processing, hospital or clinic information office and community-based organizations such as rehabilitation centres, centres for abused victims, orphanages, hospices, etc.

## Skills

- Gaining community entry
- Community assessment and community profile development
- Family-health assessment
- Documentation of findings
- Monitoring and evaluation
- Community mobilization
- Health education skills such as needs analysis, development of health education plans, creation and use of visual aids, implementation of education programmes, inter active learning, evaluation of learning
- Compilation of weekly and monthly health statistics in a health centre
- Team work

## Assessment strategies

### Formative assessment (70%)

Group projects, community needs assessment, epidemiological study, evaluation of a health promotion programme, individual project, case study of a family with a child aged less than five years, including assessment of the nutritional and immunization status of the child.

### Summative assessment (30%)

Participation in the implementation of a health promotion programme in the community (practical), practical skills examination.

## Reading materials

1. Clark DMJ, 2008, Community health nursing: advocacy for population health, 5th Ed. New Jersey: Pearson.
2. Clark MJ, 2008, Community health nursing: caring for populations, 5th Ed. Upper Saddle River, New Jersey: Prentice Hall.
3. Clark MJ, 2008, Nursing in the community: dimensions of community health. Stamford, Connecticut: Appleton & Lange.
4. McEwen M, Nies AM, 2007, Community/public health nursing: promoting the health of populations, 4th Ed. New York: Saunders.
5. Van Wyk N, Leech R, 2011, Nursing in the community. Pretoria: Pearson Education.

## Competencies

### Competency 1: Integration of basic sciences in nursing and midwifery

Conduct a comprehensive assessment of a client (individual, family, group or a community) and generate a nursing diagnosis.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates knowledge of community health nursing frameworks used in assessment of health needs of individual, family, groups and community clients</li> </ul>	<ul style="list-style-type: none"> <li>Values assessment of health care situations through the eyes of a client</li> <li>Respects and encourages patient input in decisions about health care and services</li> <li>Respects people's rights to make decisions in planning of their care</li> </ul>	<ul style="list-style-type: none"> <li>Successfully negotiates for community or family entry and adheres to the principles governing these processes</li> <li>Develops effective partnerships with clients in an ethical manner</li> <li>Engages clients in the process of planning and conducting assessment of their health needs to ensure their involvement</li> <li>Utilizes appropriate data-collection tools and methodologies in conducting client assessment</li> <li>Generates appropriate nursing diagnoses that are based on collected information</li> <li>Validates identified issues or problems and their priority with clients for consensus building</li> </ul>

### Competency 2: Teamwork and Collaboration

Engages in teamwork and collaboration with relevant stakeholders to promote the health of clients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of the various interventional strategies used to promote health and prevent illness at the community level</li> </ul>	<ul style="list-style-type: none"> <li>Respects and encourages clients to articulate their values, beliefs, preferences and needs</li> <li>Values individual cultural and personal diversity</li> <li>Accepts the role and responsibility for providing health education to patients and families</li> </ul>	<ul style="list-style-type: none"> <li>Participates in planning and implementation of community-based health promotion interventions in collaboration with clients and members of the health care team</li> <li>Participates in mobilizing clients for health promotion programmes or interventions</li> <li>Participates in developing and implementing health interventions or programmes in a culturally sensitive manner</li> <li>Plans for sustainability of health promotion interventions in the community</li> </ul>

### Competency 3: Quality improvement

Develop mechanisms to monitor and evaluate programmes for effectiveness and quality.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates knowledge of programme evaluation models and frameworks used in community health nursing</li> </ul>	<ul style="list-style-type: none"> <li>Values critiques of work done, new ideas and interventions to improve client care</li> <li>Values being a reflective practitioner</li> </ul>	<ul style="list-style-type: none"> <li>Participates in monitoring implemented community interventions using appropriate frameworks</li> <li>Participates actively in evaluation of community-based intervention programmes using available programme evaluation frameworks</li> <li>Revises the intervention plan according to the evaluation outcomes where necessary</li> </ul>

### Competency 4: Patient- and /client-centred care

Gather, identify and retrieve health information to inform community nursing practice.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates familiarity with health information management systems for the community level</li> </ul>	<ul style="list-style-type: none"> <li>Values effective communication and information sharing with relevant audiences</li> <li>Appreciates the importance of accessing relevant clinical evidence</li> </ul>	<ul style="list-style-type: none"> <li>Conducts epidemiological studies</li> <li>Interprets gathered information and compiles reports on the rates of morbidity and mortality and disease incidence and prevalence to inform health-promotion and illness-prevention strategies</li> <li>Disseminates compiled health information and statistics to appropriate role players using suitable modes of communication, including ICTs</li> <li>Accesses and utilizes available health information in providing evidence-based health promotion interventions</li> </ul>

### Competency 5: Health promotion

Conduct health screening in workplace settings.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates basic understanding of occupational health care:</li> <li>Health and safety in the workplace</li> <li>Work-related diseases and injuries</li> <li>Current occupational health issues</li> </ul>	<ul style="list-style-type: none"> <li>Values the importance of technology as a tool to efficiently generate information</li> <li>Values the role of each member of the health-care team</li> </ul>	<ul style="list-style-type: none"> <li>Conducts health screening in the workplace using appropriate screening tools, including ICTs and develops appropriate health-care plans for ill individuals</li> <li>Keeps records of health screenings</li> </ul>



**Competency 6: Systems-based approach**

Function as a school health nurse and midwife.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates understanding of school health nursing requirements, with specific reference to:</li> <li>• Health assessment and screening</li> <li>• Identification of appropriate interventions</li> <li>• Referral to appropriate members of the health team</li> <li>• Follow-up on cases with health issues</li> </ul>	<ul style="list-style-type: none"> <li>• Values the role of a school health nurse</li> </ul>	<ul style="list-style-type: none"> <li>• Conducts health screening using available and appropriate tools, including technology</li> <li>• Solicits input from other team members in addressing identified health needs</li> <li>• Undertakes follow-up action on school children with health issues</li> <li>• Designs, implements and evaluates the school health programme</li> </ul>

**Competency 7: Ethical and legal health care practice**

Function within the legal and ethical frameworks of community health nursing.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates understanding of the legal and ethical frameworks guiding the practice of community health nursing</li> </ul>	<ul style="list-style-type: none"> <li>• Respects client's rights to make decisions in planning their care and encourages their input into decisions about interventions to be implemented</li> </ul>	<ul style="list-style-type: none"> <li>• Provides care to clients in the community as stipulated in the ethical and legal frameworks of community health nursing</li> </ul>

**3.2.3.3 Pharmacology**

1. Programme	2. 4-year Integrated Nursing and Midwifery
3. Module Title	4. Pharmacology
5. Module code	6. Pharm 201
7. Year Offered	8. Two
9. Total hours/credits	10. 45/3

## Description

This module provides the learner with the necessary knowledge and skills to safely administer medicines. Key concepts of pharmacology and medicine preparation and classification will be taught. Safety precautions for medicine storage and administration, when more than one medicine is administered, will be emphasized, along with the key observations that the nurse should make during the process of administering medicines. The learner will acquire knowledge and skills in drug dosage determination, and observation of desired effects and management of adverse effects of medicines. Other skills developed will be in reconstituting and administering medicines to clients for all ages.

## Aim

The aim of this module is to equip the learner with requisite knowledge and skills for the safe administration of medicines and monitoring of their effects on clients for all ages.

## Learning outcomes

On successful completion of this module, the learners will be able to:

1. Demonstrate familiarity with pharmacokinetics, pharmaco-dynamics and pharmaco-therapeutic processes and adverse effects of medicines on clients of all ages.
2. Correctly determine medicine dosages based on the age and weight of patient.
3. Demonstrate knowledge of patient risk factors and conditions that make administration of particular medicines inappropriate.
4. Differentiate between adverse and side effects from medicines and appropriately manage reactions to medicines.
5. Display knowledge of pertinent considerations when storing, reconstituting and administering medicines.
6. Demonstrate knowledge of drug interactions for the various classes of medicines.

## Content

### Introduction to pharmacology

- Medicines control legislation
- Nomenclature for medicines
- Terminology used in medicine administration

### Pharmacological action of medicines

- Pharmacokinetics
- Pharmacodynamics
- Pharmacotherapeutics
- Adverse effects of drugs

### Preparation and classification of medicines

- Dosage calculation for medicines
- Storage: cold chain, protection from direct sunlight and moisture, containers
- Principles in diluting medicines
- Frequency of and routes for administration of medicines
- Rational use of drugs

## Classes of medicines, therapeutic uses and nursing implications

- Analgesics
- Anti-inflammatory
- Fluids and electrolytes
- Anticonvulsants
- Antihypertensive agents
- Anaesthetics
- Muscarinic agonists and antagonists
- Anti-infective agents
- Antineoplastic agents
- Antidepressants and depressants
- Antipsychotic agents
- Sedatives and hypnotics
- Antidiabetic agents
- Vitamins and minerals
- Antihistamines
- Antiretroviral drugs

## Teaching methods

Lectures, demonstrations, simulation in the skills laboratory, individual and group assignments, administration of medicines in a clinical setting.

## Assessment strategies

### Formative assessment (40%)

Individual assignment, test, drug calculation practicals,

### Summative assessment (60%)

Three-hour written examination.

## Reading materials

1. Lehne RA (2013). Pharmacology for nursing care, 8th ed. Saunders.
2. McKenry LM (2006). Mosby's pharmacology in nursing, 22nd ed. Mosby.
3. Adams P, Holland L, Urban C. (2011). Pharmacology for nurses: a pathophysiologic approach, 3rd ed. New Jersey: Prentice Hall.
4. Trounce J (2004). Clinical pharmacology for nurses, 17th ed. Churchill Livingstone.
5. Vallerand AH, Sanoski CA, Deglin JH, eds (2011). Davis's drug guide for nurses, 13th ed. Philadelphia, PA: FA Davis Co.
6. Country-specific guidelines for nurses and midwives.

## Competencies

### Competency 1: Integration of basic medical sciences unto nursing care

Understand the action, metabolism and therapeutic use of drugs.

Knowledge	Attitude	Skills
<ul style="list-style-type: none"> <li>Understand the terms and uses of drugs and other therapeutic agents in health and illness and conditions for storage of drugs;</li> <li>Explain actions, mode of use, side/adverse effects of different drugs including nursing implications;</li> <li>Identify factors or issues in drug administration relating to specialized patients and patient conditions (dosages based on weight, age, and other factors; polypharmacy, self-medications, non-compliance)</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the use of medicines in the management of patient health conditions;</li> <li>Questions any unusual observations and effects as necessary;</li> <li>Value the importance of patient and family contributions about drug use information and patient responses (allergies)</li> </ul>	<ul style="list-style-type: none"> <li>Safely and accurately complete medication dosage calculations and preparations under supervision;</li> <li>Apply the nursing process in administration of drugs including monitoring of effects and reporting of adverse/side effects;</li> <li>Prepare, check, administer and record all drugs with nurse supervision for all routes (oral, sublingual, topical, suppository, intramuscular, subcutaneous, intravenous) for non-controlled drugs and with extra caution for controlled drugs</li> </ul>

### Competency 2: Accountability

Understand the concept of accountability in practice and apply to the administration of medicines and patient protection.

Knowledge	Attitude	Skills
<ul style="list-style-type: none"> <li>Describe national and institutional legislation on drug schedules and specific agency policy regarding drug administration;</li> <li>Understand the need for caution in drug administration and ensuring proper documentation and records</li> </ul>	<ul style="list-style-type: none"> <li>Value the regulations and other policies regarding drugs, especially controlled drugs, alcohol and other substances; promote compliance;</li> <li>Appreciate the importance of ensuring the 5 R's and the need for proper and timely documentation and reporting</li> </ul>	<ul style="list-style-type: none"> <li>Ensure proper storage of drugs;</li> <li>Inform patients of each drug name, purpose, action and potential side effects;</li> <li>Recognize and report near misses and errors (own and others);</li> <li>Take action to minimize the harm arising from adverse events;</li> <li>Demonstrate accountability for own nursing practice</li> </ul>

### Competency 3: Quality improvement

Develop and contribute to measures that promote quality through monitoring and evaluation.

Knowledge	Attitude	Skills
<ul style="list-style-type: none"> <li>Identify different evaluation models and frameworks applicable in care provision; understand the role of other health team members in quality and safe practice in drug administration</li> </ul>	<ul style="list-style-type: none"> <li>Recognize that quality improvement is an essential part of nursing; acknowledge own limitations in knowledge and clinical expertise before modifying clinical practice;</li> <li>Value and respect patients' views;</li> <li>Report on effects of drugs and plan for appropriate actions</li> </ul>	<ul style="list-style-type: none"> <li>Monitor implemented interventions for quality using identified frameworks;</li> <li>Use current evidence and clinical experience to consult and decide when to modify clinical practice;</li> <li>Evaluate patient response to medications on ongoing basis and take appropriate actions;</li> <li>Share information patient's response to drugs with relevant superiors and other health team members</li> </ul>

### Competency 4: Health promotion

Demonstrate ability to maximize opportunity for patient education on drugs based on individual needs and conditions.

Knowledge	Attitude	Skills
<ul style="list-style-type: none"> <li>Understand the importance of patient education in the use of drugs for treatment of different conditions</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the contribution of patient education to compliance with medications;</li> <li>Value the roles of patient's family and significant others in compliance</li> </ul>	<ul style="list-style-type: none"> <li>Institute patient education as necessary for individuals;</li> <li>Encourage involvement of other health team members</li> </ul>

### 3.2.3.4 Medical and Surgical Nursing 1 (Theory)

1. Programme	2. 4-year Prototype Integrated Nursing and Midwifery
3. Module Title	4. Medical and surgical nursing 1 (theory)
5. Module Code	6. NURS 205
7. Year	8. Two
9. Total hours/credits	10. 75/5

### Description

This module builds on knowledge and skills from the modules on fundamentals of nursing, basic sciences (chemistry, physics and microbiology) and anatomy and physiology. It provides the learner with knowledge and skills to effectively manage adults with medical or surgical conditions affecting the respiratory, cardiovascular, haematopoietic, gastrointestinal and endocrine systems. The other body systems are covered in the Medical and Surgical Nursing 2 module. Emphasis is placed on utilization of knowledge of the human needs theory and the nursing process in the professional and ethical provision of comprehensive quality nursing care. The module focuses on priority health conditions in the African Region.

## Aim

To equip the learner with knowledge and appropriate skills and attitudes for the management of adult patients with medical and surgical conditions affecting the respiratory, cardiovascular, haematopoietic, gastrointestinal and endocrine systems.

## Learning outcomes

On successful completion of this module the learner will:

1. Demonstrate competence in assessment of adult patients with medical and surgical conditions.
2. Demonstrate competence in analysis of assessment data to identify nursing needs of adult patients with medical or surgical conditions.
3. Generate individualized evidence-based nursing diagnoses.
4. Manage adult patients with medical and surgical conditions, utilizing the nursing process and based on the knowledge gained from biological and behavioural sciences.
5. Demonstrate knowledge of pharmacological agents used in the treatment of adults with medical and surgical conditions, based on the essential health care package.
6. Demonstrate competence in identifying the nutritional requirements of adult patients with medical or surgical diseases and conditions.
7. Apply psychosocial, cultural and spiritual knowledge in the nursing management of adult patients with medical and surgical diseases and conditions.

## Content

### Nursing management of clients with respiratory conditions and disorders

- Respiratory assessment
- Upper respiratory tract disorders
- Pneumonia
- Tuberculosis
- Asthma
- Chronic obstructive pulmonary disease
- Pneumothorax and hemothorax
- Pleural effusion
- Chest surgery
- Closed chest drainage
- Tracheostomy
- Lung cancer

### **Nursing management of a client with cardiovascular disorders and conditions**

- Assessment of the cardiovascular system
- Pathophysiology and electrophysiology of the heart
- Valvular heart diseases
- Vascular problems (Hypertension)
- Function problems: Angina pectoris, myocardial infarction, congestive heart failure, dysrhythmias
- Ischemic Diseases: Coronary artery disease
- Haemorrhoids
- Varicose veins
- Epistaxis

### **Nursing management of clients with gastrointestinal system diseases and conditions**

- Assessment of gastrointestinal system.
- Diagnostic tests of gastrointestinal system.
- Aetiology and pathophysiology of common GIT diseases and conditions
- Tonsillitis and tonsillectomy
- Gingivitis
- Dental caries
- Constipation
- Diarrhoeas
- Dysentery
- Cholera
- Typhoid fever
- Vomiting
- Peritonitis
- Gastritis
- Duodenal and gastric ulcers
- Appendicitis and appendectomy
- Hernia and herniorrhaphy
- Intestinal obstruction
- Gall bladder and liver disorders

### **Nursing management of clients with endocrine system diseases and conditions**

- Assessment of the endocrine system
- Diabetes
- Thyroid dysfunction
- Thyroidectomy
- Cushing's syndrome
- Addison's disease

## **Nursing management of patient with blood and immune system disorders**

- Assessment of blood and immune system
- Blood coagulation disorders
- Blood transfusion
- Anaemia; sickle cell
- Malaria
- Immune response
- Allergies and anaphylactic shock
- Immunosuppressant
- Immunodeficiency
- HIV and AIDS
- Haemophilia
- Leukemia
- Haemorrhagic diseases such as Ebola, Dengue, etc.

## **Nursing management of clients taking the following pharmacologic agents:**

- Anticoagulants
- Antibiotics
- Anti-thyroid medications
- AIDS medications
- Bronchodilators
- Electrolyte supplements
- Steroids
- Thyroid supplements
- Anti-cancer drugs

## **Teaching methods**

Group discussions, presentations, care-provision scenarios, seminars, videos, problem-based learning, lectures, inquiry-based learning, self-directed learning, role play, simulations, tutorials.

## **Assessment strategies**

### **Formative assessment (40%)**

Written test, assignment, development of an individualized nursing care plan.

### **Summative assessment (60%)**

Written examination.

## **Reading materials**

1. Berman AJ, Snyder S (2011). Fundamentals of nursing: concepts, process and procedures, 9th ed. Prentice Hall.
2. Gray JAM (2012). Evidence-based health care. Edinburgh: Churchill Livingstone.
3. Hargrove-Huttel RA (2001). Medical-surgical nursing, 3rd ed. Philadelphia: Lippincott.
4. Mogotlane SM, Mokoena JD, Chauke ME, Young A (2005). Juta's manual of nursing, vol. Medical surgical nursing Parts 1 & 2. Johannesburg: Juta.



5. Ignatavicius DD, Workman ML (2012). Medical and surgical nursing: patient centred collaborative care, 7th ed. Philadelphia: Saunders.
6. Smeltzer SC, Bare BG (2010). Brunner and Suddath textbook of medical and surgical nursing, 12th ed. Philadelphia: Lippincott.

### 3.2.3.5 Medical and Surgical Nursing 1 (Clinical)

1. Programme	2. 4 -year Prototype Integrated Nursing and Midwifery
3. Module Title	4. Medical and surgical nursing 1 (Clinical)
5. Module Code	6. NURS 207
7. Year	8. Two
9. Total hours/credits	10. 170/4

## Description

This module provides the learner the opportunity to develop the skills and competencies necessary for managing adult patients with medical and surgical diseases and conditions affecting the respiratory, cardiovascular, haematopoietic, gastrointestinal and endocrine systems. The learner will be able to apply the human needs theory, the nursing process and the primary health care approach in providing care to adult patients with medical and surgical diseases and conditions.

## Aim

The aim of this module is to equip the learner with appropriate competencies for the nursing management of adult patients with selected medical and surgical diseases and conditions.

## Learning outcomes

On successfully completing this module, the learner will:

11. Demonstrate competence in assessment of adult patients with medical and surgical diseases and conditions applying the human needs theory.
12. Demonstrate competence in making preparations for diagnostic assessment of adult patients with medical or surgical diseases and conditions.
13. Skilfully identify nursing needs or problems of adult patients with medical or surgical diseases and conditions
14. Demonstrate competence in nursing management of adult patients with medical and surgical diseases and conditions based on the essential health care package (EHP), utilizing the primary health-care approach.
15. Demonstrate competence in managing patients who are on pharmacologic agents to treat adult medical and surgical diseases and conditions.
16. Demonstrate competence in identifying nutritional requirements of adult patients with medical and surgical diseases and conditions.
17. Apply psychosocial, cultural, spiritual, ethical and professional values in providing nursing management for adult patients with medical and surgical diseases and conditions and in providing support for their families.

## Content

### Nursing skills for respiratory conditions

- Assessment of lung functioning
- Suctioning
- Intubation
- Care of patients receiving oxygen therapy by nasal cannula and by face mask
- Nebulising
- Observing respirations
- Cardio-pulmonary resuscitation: Ambu-bag use
- Coughing exercises
- Administration of bronchodilators
- Care of the patient with tracheostomy

### Nursing skills for cardiovascular conditions

- Assessment of the cardiovascular system
- Blood pressure monitoring
- Apical-radial pulse
- Auscultating for heart sounds
- Controlling epistaxis/ nasal packing
- Exercises and cardiac functioning
- Cardiac bed
- Administration of cardiovascular system drugs

### Nursing skills for conditions of the gastrointestinal system

- Patient feeding
- Gastric lavage
- Gastric/ tube feeding
- Giving an enema
- Interpreting liver function tests
- Colostomy/ileostomy care
- Flatus tube insertion
- Monitoring bowel sounds
- Administration of oral drugs
- Dental extraction
- Insertion of rectal suppository
- Paracentesis abdominis

## **Nursing skills for conditions of the endocrine system**

- Administration of Insulin
- Measuring blood glucose
- Measuring glucose in urine
- Teaching patient self-injection, foot care and nutrition, administration of oral hypoglycaemic drugs

## **Nursing skills for conditions of blood, blood forming structures and the immune system**

- Interpreting complete blood count laboratory results
- Collecting samples for blood culture and sensitivity tests
- Interpreting culture and sensitivity results
- Pre and post-test counselling
- Conducting a HIV rapid test
- Interpreting results for viral load
- Safety precautions in handling blood specimen
- Post Exposure Prophylaxis (PEP)

## **Teaching methods**

Demonstrations, case presentations, seminars, simulations in clinical skills laboratory, health-care scenarios, problem-based learning, lecture, enquiry-based learning, self-directed learning, role play, videos, e-learning.

## **Assessment strategies**

### **Formative assessment (60%)**

Practical demonstrations, case presentation, tests and quizzes, individualized care plans.

### **Summative assessment (40%)**

OSCE (objectively structured clinical examination), case presentation, written examination paper.

## **Reading materials**

1. Berman AJ, Snyder S (2011). Fundamentals of nursing: concepts, process and procedures, 9th ed. Prentice Hall.
2. Gray JAM (2012). Evidence-based health care. Edinburgh: Churchill Livingstone.
3. Hargrove-Huttel RA (2001). Medical-surgical nursing, 3rd ed. Philadelphia: Lippincott.
4. Mogotlane SM, Mokoena JD, Chauke ME, Young A (2005). Juta's manual of nursing, vol 4, medical surgical nursing Parts 1 & 2. Johannesburg: Juta.
5. Ignatavicius DD, Workman ML (2012). Medical and surgical nursing: patient centred collaborative care, 7th ed. Philadelphia: Saunders.
6. Smeltzer SC, Bare BG (2010). Brunner and Suddath textbook of medical and surgical nursing, 12th ed. Philadelphia: Lippincott.

## Competencies

### Competency 1: Integration of clinical knowledge and skills into patient care

Utilize the nursing process and primary health care approach to plan and implement care for patients with medical and surgical conditions.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Identify components of the nursing process appropriate to individual health care needs; demonstrate understanding of the diversity of the human condition</li> </ul>	<ul style="list-style-type: none"> <li>Recognize the importance of the nursing process in assessment and care of patients; value patient's participation in decisions about health and self-care.</li> </ul>	<ul style="list-style-type: none"> <li>Conduct a health assessment on patients using the nursing process; demonstrate caring attitude towards patients, significant others and communities</li> </ul>

### Competency2: Professionalism

Demonstrate accountability and standard professional practice in patient care delivery.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Understand the concept of accountability in the provision of medical surgical nursing care</li> <li>Understand the principles of effective communication with patients with medical surgical needs</li> </ul>	<ul style="list-style-type: none"> <li>Show commitment to provision of high quality, safe and effective patient care</li> <li>Accept responsibility for communicating effectively with patients with surgical medical needs</li> </ul>	<ul style="list-style-type: none"> <li>Safely perform learned skills to adult clients with medical and surgical conditions; adhere to health facility and agency policies and principles regarding ethical behaviour and patient confidentiality appropriate in medical surgical units</li> <li>Demonstrate caring behaviour towards patients and significant others; demonstrate effective communication skills in the process of obtaining data, assessing the needs of patients in medical surgical units and in sharing pertinent information</li> </ul>

**Competency 3: Safety**

Minimize harm to patients through individual nursing performance.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Demonstrate knowledge of basic scientific methods and processes regarding safety, risk assessment and management in the provision of care to patients with medical surgical conditions</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the strength of scientific bases for practice in minimizing risk and ensuring safety in medical surgical units</li> </ul>	<ul style="list-style-type: none"> <li>Conduct an assessment of medical surgical patients for potential risk;</li> <li>Promote activity in medical and surgical patients through encouraging exercise and ambulation;</li> <li>Apply universal precautions in the provision of medical and surgical care;</li> <li>Use safety measures to protect patients, self and colleagues from injury and hospital-acquired infections</li> </ul>

**Competency 4: Teamwork and collaboration**

Function effectively within a multidisciplinary team fostering mutual respect, shared decision-making, team learning and development.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Identify contributions of other individuals and groups in helping medical and surgical patients and their families achieve health goals;</li> <li>Understand the various dimensions of care and integrate in patients' plans of care in consideration of the individual patient diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>Respect the centrality of the patient and family as core members of the medical and surgical care team;</li> <li>Value the contributions of other members of the health team and expertise in the care of patients and their families</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate ability to communicate effectively with other members of the health team and families;</li> <li>Incorporate contributions of other team members and families to care and apply empathy in the provision of care patients;</li> <li>Modify patient plan of care based on assessed needs and in consultation with other health team members, patients and families</li> </ul>

**Competency 5: Quality improvement**

Uses data to monitor outcomes of care processes and to improve the quality of health care.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Describe the nursing context for improving care;</li> <li>Understands the role of continuous professional development in the practice of nursing</li> </ul>	<ul style="list-style-type: none"> <li>Recognize that quality improvement is an essential part of nursing;</li> <li>Value the importance of continuous professional development</li> </ul>	<ul style="list-style-type: none"> <li>Utilize current knowledge and best practices in the care of medical and surgical patients;</li> <li>Integrate evidence-based interventions for improving quality of care to patients</li> </ul>

### Competency 6: Teamwork and collaboration

Functions effectively within interdisciplinary teams fostering mutual respect, shared decision-making, team learning and development.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Identifies contributions of other individuals and groups in helping medical and surgical patients and their families achieve health goals</li> </ul>	<ul style="list-style-type: none"> <li>Respects the centrality of the patient and family as core members of the medical and surgical care team</li> </ul>	<ul style="list-style-type: none"> <li>Incorporates other health care members or family into client care in medical and surgical units</li> </ul>

### 3.2.3.6 Paediatric Nursing (Theory)

1. Programme	2. 4-Year Nursing and Midwifery
3. Module Title	4. Paediatric Nursing (Theory)
5. Module Code	6. NURS 202
7. Year	8. Two
9. Total Hours / Credits	10. 45/3

### Description

This module introduces the learner to the normal growth and development process in children and the management of well and ill children with acute and chronic diseases. It covers children's responses to illness and hospitalization and their experience with and perception of sickness and hospitalization, communication with children, pain management in children, relations with parents, and the role of nursing in the care of children with different kinds of health problems. Emphasis is placed on the use of the nursing process and selected nursing theories in the care of children aged 1 to 12 years.

### Aim

This module aims to equip learners with knowledge, attitudes and skills required in the provision of care to well and sick children and their families.

### Learning outcomes

On successful completion of this module the learner will be able to demonstrate knowledge and skills in:

- The key landmarks in the history of and developments in the field of paediatric nursing.
- Performing comprehensive assessment of the well and sick child to identify needs and problems and plan appropriate care
- The roles and responsibilities of a nurse in the provision of care to children.
- The child growth and development process.
- Children's responses to and perception of illness and hospitalization.
- The requirements of comprehensive nursing care for children, taking into consideration their growth and developmental stages.
- Integration of family-centred paediatric nursing in the management of illnesses such as genetic disorders, congenital malformation and other conditions requiring long-term care.
- Legal and ethical frameworks applicable to paediatric nursing.

## Content

- Introduction to paediatric nursing
- Growth and development in children
- Assessment of the paediatrics client
- Nursing process in the care of children
- Care of hospitalized children
- Drug use in paediatrics, dosage determination and drug administration
- Nursing management of children suffering from:
  - Special disorders
  - Disorders of the respiratory system
  - Cardiac conditions
  - Disorders of the gastrointestinal system
  - Disorders of the genitourinary system
  - Haematological or immunological disturbance
  - Disorders of the regulatory system
  - Nervous system disturbance
  - Cerebral disturbance
  - Endocrine disturbance
  - Mobility disorders
  - Neuromuscular disturbance
  - Communicable diseases
- Disorders of reproductive system
- Disorders of EENT (eyes, ears, nose and throat)

## Teaching methods

Group discussions, lectures, demonstrations, videos, case studies, care scenarios, lectures, seminars, tutorials, role play, use of video, sessions in the nursing skills laboratory.

## Assessment strategies

### Formative assessment (40%)

Individual assignment, group assignment, midterm test.

### Summative assessment (60%)

Written theory examination.

## Reading materials

1. Hockenberry, MJ & Wilson, D (2011) Wong's Nursing Care of Infants and Children, 9<sup>th</sup> Ed. St Louis: CV Mosby Co.
2. Pillitteri A (2010). Maternal and child health nursing: care of the childbearing and childrearing family.
3. Kyle, T (2008). Essentials of paediatric nursing. Lippincott Williams & Wilkins, Philadelphia
4. Potts, NL & Mandelco, BL (2012). Pediatric Nursing: Caring for Children and their Families. Delmar, Cengage Learning
5. WHO/UNICEF (2005). Integrated management of childhood illness. Geneva, Switzerland
6. WHO (2008). Report of Technical Consultation on IMCI Training Approaches and Pre-service IMCI.

### 3.2.3.7 Paediatric Nursing (Clinical)

1. Programme	2. 4 year Integrated Nursing and Midwifery
3. Module Title	4. Paediatric nursing (clinical)
5. Module Code	6. NURS 204
7. Year	8. Two
9. Total hours/credits	10. 135/3

## Description

This module will help the learner to develop the competencies necessary to manage children in the hospital or community. Students will enhance the skills and knowledge acquired from fundamentals of nursing clinical experiences while working with sick or well children and their families at all levels of the health facility and in the community.

## Aim

The aim of this module is to assist the learners to develop competencies necessary for providing safe and effective care to children and their families.

## Learning outcomes

On successful completion of this module the learner should be able to:

1. Conduct a comprehensive assessment of children, incorporating knowledge from bio-psychosocial sciences.
2. Plan, implement and evaluate care provided to sick children by hospital staff, collaborating with the family and members of the health team.
3. Provide appropriate nursing care to paediatric clients based on the diagnosis, age and developmental stage.
4. Communicate effectively with children, parents and families taking into consideration cultural norms and values.
5. Demonstrate ability to use the IMCI (integrated management of childhood illness) chart.
6. Manage children with childhood illnesses at a primary health care centre.
7. Educate clients and their families about the support available to help with difficulties concerning the child's diagnosis and treatment.



## Clinical skills

- Admission of a child
- Comprehensive assessment of a child
- Assessment of a child for signs of diarrhoea
- Assessment of a child for signs of local infections
- Nutritional Assessment
- Use of IMCI chart
- Calculation of paediatric drug dosages
- Determination of levels of intravenous fluids administered
- Oxygen administration
- Placing a nasogastric tube
- Introducing a urine catheter
- Pre-operation preparation
- Preparing nursing care plans
- Administering immunizations
- Counselling a HIV-positive mother on feeding her infant
- Counselling of a mother on adherence to antiretroviral therapies

## Teaching methods

Practical demonstrations, group work, case scenarios, case presentation, simulations, role play, self-directed learning, reflective diaries.

## Assessment strategies

### Formative assessment (60%)

Clinical logs, clinical practicum, work book completion, case presentations.

### Summative assessment (40%)

Clinical examination.

## Reading materials

1. Hockenberry, MJ & Wilson, D (2011) Wong's Nursing Care of Infants and Children, 9th Ed. St Louis: CV Mosby Co.
2. Pilliteri A (2010). Maternal and child health nursing: care of the childbearing and childrearing family.
3. Kyle, T (2008). Essentials of paediatric nursing. Lippincott Williams & Wilkins, Philadelphia
4. Potts, NL & Mandleco, BL (2012). Paediatric Nursing: Caring for Children and Their Families. Delmar, Cengage Learning.
5. WHO/UNICEF (2005). Integrated management of childhood illness. Geneva, Switzerland
6. WHO (2008). Report of Technical Consultation on IMCI Training Approaches and Pre-service IMCI.

## Competencies

### Competency 1: Integration of clinical knowledge and skills to patient care

Conduct as comprehensive assessment of a paediatric patient and his or her family.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of information that is to be collected from a paediatric patient and his or her family's health history prior to the physical assessment</li> <li>• Differentiates normal from abnormal vital signs and physical assessment findings</li> <li>• Differentiates normal from abnormal basic laboratory and diagnostics findings</li> <li>• Demonstrates understanding of assessment used in integrated management of childhood illness (IMCI)</li> </ul>	<ul style="list-style-type: none"> <li>• Is respectful of the paediatric patient and the patient's family's choices and preferences</li> <li>• Appreciates the importance of using the IMCI approach</li> </ul>	<ul style="list-style-type: none"> <li>• Obtains complete history on a paediatric patient and his or her family</li> <li>• Conducts a physical assessment on a paediatric patient taking into consideration the development stage of the patient</li> <li>• Examines vital signs and physical assessment findings to determine abnormalities</li> <li>• Recognizes the general danger signs in paediatric clients</li> <li>• Assesses and classifies main symptoms for cough or difficult breathing, diarrhoea or fever</li> <li>• Assesses children with severe malnutrition, anaemia, signs of diarrhoea or sore throat and determines whether to treat or refer for other health care</li> <li>• Checks children for HIV infection, classifies the HIV status and determines whether to treat or refer the child</li> </ul>

**Competency 2: Care provision**

Plan, implement and evaluate the care of a paediatric patient.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the paediatric patients' care needs based on the patient's developmental stage</li> <li>Describes the psychosocial developmental needs of paediatric patients</li> <li>Understands how to utilize IMCI principles in planning, delivering and evaluating health care and referring a paediatric patients</li> </ul>	<ul style="list-style-type: none"> <li>Provides care that demonstrates sensitivity to the needs of vulnerable patients or clients</li> </ul>	<ul style="list-style-type: none"> <li>Uses the nursing process to critically assess, analyse, plan, implement and evaluate nursing care for paediatric patients or clients with a variety of health problems</li> <li>Determines the appropriate priorities for care based on the nursing diagnosis</li> <li>Develops and implements teaching plans for individual paediatric patients with specific health-care needs</li> <li>Treats children with severe malnutrition, low weight for their age or anaemia per IMCI guidelines</li> <li>Provides appropriate pre-referral treatment and referral following IMCI guidelines</li> <li>Treats with antibiotics anti-malarial, ORS, etc., observing dosage and time requirements (IMCI)</li> <li>Counsels the child's caregiver on the signs to treat as an emergency needing immediate medical attention and on follow-up per IMCI guidelines</li> </ul>

### Competency 3: Therapeutic communication

Understand and utilize therapeutic communication and interpersonal relationship skills in the care of the paediatric patient.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Considers the key concepts relating to paediatric patients and their cognitive, developmental and functional levels when determining the most appropriate communication techniques</li> <li>Describes behavioural manifestations of anxiety in the paediatric patients, as children may not be able to verbally express worries</li> <li>Describes behavioural manifestations of depression in paediatric patients, children or adolescents</li> </ul>	<ul style="list-style-type: none"> <li>Values inclusive communication when dealing with paediatric patients or clients</li> </ul>	<ul style="list-style-type: none"> <li>Documents abnormal findings on appropriate forms or records</li> <li>Communicates with patients using age-appropriate language</li> <li>Incorporates age-appropriate educational and information technology in providing health promotion and client education</li> <li>Allows children to ask questions about procedures and provides answers honestly and at the child's level of understanding</li> <li>Counsels the caregiver on when urgent referral is needed and when to immediately return the child for medical attention or for follow-up (IMCI)</li> <li>Counsels mothers on infants' or young children's feeding (IMCI)</li> <li>Counsels the caregiver on adherence to ART and when to initiate ART</li> <li>Counsels HIV-positive mothers on feeding of their infants</li> <li>Counsels mothers on childcare for healthy development</li> </ul>

### Competency 4: Comfort and safety

Demonstrate understanding of the importance of safety and comfort measures in the provision of care to paediatric patients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the paediatric clients' comfort needs based on their specific age and developmental stage</li> <li>Describes the principles for providing comfort measures for a variety of health problems in children</li> <li>Demonstrates comprehension of the rationale for adapting comfort measures and nursing care for children based on theories, concepts and research-informed evidence</li> </ul>	<ul style="list-style-type: none"> <li>Positively promotes safe practices in paediatric nursing care</li> </ul>	<ul style="list-style-type: none"> <li>Considers patient comfort and safety, particularly with respect to limitations commonly found with paediatric patients</li> <li>Encourages parents and caregivers to apply non-pharmaceutical comfort measures</li> <li>Encourages parents and caregivers to stay with the admitted child providing support and comfort as required</li> <li>Applies principles of infection control to minimize or prevent the spread of infections when performing routine nursing care</li> </ul>

**Competency 5: Collaboration and teamwork**

Collaborates with members of the healthcare team and family in the planning and delivery of care to paediatric patients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands roles of different members of the team involved in providing care to paediatric clients</li> </ul>	<ul style="list-style-type: none"> <li>Collaborates with clients to achieve mutually agreed-upon health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>Communicates abnormal findings to the appropriate members of the healthcare team in a timely manner</li> <li>Participates in the planning and delivery of patient care in collaboration with the health care team, including the patient, the family and healthcare providers</li> </ul>

**Competency 6: Ethical and legal health care practice**

Adhere to ethical and legal frameworks applicable to paediatric nursing.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the ethical principles, values, concepts and decision-making approaches that apply to paediatric nursing</li> <li>Understands the role and responsibilities as a patient advocate</li> </ul>	<ul style="list-style-type: none"> <li>Values the application of ethical principles in daily practice</li> <li>Values acting in accordance with codes of ethics and accepted standards of practice</li> <li>Values the role and responsibilities as a patient advocate</li> </ul>	<ul style="list-style-type: none"> <li>Utilizes an ethical decision-making frameworks in paediatric clinical situations</li> <li>Identifies and responds to ethical concerns, issues, and dilemmas that affect paediatric nursing practice</li> <li>Serves as a paediatric patient advocate</li> </ul>

**Competency 7: Quality Management**

Improves the quality of care using available best evidence.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the application of the concept of quality improvement in paediatric nursing</li> <li>Understands how to utilize evidence to improve the quality of care</li> </ul>	<ul style="list-style-type: none"> <li>Values efforts for continuous improvement in clinical practice based on new knowledge</li> </ul>	<ul style="list-style-type: none"> <li>Bases individualized care on best current evidence, patient values and clinical expertise to improve the quality of care</li> </ul>

### 3.2.3.8 Medical Surgical Nursing 2 (Theory)

<b>Programme</b>	4 -year Integrated Nursing and Midwifery
<b>Module Title</b>	<b>Medical and surgical nursing 2 (theory)</b>
<b>Module Code</b>	NURS 206
<b>Year</b>	Two
<b>Total hours/credits</b>	60/4

## Description

This module builds on the knowledge and skills from the modules of fundamentals of nursing, basic sciences (chemistry, physics and microbiology), anatomy and physiology, and medical and surgical nursing 1. It provides the learner with knowledge and skills to effectively manage adults with medical and surgical conditions of the musculoskeletal, nervous, integument, genitourinary and special senses systems. Emphasis is placed on utilization of knowledge of the human needs theory and the nursing process in the professional and ethical provision of comprehensive quality nursing.

## Aim

To equip the learner with knowledge and appropriate skills and attitudes for the management of adult patients with medical and surgical conditions affecting the musculoskeletal, nervous, integument, genitourinary and special senses systems.

## Learning outcomes

On successful completion of this module the learner will be able to:

1. Assess adults or aged patients with medical and surgical disruptions applying the human needs theory.
2. Analyze the assessment data and identifying health problems in adult or aged patients with medical and surgical conditions.
3. Assist with diagnostic assessments of adult or aged patients with medical and surgical conditions.
4. Manage pharmacologic agents used in the treatment of adult or aged patients with medical or surgical conditions, based on the requirements of the essential health package.
5. Identify nutritional requirements of adult or aged patients with medical and surgical and conditions.
6. Apply psychosocial, cultural and spiritual values in the nursing management of patients with medical and surgical conditions and their families.

## Content

### Unit 1: Nursing management of clients with musculoskeletal diseases and conditions

- Assessing the musculoskeletal system
- Diagnostic tests
- Fractures: splints, casts
- Skeletal and skin traction
- Soft tissue injury: sprains, strains
- Bone healing
- Arthritis
- Osteoporosis
- Osteomyelitis

- Lumbago
- Muscular dystrophy
- Contractures
- Decubitus ulcer
- Tendonitis
- Amputation
- Dislocations
- Cellulitis
- Skeletal TB

## **Unit 2: Nursing management of clients with nervous system diseases and conditions**

- Assessing the nervous system
- Clinical manifestations of neurological problems
- Increased intracranial pressure
- Cardiovascular accident
- Head injuries
- Meningitis
- Epilepsy
- Unconsciousness
- Delirium
- Dementia
- Alzheimer's disease
- Parkinson's disease
- Numbness and paralysis
- Neurogenic shock
- Cerebral palsy
- Brain tumours
- Rabies

## **Unit 3: Nursing management of clients with genitourinary system diseases and conditions**

- Assessment of the urinary system
- Urinary tract infections
- Urinary retention
- Urinary incontinence
- Cystoscopy
- Renal calculi
- Renal tumours
- Renal failure
- Nephritis
- Nephrotic syndrome
- Vesicovaginal fistulae
- Assessment of reproductive structures and their functions
- Abortion

- Uterine fibroids and hysterectomy
- Uterine prolapse
- Cervical and breast cancer
- Mastitis and mastectomy
- Sexually transmitted infections (STIs)
- Schistosomiasis
- Hydrocele
- Enlarged prostate and prostatectomy
- Fluid and electrolyte disturbances
- Body structures involved in maintaining fluid and electrolyte balance
- Assessment and nursing management of fluid and electrolyte imbalances
- Acid-base disturbances (metabolic and respiratory acidosis and alkalosis)
- Electrolyte imbalances
- Fluid imbalances and infusions
- Dehydration and hypovolemic shock

#### **Unit 4: Nursing management of clients with Integumentary disorders and conditions**

- Assessment of the integument
- Skin disorders: psoriasis, acne, rash, eczema, dermatitis
- Skin injuries: burns, cuts, abrasions, contusions, wound dressing
- Skin and mucosal infections: fungal infections (skin and nail), scabies, boils, abscesses
- Cancers of the skin: Kaposi's sarcoma
- Herpes zoster
- Herpes simplex
- Steven-Johnson's syndrome
- Allergic reactions

#### **Unit 5: Nursing management of disorders and conditions of special sensory organs**

- Assessment of sensory organs
- Ears: Otitis media, hearing disruptions
- Nose: sinusitis, smell disruptions
- Eyes: reduced visual acuity, blinding conditions, non-blinding conditions, emergency eye conditions, corneal perforation, conjunctivitis, cataract, furuncles, stye, refraction errors
- Cancer of the eye

#### **Unit 6: Nursing management of clients taking pharmacologic agents**

- Anti-inflammatory agents
- Analgesics
- Antifungal agents
- Anti-Parkinson's disease agents
- Diuretics
- Electrolyte supplements



## Teaching methods

Lectures, group discussions, enquiry-based learning, directed and self-directed learning, role play, simulations.

## Assessment strategies

### Formative assessment (40%)

Assignment, test.

### Summative assessment (60%)

Three-hour written examination.

## Reading materials

1. Berman AJ, Snyder S (2011). Fundamentals of nursing: concepts, process and procedures, 9th ed. Prentice Hall.
2. Gray JAM (2012). Evidence-based health care. Edinburgh: Churchill Livingstone.
3. Hargrove-Huttel RA (2001). Medical-surgical nursing, 3rd ed. Philadelphia: Lippincott.
4. Mogotlane SM, Mokoena JD, Chauke ME, Young A (2005). Juta's manual of nursing, vol. 4, medical surgical nursing, Parts 1 & 2. Johannesburg: Juta.
5. Ignatavicius DD, Workman ML (2012). Medical and surgical nursing: patient centred collaborative care, 7th ed. Philadelphia: Saunders.
6. Smeltzer SC, Bare BG (2010). Brunner and Suddath textbook of medical and surgical nursing, 12th ed. Philadelphia: Lippincott.

### 3.2.3.8 Medical and Surgical Nursing 2 (Clinical)

<b>Programme</b>	4 –Year Integrated Nursing and Midwifery
<b>Module Title</b>	<b>Medical and Surgical Nursing2 (Clinical)</b>
<b>Module Code</b>	NURS208
<b>Year</b>	Two
<b>Total hours/credits</b>	170/4

## Description

This module provides the learner the opportunity to develop skills and competences necessary for managing adult patients with medical and surgical conditions or disorders of the musculoskeletal, nervous, integument, genitourinary and special senses systems. The learner will utilize the human needs theory, the primary health care approach and the nursing process in the provision of care to adult patients with medical and surgical conditions and their families.

## Aim

To equip the learner with appropriate attitudes and skills for management of adult patients with medical and surgical conditions of the musculoskeletal, nervous, integument, genitourinary and special senses systems. The learners will be placed in different facilities offering services to clients with related medical and surgical conditions.

## Learning outcomes

On successful completion of this module the learner will be able to:

1. Demonstrate competence in assessment of adult patients with medical and surgical conditions applying the human needs theory.
2. Demonstrate competence in preparation of diagnostic assessments conducted on adult patients with chronic diseases.
3. Demonstrate competence in identifying nursing needs or problems of adult patients with chronic diseases.
4. Demonstrate competence in nursing management of adult patients with chronic diseases utilizing the essential health care package (EHP) within the primary health care environment.
5. Demonstrate competence in managing patients receiving pharmacologic agents used in the treatment of adult patients with chronic diseases.
6. Apply psychosocial, cultural, spiritual, ethical and professional values in provision of nursing management to adult patients and support to their families.

## Content

### Unit 1: Nursing skills for conditions of the musculoskeletal system

- Care of pressure areas
- Positioning: recumbent, prone, Trendelenburg, lithotomy
- Bone marrow aspiration
- Wound dressing, suturing, irrigation
- Suture/clip removal
- Incision and drainage
- Administering injection
- Removal of drain from wound
- Care of the patient with amputation: stump care, psychological care, body image
- Bandaging, splinting and application of sling
- Application of plaster of Paris (POP)
- Care of the patient with POP or cast
- Removal of plaster cast
- Care of the patient with internal and external fixation and traction
- Range of motion exercises
- Ambulating a patient

## **Unit 2: Nursing skills for managing diseases and conditions of the nervous system**

- Lumbar puncture
- Mental health assessment
- Use of Glasgow coma scale
- Neurological assessment
- Care of epileptic patients

## **Unit 3: Nursing skills for managing diseases and conditions of the genitourinary system**

- Collection of urine specimen: catheter, ambulatory patient, clean catch midstream
- Intake and output urine measurement
- Giving and removal of bed-pan/urinal
- Interpreting urinalysis results
- Sitz bath
- Vulval swabbing
- Collection of Papanicolaou smear
- Gynaecological examination

## **Unit 4: Nursing skills for managing diseases and conditions of the integument**

- Bathing a patient: shower, bed
- Hand washing
- Care of nails
- Hair washing
- Application of topical ointments

## **Unit 5: Nursing skills for managing diseases and conditions of special sensory organs**

- Examination of the ear and eye
- Assessing eye acuity
- Ear wash out, swabbing
- Eye irrigation, swabbing, application of ointment or drops
- Examination of the nose and throat
- Instilling nose drops

## **Teaching methods**

Lectures, group discussions, enquiry-based learning, directed and self-directed learning, role play, simulations.

## **Assessment strategies**

### **Formative assessment (60%)**

Test, quizzes, case presentation, individualized care plans, workbook.

### **Summative assessment (40%)**

Practical assessment, objective structured clinical examination (OSCE), case presentation, two-hour examination paper.

## Reading materials

1. Berman AJ, Snyder S (2011). Fundamentals of nursing: concepts, process and procedures, 9th ed. Prentice Hall.
2. Gray JAM (2012). Evidence-based health care. Edinburgh, Churchill Livingstone.
3. Hargrove-Huttel RA (2001). Medical-surgical nursing, 3rd ed. Philadelphia, Lippincott.
4. Mogotlane SM, Mokoena JD, Chauke ME, Young A (2005). Juta's manual of nursing, vol. 4 -Medical surgical nursing parts 1 & 2. Johannesburg: Juta.
5. Ignatavicius DD, Workman ML (2012). Medical and surgical nursing: patient-centred collaborative care, 7th ed. Philadelphia, Saunders.
6. Smeltzer SC, Bare BG (2010). Brunner and Suddath textbook of medical and surgical nursing, 12th ed. Philadelphia, Lippincott.

## Competencies

### Competency 1: Client and Patient-centred care

Provide patient-centred care recognizing an individual's needs for appropriate, safe and effective care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates familiarity with the components of the nursing process</li> <li>• Demonstrates understanding of the diversity of the human condition</li> </ul>	<ul style="list-style-type: none"> <li>• Appreciates the importance of a systematic approach to client assessment</li> <li>• Values the inherent worth and uniqueness of individuals and populations</li> </ul>	<ul style="list-style-type: none"> <li>• Performs physical assessment to establish normal or abnormal baseline findings</li> <li>• Plans appropriate care for clients, establishing priorities</li> </ul>

### Competency 2: Professionalism

Demonstrate accountability in the delivery of nursing care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Understands the concept of accountability in the provision of medical-surgical nursing care</li> <li>• Understands the principles of teaching of and learning by patients with medical-surgical conditions</li> </ul>	<ul style="list-style-type: none"> <li>• Shows commitment to the provision of high quality, safe and effective patient care</li> <li>• Accepts the role and responsibility for providing health education to patients with medical surgical conditions and their families</li> <li>• Recognizes the responsibility to function within acceptable behavioural norms appropriate for the provision of care to clients with medical surgical needs</li> </ul>	<ul style="list-style-type: none"> <li>• Safely performs learned skills on adult clients with medical surgical conditions</li> <li>• Identifies learning needs of patients and their families in medical surgical units</li> <li>• Formulates a plan for teaching patients and their families in medical surgical units</li> <li>• Adheres to health facility or agency policies and principles for ethical behaviour and patient confidentiality appropriate in medical surgical units</li> </ul>

**Competency 3: Communication (therapeutic communication and teaching and learning)**

Interact effectively with clients and their families to enhance client satisfaction and health outcomes.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the principles of effective communication as applied to interaction with clients with medical surgical needs</li> </ul>	<ul style="list-style-type: none"> <li>Accepts responsibility for communicating effectively with clients with surgical medical needs</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrates effective communication skills in the process of obtaining data, assessing the needs of clients in medical surgical units and in sharing pertinent information</li> </ul>

**Competency 4: Safety**

Minimize risk of harm to clients through individual performance.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates knowledge of basic scientific methods and processes for safety and risk assessment and management in the provision of care to patients with medical surgical conditions, for example in administration of medicines</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the strength of scientific basis for nursing practice in minimizing risk and ensuring safety in medical surgical units</li> </ul>	<ul style="list-style-type: none"> <li>Conducts assessments of medical surgical patients for potential risk</li> <li>Promotes activity for medical surgical patients through encouraging exercise and ambulation</li> <li>Applies universal precautions in the provision of medical surgical care</li> <li>Uses safety measures for patient, colleague and personal protection from injury and hospital-acquired infections</li> </ul>

**Competency 5: Quality improvement**

Uses data to monitor outcomes of care processes and to improve the quality of health care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Describes the nursing context for improving care</li> <li>Understands the importance of evidence-based practice in improving the quality of care provided</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes that quality improvement is an essential part of nursing</li> <li>Values the use of evidence in making informed decisions regarding quality improvement</li> </ul>	<ul style="list-style-type: none"> <li>Identifies recurring client problems and possible nursing interventions</li> <li>Utilizes current knowledge and best practices in providing medical surgical care</li> </ul>

## Competency 6: Teamwork and collaboration

Functions effectively within interdisciplinary teams, fostering mutual respect, shared decision-making, team learning and development.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Identifies contributions of other individuals and groups in helping medical surgical patients and their families to achieve health goals</li> </ul>	<ul style="list-style-type: none"> <li>Respects the centrality of the role of the patient and his or her family as core members of the medical surgical care team</li> </ul>	<ul style="list-style-type: none"> <li>Incorporates other healthcare team members or the patient's family in client care in medical surgical units</li> </ul>

## 3.3 Year 3

### 3.3.1 Introduction

**Year 3** introduces learners to the foundations of midwifery, new-born care, research and evidence-based practice.

### 3.3.2 Learning outcomes

On successful completion of the third year the learners will be able to:

1. Integrate knowledge on ethical, legal and cultural concepts and bio-psychosocial sciences in provision of midwifery and new-born care and management of pregnancy, labour and new-born complications.
2. Provide systems-based, client-centred care for mothers and new-born babies and their families and for the management of pregnancy, labour, puerperium and new-born with and without complications.
3. Promote and advocate for safe motherhood in midwifery practice.
4. Demonstrate awareness of policy and ethical issues affecting nursing, midwifery and healthcare delivery systems at different levels of care provision.
5. Assess the impact or implications of nursing, midwifery and health policies in the provision of care to clients with health needs.
6. Utilize a range of skills to identify, analyse and address complex nursing and midwifery problems drawing systematically on the body of knowledge and methods appropriate to nursing and midwifery to improve the quality of care.
7. Participate in the evaluation of the quality of care and in the implementation of quality improvement measures.
8. Participate in conducting research in researchable areas of nursing or midwifery.

### 3.3.3 Semester Modules

#### 3.3.3.1 Foundations of Midwifery and Anatomy and Physiology in Midwifery

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Foundations of midwifery and A&P in midwifery
5. Module Code	6. MID 301
7. Year	8. Three
9. Total hours/credits	10. 75/5

#### Description

This module introduces the learner to the basics of midwifery theory and practice. It covers midwifery history, legal and ethical frameworks of midwifery practice, anatomy and physiology as applied to midwifery, preconception care, adolescent and sexual reproductive health, family planning, partnership model in midwifery, and the concept of safe motherhood. This module lays the foundation for the midwifery practice module.

#### Aim

This module equips the learner with foundational knowledge in midwifery and anatomy and physiology as applied to midwifery.

#### Learning outcomes

On successful completion of this module the learner should be able to:

11. Explain the history of midwifery as a profession.
12. Apply relevant legal, ethical and other codes of practice underpinning midwifery.
13. Explain the concepts of preconception and family planning.
14. Apply knowledge of the socioeconomic determinants of reproductive sexual health in providing family planning services.
15. Apply the knowledge of anatomy and physiology of obstetrics related to antepartum, intrapartum and postnatal periods.
16. Describe the anatomy and physiology of the new-born baby.
17. Discuss the genetic and other conditions that affect maternal and neonatal outcomes.
18. Apply communication and counselling skills in promoting family planning.
19. Integrate knowledge on contraceptive use to prescribe appropriate family planning methods for clients.
20. Apply systems thinking in midwifery care.

## Content

### Midwifery foundations

- History of midwifery as a profession
- Introduction to relevant theoretical frameworks to midwifery practice;
- Midwifery and the law
- Midwifery management process
- Midwifery codes of practice
- Country-specific midwifery scope of practice
- Partnership model in midwifery

### The concept of safe motherhood

- Preconception care
- Genetic conditions
- Infertility
- Preconception health
- Infections and conception
- Counselling genetic issues

### Adolescent, reproductive and sexual health

- Gynaecological conditions
- Gynaecological assessment
- Pelvic inflammatory disease
- Abdominal masses
- Menstrual cycle and menstrual disorders
- Abortion and post-abortion care
- Ectopic pregnancy
- Sexually transmitted infections including HIV
- Cancer of the reproductive system
- Obstetric fistula

### Applied anatomy and physiology

- Anatomy and physiology of the reproductive organs
- Human development through the lifespan
- Foetal growth and development
- Physiology of pregnancy
- Physiology of the first, second and third stages of labour
- Physiology of puerperium
- Physiology of the new-born baby
- Lactation
- Development and abnormalities of the placenta



## **Introduction to family planning**

- Procedures and policies
- Beliefs and misconceptions
- Sexual and reproductive rights
- Contraceptive methods
- Hormonal methods
- Natural methods
- Barrier methods
- Surgical methods
- Prescription of contraceptive methods
- Application of communication and counselling skills
- Emergency contraception
- Dual protection
- Return to fertility
- Logistics management for contraceptives

## **Introduction to systems thinking in midwifery care**

- Role of a midwife in preconception care and family planning
- Planning, organization and delivering midwifery care using a systems thinking approach
- Referral system in midwifery

## **Teaching methods**

Lectures, discussions, case studies, demonstrations, e-learning, seminar presentations

## **Assessment strategies**

### **Formative assessment (40%)**

Assignment, tests, quiz.

### **Summative assessment (60%)**

Written three-hour examination.

## Reading materials

1. Bennett RV, Brown LK (2009). Myles textbook for midwives, 15th ed. London: Churchill Livingstone.
2. Coad J, Dunstall M (2012). Anatomy and physiology for midwives. 3rd ed. London: Mosby. Johnson R, Taylor W (2000). Skills in midwifery practice. London: Churchill Livingstone.
3. World Health Organization (2002). Making pregnancy safer: towards better maternal health and newborn. New Delhi: WHO Regional Office for South East Asia.
4. World Health Organization (2003). Integrated pregnancy, childbirth, postpartum and newborn care: a guide for essential practice. Geneva: World Health Organization.

## Competencies

### Competency 1: Integration of basic science into midwifery

Demonstrate understanding of the integration of basic science into midwifery practice.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Understand the normal anatomy and physiology of the human body (cells, tissues, organs, systems, etc.)</li> <li>• Understand body mechanics and its importance in patient/client care</li> </ul>	<ul style="list-style-type: none"> <li>• Recognize abnormalities in the structure and functions of the human body</li> <li>• Promote proper safety and comfort measures to ensure normalcy of human body</li> </ul>	<ul style="list-style-type: none"> <li>• Describe the structure and functions of the human body, including systems</li> <li>• Draw body parts including systems</li> <li>• Identify potential risks to patients/clients due to abnormalities and take appropriate action</li> <li>• Demonstrate ability to assess and examine the patient correctly</li> </ul>

**Competency 2: Client- and patient-centred care**

Conduct a comprehensive assessment of a client.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates familiarity with the critical components of health, family, relevant gynaecologic histories, physical examinations and investigative laboratory studies</li> <li>• Demonstrates knowledge of genetic and other conditions that affect maternal and neonatal outcomes</li> <li>• Demonstrates ability to use genetic counselling and targeted counselling skills to provide preconception care to couples</li> <li>• Demonstrates understanding of family planning and contraceptive methods</li> <li>• Demonstrates knowledge of principles of screening methods for cervical cancer and the referral process</li> </ul>	<ul style="list-style-type: none"> <li>• Respects women and families seeking family planning services</li> <li>• Respects cultural diversity in dealing with women and their families during preconception care</li> </ul>	<ul style="list-style-type: none"> <li>• Takes a comprehensive history of the patient's medical, surgical, obstetric, gynaecological and reproductive health status and sexually transmitted infections</li> <li>• Performs physical examination, including clinical breast examination, focusing on the presenting condition of the woman</li> <li>• Requests or performs and interprets common laboratory tests such as hematocrit and urinalysis dipstick for checking for proteinuria</li> <li>• Requests or performs and interprets selected screening tests for illnesses such as tuberculosis and HIV and other sexually transmitted infections</li> <li>• Performs tests using available diagnostic tools</li> <li>• Uses syndromic management flowcharts for sexually transmitted infections</li> <li>• Takes history on infertility-specific criteria</li> <li>• Conducts a physical examination to identify gross morphology of male or female genitalia</li> <li>• Conducts preconception counselling on lifestyle aspects such as nutrition, folic acid requirements, age and sex differences, birth weight, smoking, relationships and other stress sources, over-the-counter and recreational drugs such as alcohol, occupational hazards, and scrotal injury and temperature effects (for men)</li> <li>• Screens clients for conditions for which use of certain contraceptive methods would carry unacceptable health risks</li> <li>• Performs or requests cervical cytology (Pap) test</li> <li>• Places and removes intrauterine contraceptive devices</li> <li>• Inserts and removes contraceptive implants</li> <li>• Carries out acetic acid visualization of the cervix and interprets the observations to determine the need for referral and treatment</li> <li>• Screens clients for conditions in which use of certain contraceptive methods would carry unacceptable health risks</li> </ul>

### Competency 3: Client-centred care

Plan and provide client-centred care to women and their families.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of sexually transmitted diseases</li> <li>• Understands the requirements for HIV counselling and testing</li> <li>• Demonstrates knowledge of various family planning methods, including emergency contraception</li> </ul>	<ul style="list-style-type: none"> <li>• Values provision of care with respect and dignity</li> </ul>	<ul style="list-style-type: none"> <li>• Develops plans of care for childbearing families using knowledge gained through assessments and consults with other members of the healthcare team in care provision</li> <li>• Provides couple-centred management of presenting situations or problems</li> <li>• Provides care, support and referral or treatment for HIV-positive women and HIV counselling and testing for women who do not know their status</li> <li>• Prescribes, dispenses or administers locally available methods of family planning including emergency contraception</li> <li>• Places and removes intrauterine contraceptive devices</li> <li>• Places and removes contraceptive implants</li> <li>• Carries out acetic acid visualization of the cervix and determines the need for referral or treatment</li> </ul>

### Competency 4: Professionalism

Implement the plan of care within the legal, ethical and regulatory framework of nursing practice.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates knowledge of the legal, ethical and regulatory factors that apply to midwifery practice</li> <li>• Demonstrates knowledge of the national standards, protocols and regulations in the provision of quality family planning services, including referral for advanced illness management</li> </ul>	<ul style="list-style-type: none"> <li>• Advocates for and participates in changes to improve the midwifery practice and care of childbearing families</li> </ul>	<ul style="list-style-type: none"> <li>• Works in partnership with women and supports them in making informed choices about their health</li> <li>• Advocates for the role of the midwife as a member of the profession and the healthcare team</li> <li>• Identifies and responds to ethical concerns, issues and dilemmas that affect nursing practice</li> <li>• Follows national standards, protocols and regulations in the provision of quality family planning services, including referral of patients for advanced illness management</li> </ul>

**Competency 5: Systems-based approach to care**

Understand the relationship among midwifery, the midwifery practice setting and organizational goals.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the concept of systems thinking in midwifery care</li> <li>Is familiar with the referral systems in midwifery care, particularly those critical in preconception care</li> </ul>		<ul style="list-style-type: none"> <li>Plans, organizes and delivers preconception and family planning care using a systems thinking approach</li> <li>Facilitates the transition of the patient through the continuum of care</li> <li>Advocates for help for patients and assists them or their families to deal with system complexities by educating or referring them to information and resources</li> <li>Enlists system resources in resolving ethical issues in daily practice</li> </ul>

**Competency 6: Leadership and management**

Manage family planning resources and supplies.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the principle requirements in ordering and managing equipment supplies and stocks of contraceptives</li> </ul>	<ul style="list-style-type: none"> <li>Takes accountability for family planning resources</li> </ul>	<ul style="list-style-type: none"> <li>Maintains adequate stock levels and appropriate equipment and supplies for provision of family planning services, such as contraceptives and equipment and supplies for infection prevention procedures</li> </ul>

**3.3.3.2 Midwifery Science 1 (Theory)**

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Midwifery science 1 (theory)
5. Module Code	6. MID 303
7. Year	8. 3
9. Total hours/ credits	10. 45/3

**Description**

The module builds on basic sciences, anatomy and physiology of obstetrics and fundamentals of midwifery modules. It will enable the learner to acquire knowledge and skills for provision of quality care to women and families during pregnancy, labour and delivery, and postnatal period. In addition, the learner will acquire the knowledge, skills and appropriate attitudes needed for the provision of neonatal care. The module focuses on normal pregnancy, labour and delivery, and postnatal and neonatal care.

## Aim

This course is designed to equip the learner with knowledge, skills and appropriate attitudes for the care of women with normal pregnancy during labour and delivery and puerperium and neonates.

## Module Learning Outcomes

At the end of this module, the learner should be able to:

1. Describe the national and international policies/organizations that influence the health care delivery system, including midwifery.
2. Apply knowledge of psychological and physiological changes of pregnancy, labour and puerperium.
3. Demonstrate knowledge and skill in the management of pregnancy, labour and puerperium.
4. Prepare the woman and her family for labour and positive parenting.
5. Apply the partnership model of care in providing antenatal care to women and their families.

## Module Content

### Introduction

- National and International Health Policies/initiatives and Organizations influencing health care delivery systems

### Unit 1: Pregnancy and antenatal care

- Fertilization and foetal growth development
- Applied psychology of pregnancy
- Physiology of pregnancy
- Diagnosis of pregnancy
- Antenatal care
- Minor disorders of pregnancy
- Danger signs of pregnancy
- Special groups

### Unit 2: Labour and delivery

- Physiological processes of first, second and third stages of labour
- Management of first, second and third stages of labour
- Immediate care of the new-born

### Unit 3: Neonate

- Physiology of the new-born
- Psychology of the new-born
- Immediate care of the new-born
- Subsequent care of the new-born
- Minor disorders of the neonate: ophthalmia neonatorum and physiological jaundice
- Danger signs : bleeding from the cord, fever, cold injury, hypothermia, and inability to feed
- Assessment of the new-born
- New-born immunizations

## Unit 4: Postnatal care

- Psychology of the puerperium
- Management of the puerperium at one and six weeks
- Danger signs
- Health education and counselling, including HIV prevention, management and care

## Teaching methods

Lectures, discussions, problem-based learning, small-group discussions, e-learning, case studies, seminar presentations, role play, simulation of certain procedures, demonstration and return demonstrations.

## Assessment strategies

### Formative assessment (40%)

Written assignment, test.

### Summative assessment (60%)

Three-hour written examination.

## Reading materials

1. Fraser D, Cooper MA (2006). Myles textbook for midwives, 14th ed. Edinburgh: Churchill Livingstone.
2. Sellers PM (2006). Midwifery: a textbook and reference book for midwives in southern Africa, Vol I and II. Pretoria: Juta.
3. Diamond B (2006). Legal aspects of midwifery, 3rd edition. Edinburgh: Elsevier Ltd.
4. Cluett ER, Bluff R (2006). Principles and practice of research in midwifery.
5. Dare A (2003). A practical guide to working with babies. Cheltenham: Nelson Thornes Ltd.

### 3.3.3.3 Midwifery Practice 1 (Clinical)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Midwifery practice 1 (clinical)
5. Module Code	6. MID 305
7. Year	8. 3
9. Total hours/ credits	10. 540/4

## Description

The module builds on skills acquired in Fundamentals of Midwifery and Medical/Surgical Nursing Applied to Midwifery Practice modules. It is designed to enable the learner to develop competence in the provision of culturally sensitive care for women and families during pregnancy, labour, postnatal and neonatal periods in the clinical setting. The emphasis of the module is the utilization of the midwifery management process in the provision of care for women and neonates without obstetric, medical and emergency neonatal complications respectively. The learner will rotate in various clinical settings, namely antenatal clinic, labour ward and postnatal ward, to acquire competencies.

## Aim

The module will equip learners with competencies to provide culturally sensitive and evidence-based care during pregnancy, labour, postnatal and neonatal periods in the clinical setting.

## Module Learning Outcomes

At the end of this module, the learner should be able to:

1. Apply policies and procedures for antenatal, labour, postnatal and neonatal care.
2. Provide quality care to women during antenatal, labour and postnatal periods and identify any deviations from normal and refer timely.
3. Collaborate with other health professionals in managing women during antenatal, labour and postnatal periods.
4. Understand relevant investigations and interpret their findings.
5. Support women and families during antenatal, labour and postnatal periods.
6. Provide quality care to neonates immediately after birth.
7. Identify and refer neonates with conditions and complications.

## Competencies

### Unit 1: Pregnancy and Antenatal Care

#### Competency 1: Care provision

Assessment of a woman during antenatal care, labour and puerperium.

Knowledge	Attitude/Behaviour	Skills
<ul style="list-style-type: none"> <li>Psychological and physiological changes during pregnancy, labour and postnatal periods</li> <li>Nutritional requirements during preconception and pregnancy</li> <li>Methods for diagnosing pregnancy, establishing due date, and assessing gestational age and the progress of pregnancy</li> <li>Differentiate normal from abnormal vital signs and physical assessment findings, for example fundal height and firmness and breast consistency</li> <li>Understanding of foetal development and growth.</li> <li>Differentiate normal from abnormal laboratory and diagnostics findings</li> <li>Minor disorders of pregnancy and danger signs of pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Recognize psychological and physiological changes</li> </ul>	<ul style="list-style-type: none"> <li>Obtain a comprehensive and accurate health history, including both medical and psychosocial information</li> <li>Perform a complete abdominal assessment including measuring fundal height, position, lie and descent of foetus</li> <li>Perform a complete physical examination of a woman during pregnancy, labour and puerperium to detect abnormalities, and initiate treatment and/or consult or refer as appropriate</li> <li>Conduct a comprehensive assessment of the nutritional status of a pregnant women</li> <li>Perform ongoing assessment and physiological monitoring that are relevant to the women and her baby</li> <li>Assess foetal growth and well-being</li> </ul>



## Competency 2: Care provision

Provide care to women and family during pregnancy, detect early and treat any complications which may arise and refer if specialist attention is required.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand human reproduction, signs and symptoms of pregnancy including physiological changes</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate physiological changes that take place during pregnancy</li> <li>Value the importance of diagnosing and dating a pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Obtain initial and on-going history on each ANC visit</li> <li>Calculate the estimated date of delivery</li> <li>Make accurate diagnosis of pregnancy and other conditions which may affect pregnancy</li> <li>Identify any deviations from normal and refer timely</li> <li>Educate the woman about nutritional requirements to promote a healthy pregnancy and a healthy foetus</li> <li>Identify danger signs during pregnancy, labour and puerperium</li> <li>Assess foetal well-being</li> <li>Order/carry out and interpret screening tests during pregnancy</li> <li>Provide the appropriate prophylaxis/supplements during pregnancy (ferrous sulphate, folic acid, multivitamins, calcium and albendazole)</li> <li>Utilize the midwifery management process to manage clients based on the individual's needs</li> <li>Conduct HIV counselling, testing and management of pregnant women and families in line with the national PMTCT guidelines</li> <li>Educate clients and their families to promote self-care and facilitate informed decision making as regards pregnancy (The education will include personal hygiene; risks of STIs and HIV and safer sex; use of unprescribed drugs and alcohol in pregnancy; smoking, exercise, infant feeding, danger signs, nutrition; and importance of delivering at health facilities, signs of labour and routine follow-up visits)</li> <li>Monitor and evaluate antenatal care based on the national guidelines and protocols</li> <li>Document all findings, including investigation and intervention, appropriately</li> </ul>

### Competency 3: Counselling and health education

Demonstrates understanding of the principles of counselling & health education in the provision of care to women in the child bearing age.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the principles of health education for antenatal clients</li> <li>Understand high quality counselling related to antenatal care</li> </ul>	<ul style="list-style-type: none"> <li>Accept the role and responsibility for providing health education to antenatal clients and families</li> <li>Value effective counselling</li> </ul>	<ul style="list-style-type: none"> <li>Identify learning needs of clients and families in the antenatal clinic</li> <li>Formulate a plan for teaching clients</li> <li>Plan an effective counselling session</li> <li>Create a safe, secure and effective counselling space</li> <li>Assemble the appropriate counselling materials or aids related to SRH</li> </ul>

### Competency 4: Professionalism

Demonstrate accountability for the delivery of midwifery care.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the concept of accountability in the provision of antenatal care</li> <li>Demonstrate knowledge of susceptible women at risk of acquiring infection in maternity units</li> </ul>	<ul style="list-style-type: none"> <li>Show commitment to the provision of high quality, safe and effective antenatal care</li> <li>Recognize the responsibility of functioning within acceptable behavioural norms appropriate to the provision of care to antenatal clients</li> <li>Apply the principles of cultural sensitivity to ensure recognition of power differential and its' effect on midwife-patient/client interactions</li> </ul>	<ul style="list-style-type: none"> <li>Safely perform learned skills to adult clients with antenatal women</li> <li>Adhere to health facility / agency policies and principles regarding ethical behaviour and patient confidentiality appropriate in maternity</li> <li>Evaluate patients' comfort and safety in maternity units</li> <li>Demonstrate correct application of medical and surgical asepsis, such as creating and maintaining a sterile field during the provision of midwifery care</li> <li>Incorporate multiple approaches into the use of infection control practices based on the mother's health care needs and unique lifestyle</li> <li>Adapt the use of infection control practices based on the patient's condition, history and needs (e.g., neonates)</li> </ul>

## Competency 5: Communication

Demonstrates understanding of the therapeutic relations with clients and other members of the health team

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Articulate how the context of women's lives (cultural, social, economic and historical) shapes how they communicate their needs</li> </ul>	<ul style="list-style-type: none"> <li>Engage in self-reflection to critically examine professional relationships</li> </ul>	<ul style="list-style-type: none"> <li>Communicate respectfully and compassionately with women, infants and families; communicate facts accurately and answer questions honestly</li> <li>Encourage women/families to communicate openly about events, issues and concerns</li> <li>Communicate findings to the appropriate member(s) of the health care team in a timely manner</li> <li>Communicate in clear and accurate terms in writing, teaching and interdisciplinary discussions</li> <li>Establish and maintain professional boundaries in maternity care settings</li> </ul>

## Competency 6: Management

Quality promotion and evidence-based practice

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the use of evidence in the promotion of quality care in antenatal care</li> <li>Articulates rationale for adapting assessment, ongoing physiological monitoring, and midwifery care based on needs of women</li> </ul>	<ul style="list-style-type: none"> <li>Value the use of evidence in quality promotion and in antenatal care</li> </ul>	<ul style="list-style-type: none"> <li>Use current evidence and clinical experience to decide when to modify antenatal care</li> <li>Evaluate the effectiveness of care using available latest evidence and revise care appropriately to meet the mother's needs</li> <li>Modify patient's plan of care based on findings and analysis of ongoing assessment and monitoring of physiological status</li> </ul>

## Skills

- History taking: initial and interval
- Calculation of expected date of delivery
- Urine testing for albumin
- Physical examination
- Abdominal examination:
  - fundal height estimation,
  - determining position and lie
  - foetal heart monitoring

- Clinical estimation of haemoglobin
- Laboratory investigations: sample collection and interpretation of results
- Clinical estimation of oedema
- PMTCT
- Drug administration for prophylaxis

## Unit 2: Labour and Delivery

### Competency 1: Care provision

Assessment of a woman during labour and delivery

Knowledge	Attitude/Behaviour	Skills
<ul style="list-style-type: none"> <li>• Psychological and physiological changes during labour and delivery</li> <li>• Nutritional requirements during labour and delivery</li> <li>• Methods for diagnosing labour and second stage</li> <li>• Differentiate normal from abnormal vital signs and physical assessment findings</li> <li>• Mechanism of labour</li> <li>• Differentiate normal from abnormal laboratory and diagnostic findings</li> <li>• Knowledge of minor disorders of pregnancy and danger signs of pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>• Appreciate the psychology and physiology of labour and delivery</li> </ul>	<ul style="list-style-type: none"> <li>• Obtain a comprehensive and accurate health history, including both medical and psychosocial information</li> <li>• Perform a complete abdominal assessment, including measuring fundal height, position, lie and descent of foetus</li> <li>• Perform a complete physical examination of a woman during labour and puerperium to detect abnormalities, and initiate treatment and/or consult or refer as appropriate</li> <li>• Perform ongoing assessment and physiological monitoring that are relevant to the women</li> <li>• Assess foetal growth and well-being</li> </ul>

## Competency 2: Care provision

Provide care to women and family during labour and delivery and refer if specialist attention is required.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the physiology of first stage</li> <li>Understand the importance of nutrition and hydration during labour</li> <li>Understand the physiology of second stage of labour</li> <li>Indications of an episiotomy</li> <li>Physiology of the neonate</li> <li>Physiology of the third stage of labour</li> <li>Understand the psychology of labour</li> <li>Understand the concept of accountability in the provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate physiological changes that take place during labour</li> <li>Appreciate discomfort and pain that women experience in second stage of labour</li> <li>Value the importance of hydration and nutrition during labour</li> <li>Appreciate the changes that take place in a neonate following birth</li> <li>Recognize the importance of timely managing the third stage of labour</li> <li>Recognize the responsibility to function within acceptable behavioural norms appropriate to the provision of care to women in labour and delivery</li> </ul>	<ul style="list-style-type: none"> <li>Monitor and record progress of labour, maternal and foetal condition regularly throughout labour using the partograph</li> <li>Identify deviations from normal and take timely appropriate action</li> <li>Provide emotional support for the woman</li> <li>Keep the woman in optimum condition during labour, maintaining adequate hydration and nutrition, ensuring that the bladder is emptied regularly and promoting high standards of infection prevention, and appreciate the importance of pain relief</li> <li>Determine the signs and symptoms of the second stage of labour</li> <li>Provide constant care, observation and support, allowing non-directive pushing and providing support of the perineum, and avoid interference with the normal mechanism of labour the normal mechanism of labour</li> <li>Make an episiotomy where indicated, apply a local anaesthesia to the perineum prior to repair</li> <li>Provide immediate care for the new-born, including drying, clearing airways, ensuring that breathing is established, and skin-to-skin contact with mother and covering to provide warmth</li> <li>Conduct correctly management of the third stage of labour, including the active management of the third stage of labour, using oxytocin</li> <li>After delivery of the placenta and membranes, ensure that the uterus is well contracted by rubbing up a contraction and expelling clots, if necessary, and check that vaginal bleeding is minimal</li> <li>Examine the vulva, perineum and lower vagina for lacerations, repair second degree tears of the perineum, but refer women with third degree perineal tears and cervical tears to specialized care</li> <li>Estimate and record all blood loss as accurately as possible</li> <li>Examine the placenta and membranes for completeness and normality and dispose of them safely as appropriate</li> <li>Monitor the mother's condition, ensuring that vital signs and vaginal bleeding are within normal limits and that the uterus remains well contracted</li> <li>Adhere to health facility / agency policies and principles regarding ethical behaviour and patient confidentiality appropriate in managing women during labour</li> </ul>

## Skills

- Admission of a woman in labour
- Diagnosis of labour
- Abdominal examination:
  - determining contraction
  - descent
  - presentation
  - position
- Foetal heart monitoring
- Inserting an intravenous infusion
- Pain relief
- Nutrition during labour
- Performing episiotomy
- Repairing episiotomy and tears
- Conducting a vaginal delivery
- Conducting AMSTL
- Estimation of blood loss
- Examination of placenta and membranes
- Inspection of tears and laceration
- Observations during fourth stage of labour
- Discharging a woman and baby from the delivery room

## Unit 3: The new-born

### Competency 1: Care provision

Provide care to neonates without complications.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Knowledge of :</li> <li>Physiological changes at birth</li> <li>Assessment of the new-born using Apgar score</li> <li>Parent/infant attachment</li> <li>Procedure for examination of the new-born at birth and subsequently</li> <li>Infant feeding options for babies born to HIV-positive and negative mothers: exclusive breastfeeding and replacement feeding and nutritional requirements of the infant</li> <li>Traditional practices as they relate to new-born care</li> <li>Essential elements of daily care of the new-born, e.g., warmth, skin care, prevention of infection: care of the umbilical cord, observation for signs of infection, jaundice, frequency and character of stools, feeding and signs of thriving and failure to thrive</li> <li>Programme for immunizations and vaccinations during the first five years</li> <li>Common disorders of the new-born, e.g., skin rashes, minor vomiting, minor infections, minor feeding problems and physiological jaundice</li> <li>Birth registration</li> <li>Follow-up of the new-born using correct records</li> <li>Monitoring, testing and follow up of new-borns born to a HIV-positive mother</li> </ul>	<ul style="list-style-type: none"> <li>Recognize the changes that take place in the new-born during the postnatal period</li> </ul>	<ul style="list-style-type: none"> <li>Apply aspiration of the airways when head is delivered if meconium stained liquor</li> <li>Clear airways at birth to facilitate breathing</li> <li>Assess the condition of the new-born at birth</li> <li>Use bag and mask correctly to resuscitate the asphyxiated new-born</li> <li>Dry the new-born at birth, place in skin-to-skin contact on the mother's abdomen or chest and cover to keep the baby warm. If skin-to-skin contact is not possible, place the baby on a clean, warm surface and wrap warmly</li> <li>Clamp and cut the umbilical cord, taking appropriate measures to prevent infection</li> <li>Label the new-born for correct identification</li> <li>Examine the new-born systematically from head to feet to detect any congenital malformations, birth injuries or signs of infection</li> <li>Administration of vitamin K and eye drops</li> <li>Assist the new mother to initiate exclusive breastfeeding within one hour</li> <li>Educate the mother and her family about all aspects of infant feeding, especially the importance of exclusive breastfeeding for the first six months of life</li> <li>Teach and supervise the mother in making up feeds correctly and the technique of cup-feeding her baby, if replacement feeding is selected. Teach the mother about the general care and hygiene of the baby, e.g., skin, eyes and cord to prevent infection</li> <li>Monitor the growth and development of the baby during the postnatal period</li> <li>Recognize minor and serious disorders in the new-born and treat appropriately, including arranging for referral, if necessary</li> <li>Educate the parents about the danger signs of the new-born and the need to seek immediate help from a skilled health worker</li> <li>Give immunizations correctly at the optimum time and advise the parents of any possible adverse effects and when to return for further immunizations.</li> <li>Keep full and accurate records</li> </ul>

## Competency 2: Professionalism

Demonstrate accountability for the delivery of midwifery care.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the concept of accountability in the provision of care during the postnatal period</li> <li>Understand the concept of accountability in the provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Show commitment to the provision of high quality, safe and effective care during the postnatal period</li> <li>Recognize the responsibility of functioning within acceptable behavioural norms appropriate to the provision of care of neonates</li> </ul>	<ul style="list-style-type: none"> <li>Safely perform learned skills to clients in providing care during the postnatal period</li> <li>Adhere to health facility / agency policies and principles regarding ethical behaviour and patient confidentiality appropriate in managing neonates in the postnatal period</li> </ul>

## Skills

- Apgar scoring
- Clearing airway
- Initial examination
- Subsequent examination
- Weighing baby
- Cutting and clumping cord
- Shortening cord
- Cord care
- Immunization
- Application of eye ointment
- Identification of danger signs of the new-born
- Supporting mother to initiate breastfeeding
- Wrapping/dressing baby
- Changing nappies
- Bathing a baby



## Unit 4: Care of the woman during the puerperium

### Competency 1: Care provision

Assessment of clients.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Knowledge of :               <ul style="list-style-type: none"> <li>Physiological changes during the puerperium</li> <li>The physiology of lactation, the initiation and management of breastfeeding and the recognition and management of common problems which may occur</li> <li>Recognition, monitoring and management of the psychological and emotional changes which may occur during the puerperium</li> <li>Parent-infant attachment and factors which promote and hinder it</li> <li>The risks of infection and measures taken to prevent infection in mother and new-born after childbirth</li> <li>Health education and counselling on self-care, adequate sleep, rest, good nutrition, personal hygiene including perineal care and care of the new-born infant</li> <li>Procedure and reasons for postnatal examinations of the mother during the first 12-24 hours, within one week and at six weeks after childbirth, or sooner if required</li> <li>Diagnosis and treatment of anaemia after childbirth</li> <li>Family planning and birth spacing methods appropriate in the postpartum period</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Recognize the changes that take place in women during the postnatal period</li> </ul>	<ul style="list-style-type: none"> <li>Ability to:               <ul style="list-style-type: none"> <li>Take full history of pregnancy, birth and the earlier postpartum period, identifying factors which will influence the care and advice given</li> <li>Perform a systematic postpartum examination of the mother, identifying any actual or potential problems</li> <li>Provide appropriate and timely treatment for any complications detected during the postpartum examination, e.g., detection and treatment of anaemia</li> <li>Facilitate and support the early initiation and maintenance of exclusive breastfeeding</li> <li>Use universal precautions for the prevention of infection to prevent the spread of infection after childbirth</li> <li>Educate and counsel the woman on care for herself and for her baby</li> <li>Facilitate psychosocial family and community-based supportive measures</li> <li>Emergency treatment of uncomplicated PPH with MVA, including preparation for referral where necessary</li> <li>Emergency care of a woman during and after an eclamptic fit, including preparation for referral</li> <li>Emergency treatment of severe puerperal sepsis and preparation for referral</li> <li>Counsel, comfort and support the mother and father if the baby is stillborn, born with abnormalities or dies in the neonatal period</li> <li>Provide care, support and treatment for the HIV-positive woman and HIV counselling and testing for women who don't know their status</li> <li>Counsel the woman on family planning and safer sex and provide appropriate family planning services in accordance with the woman's choice, including information on advantages and disadvantages of the chosen method</li> <li>Record the contraceptive method provided and give appropriate advice and care for any adverse side-effects and advice on follow-up</li> <li>Keep accurate records on postnatal care (including home-based records) and make arrangements for follow-up or referral, as appropriate</li> </ul> </li> </ul>

**Competency 2: Professionalism**

Demonstrate accountability for the delivery of midwifery care.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the concept of accountability in the provision of care during the puerperium</li> <li>Understand the concept of accountability in the provision of care</li> </ul>	<ul style="list-style-type: none"> <li>Show commitment to the provision of high quality, safe and effective care during the puerperium</li> <li>Recognize the responsibility of functioning within acceptable behavioural norms appropriate to the provision of care to women during the puerperium</li> </ul>	<ul style="list-style-type: none"> <li>Safely perform learned skills to clients in during the puerperium</li> <li>Adhere to health facility / agency policies and principles regarding ethical behaviour and patient confidentiality appropriate in managing women during the puerperium</li> </ul>

**Competency 3: Professionalism**

Practice midwifery within ethical and legal frameworks regulating midwifery.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Articulate ethical and legal frameworks and standards of professional practice in midwifery</li> <li>Comprehend the inter-dependent and dependent roles of a midwife in the health team</li> <li>Clarify personal and professional values and recognize their impact on decision making and professional behaviour</li> </ul>	<ul style="list-style-type: none"> <li>Provide care that demonstrates understanding of power dynamics in midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Obtain informed consent for midwifery interventions</li> <li>Provide midwifery care within the requirements of legislation and common law</li> <li>Recognize breaches of law relating to midwifery practice and report to appropriate structures</li> <li>Adhere to legal requirements in all aspects of documentation of midwifery care</li> </ul>

**Competency 4: Care provision**

Assessment of a woman during antenatal care, labour and puerperium.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Knowledge of</li> <li>Psychological and physiological changes during pregnancy, labour and postnatal periods</li> <li>Nutritional requirements during preconception and pregnancy</li> <li>Methods for diagnosing pregnancy, establishing due date and assessing gestational age and the progress of pregnancy</li> <li>Differentiate normal from abnormal vital signs and physical assessment findings, for example, fundal height and firmness and breast consistency</li> <li>Understanding of foetal development and growth</li> <li>Differentiate normal from abnormal laboratory and diagnostic findings</li> <li>Knowledge of minor disorders of pregnancy and danger signs of pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Recognize the complexities of power relationships in midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Obtain a comprehensive and accurate health history, including both medical and psychosocial information</li> <li>Perform a complete abdominal assessment, including measuring fundal height, position, lie and descent of foetus</li> <li>Perform a complete physical examination of a woman during pregnancy, labour and puerperium to detect abnormalities, and initiate treatment and/or consult or refer as appropriate</li> <li>Conduct a comprehensive assessment of the nutritional status of a pregnant women</li> <li>Perform ongoing assessment and physiological monitoring that are relevant to the woman and her baby</li> <li>Assess foetal growth and well-being</li> </ul>

**Competency 5: Care provision**

Provide care to a woman and her family during labour, childbirth and the immediate postpartum period.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Articulate a process for selecting goals and developing plans of care based on theories specific to maternity care</li> <li>Articulate resources needed for the delivery of care to clients and families (acute care or community settings)</li> <li>Possess knowledge of emergency measures, obstetrical procedures and interventions</li> <li>Articulate correctly neonatal resuscitation and stabilization</li> </ul>	<ul style="list-style-type: none"> <li>Critically examine own assumptions while acknowledging individual experiences of maternity clients</li> <li>Positively promote safe practices in nursing care</li> </ul>	<ul style="list-style-type: none"> <li>Develop a comprehensive individualized needs-based plan of care for a woman, family and new-born baby</li> <li>Provide emotional and physical support to a woman in labour and her support people</li> <li>Recognize maternal complications and initiate emergency measures as required</li> </ul>

**Competency 6: Care provision**

Demonstrate understanding of drug administration in midwifery practice.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand pharmacological agents and other substances and therapies used during the postpartum period</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrate openness to views of women/ patients and families about refusal to accept medication and immunization protocols</li> </ul>	<ul style="list-style-type: none"> <li>Assess the need for pharmacological agents during the immediate postpartum period</li> <li>Safely and accurately complete medication dosage calculations</li> <li>Administer intravenous fluids and medications under supervision in accordance with the regulations and standards in force</li> <li>Report adverse client reactions or errors with maternal and infant medications immediately to members of the healthcare team and intervene as necessary</li> </ul>

**Competency 7: Safety and comfort**

Adhere to the principles of safe, comfort and infection control in the provision of midwifery care.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrate knowledge of susceptible women at risk of acquiring infection in maternity units</li> </ul>	<ul style="list-style-type: none"> <li>Recognize the risk of injury and infections during the postnatal period</li> </ul>	<ul style="list-style-type: none"> <li>Evaluate patients' comfort and safety in maternity units</li> <li>Demonstrate correct infection control measures as a way of creating and maintaining a sterile field during the provision of midwifery care</li> </ul>

**Competency 8: Communication and therapeutic relations with clients**

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Articulate how the context of women's lives (cultural, social, economic and historical) determines how they communicate their maternity care needs</li> </ul>	<ul style="list-style-type: none"> <li>Engage in self-reflection to critically examine professional relationships</li> </ul>	<ul style="list-style-type: none"> <li>Communicate respectfully and compassionately with women, infants and families; communicate facts accurately and answer questions honestly</li> <li>Encourage women/families to communicate openly about events, issues and concerns</li> <li>Communicate findings to the appropriate member(s) of the healthcare team in a timely manner</li> <li>Communicate in clear and accurate terms in writing, teaching and interdisciplinary discussions</li> <li>Establish and maintain professional boundaries in maternity care settings</li> </ul>

**Competency 9: Management**

Engage in client teaching.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Use communication theories to optimize teaching and learning in maternity practice settings</li> </ul>	<ul style="list-style-type: none"> <li>Apply the principles of diversity management and safety</li> </ul>	<ul style="list-style-type: none"> <li>Develop and implement teaching plans for women and families with specific midwifery care needs</li> </ul>

**Competency 10: Management**

Maintain records of midwifery clients/patients.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Articulate the accurate rationale for proper record keeping during the perinatal period</li> </ul>	<ul style="list-style-type: none"> <li>Make decisions based on the systematic assessment, analysis and interpretation of deviations from normal midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Document decisions, actions and outcomes, including women's response to care</li> <li>Document findings on appropriate forms/records</li> </ul>

**Competency 11: Management**

Quality promotion and evidence-based practice.

Knowledge	Attitude/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the use of evidence in the promotion of quality care during the puerperium</li> <li>Articulate the rationale for adapting assessment, ongoing physiological monitoring and midwifery care based on the needs of women</li> </ul>	<ul style="list-style-type: none"> <li>Value the use of evidence in quality promotion and in midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Use the current evidence and clinical experience to decide when to modify midwifery care</li> <li>Evaluate the effectiveness of care using available latest evidence and revise care appropriately to meet the mother's needs</li> <li>Modify the patient's plan of care based on findings and the analysis of ongoing assessment and monitoring of her physiological status</li> </ul>

## Skills

- Admission of a woman to the postnatal ward
- Initial assessment of a woman in the postnatal ward
- Subsequent assessment of a woman in the postnatal ward
- Abdominal examination: uterine contractility and uterine involution
- Inspection of a perineum
- Assessment of lochia
- Assessment of the mood of a woman in the postnatal ward
- Discharge planning
- Health education
- Rest and sleep
- Breastfeeding
- Breast examination

## Teaching Strategies

Demonstrations return demonstrations, clinical conferences, simulations and clinical practice.

## Assessment

### Formative Assessment

Clinical performance, OSCE, oral and practical exams

### Summative Assessment

Clinical performance, oral and practical exams

## Reading Materials

1. Protocols and guidelines
2. Procedures manuals
3. Pillitteri, A. (2006). Maternal and child health nursing: care of the childbearing and childrearing family, 5th edition. London: Prentice-Hall.
4. Pillitteri, A. (2006). Study guide for maternal and child health nursing: care of the child-bearing and childrearing family, 5th edition. Philadelphia: Lippincott.
5. Sellers, P. M. (2006). Midwifery: a textbook and reference book for midwives in Southern Africa, Volumes I and II. Pretoria: Juta.
6. Verralls, S. (2001). Applied anatomy and obstetrics. Pretoria: Van Schaik.
7. World Health Organization. (2003). Integrated management of pregnancy and childbirth: managing complications in pregnancy and childbirth: A guide for midwives and doctors. WHO Library.

### 3.3.3.4 Introduction to Research

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Introduction to research
5. Module Code	6. NURS 307
7. Year	8. Three
9. Total hours/credits	10. 45/3

## Description

This module is designed to introduce students to scientific inquiry, critical appraisal of literature and evidence, and the nursing research process. The student will acquire basic fundamental knowledge and skills to ethically conduct research in nursing and to appreciate the importance of research in professional nursing.

## Aim

This module is aimed at equipping students with knowledge and skills to conduct basic nursing research.

## Learning outcomes

On successful completion of this module the learner will be able to:

11. Discuss the importance of research in nursing and midwifery.
12. Describe the role of the nurse-midwife in research.
13. Explain the concepts of scientific evidence and evidence-based practice.
14. Identify relevant nursing research articles using various databases.
15. Critique and summarize selected nursing and midwifery research articles.
16. Develop a research proposal and the relevant budget.
17. Apply the steps of the research process in practice.
18. Apply ethical principles relating to human subjects and health-care professionals in conducting research.
19. Utilize research findings in nursing practice to render evidence-based care.

## Content

### Foundations of nursing research and evidence-based practice

- Introduction to nursing research
- Sources of evidence in nursing and midwifery practice
- Databases on nursing and midwifery
- Purpose of nursing and midwifery research
- The concepts of scientific evidence and evidence-based practice

## **Qualitative and quantitative research**

- Quantitative research
- Qualitative Research

## **Conceptualizing research and research problems, questions and hypotheses**

- Basic terminology
- Problem statement
- Sources of research
- Research hypothesis
- Study aims, research objectives and research questions
- Conceptual frameworks
- Literature review
- Developing a research proposal
- Designing quantitative studies
- Measurement and data collection
- Developing a sampling plan
- Data collection methods
- Data analysis and report writing
- Dissemination of findings
- Application of evidence to practice

## **Ethics in research**

- Ethical principles
- Confidentiality
- Autonomy
- Veracity
- Beneficence
- Non-maleficence
- Justice
- Informed consent

## **Teaching methods**

Lectures, seminars, tutorials, group discussions, tutorials, assignments, project.

## **Assessment strategies**

### **Formative assessment (40%)**

Test, assignment, group project and project proposal

### **Summative assessment (60%)**

Written theory paper, research project



## Reading materials

1. Burns N, Grove SK (2007). Understanding nursing research: building evidence based practice. Saunders.
2. Schneider Z, Whitehead D, Elliot D (2009). Nursing and midwifery research methods and appraisal for evidence-based practice, 3rd ed. St Louis: Mosby.
3. Fitzpatrick J. J, Kazer M (2011). Encyclopaedia of nursing research, 3rd ed. New York: Springer Publications.
4. Foster RI, Lasser J (2011). Professional ethics in midwifery practice, 3rd ed. Sudbury.
5. Polit D, Beck C (2008). Nursing research principles and methods. Philadelphia, PA: Lippincott.
6. Polit FD, Beck C (2007). Is the CVI an acceptable indicator of content validity: Research in Nursing and Health, 30(4):459–467.
7. Polit FD, Beck C (2006). The content validity index: are you sure you know what's being reported?" Nursing and Health, 29(5):489–497.

## Competencies

### Competency 1: Assessment

Develop a needs-based research proposal.

Knowledge	Behaviours and attitudes	Skills
<ul style="list-style-type: none"> <li>• Demonstrates understanding of the importance of research in nursing and midwifery</li> <li>• Discusses the steps of the research process</li> </ul>	<ul style="list-style-type: none"> <li>• Acknowledges the importance of critically engaging with nursing and midwifery practice to establish researchable areas</li> </ul>	<ul style="list-style-type: none"> <li>• Identifies a researchable area in nursing and midwifery practice</li> <li>• Identifies relevant nursing research articles from various databases</li> <li>• Critiques and summarizes selected nursing and midwifery research articles</li> <li>• Develops a research proposal and the related budget</li> </ul>

### Competency 2: Implementation

Carry out a nursing research project.

Knowledge	Behaviours and attitudes	Skills
<ul style="list-style-type: none"> <li>• Demonstrates understanding of the role of a nurse-midwife in research</li> <li>• Demonstrates understanding of the concepts of scientific evidence and evidence-based practice</li> </ul>	<ul style="list-style-type: none"> <li>• Values the importance of conducting research in nursing and midwifery</li> </ul>	<ul style="list-style-type: none"> <li>• Follows the steps of the research process in conducting research projects</li> <li>• Applies ethical principles relating to human subjects and health-care professionals critical in conducting research</li> </ul>

### Competency 3: Quality improvement

Utilize research findings in nursing and midwifery practice as part of evidence-based practice.

Knowledge	Behaviours and attitudes	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of the concept of evidence-based practice</li> </ul>	<ul style="list-style-type: none"> <li>Values evidence-based practice</li> </ul>	<ul style="list-style-type: none"> <li>Identifies appropriate research evidence for the problem at hand</li> <li>Locates and accesses evidence to support decision-making in midwifery care</li> <li>Applies generated evidence to improve the quality of nursing and midwifery practice</li> </ul>

#### 3.3.3.5 Midwifery Science 2 (Theory)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Midwifery Science 2 (Theory)
5. Module Code	6. MID 300
7. Year	8. Three
9. Total hours/ credits	10. 60/4

### Description

This module builds on knowledge and skills acquired in the Anatomy and Physiology, Women's Health, Medical/ Surgical Nursing Applied to Midwifery and Midwifery Science 1 modules. It provides the learner with an opportunity to acquire knowledge of medical and obstetric conditions and complications during pregnancy, labour and puerperium.

### Aim

To equip the learner with knowledge of medical and obstetric conditions to enable him/her to manage women with medical and obstetric conditions and complications during pregnancy, labour and puerperium.

### Learning Outcomes

At the end of this module, the learner should be able to:

11. Apply the midwifery management process in caring for women with medical and obstetric conditions.
12. Discuss the management of women with medical and obstetric conditions and complications.
13. Detect obstetric and medical conditions early and refer women for advanced management.

## Module Content

### Unit I: Pregnancy

- Medical conditions associated with pregnancy
- Blood disorders
- Hypertensive disorders of pregnancy
- Infections
- Diabetes mellitus
- Cardiac diseases
- Obstetric conditions
- Pregnancy-induced hypertension
- Bleeding in late pregnancy
- Gestational diabetes
- Hyperemesis gravidarum
- Amniotic disorders
- Malpositions and malpresentation
- Multiple pregnancy
- Prolonged pregnancy
- Adolescent pregnancy
- Intrauterine growth retardation
- Intrauterine foetal death
- Referral system
- Three delay model
- Management of women with obstetric and medical conditions during pregnancy

### Unit2: Obstetric and medical complications during labour and delivery

- Prolonged labour and obstructed labour
- Abnormal uterine contractions
- Cephalo-pelvic disproportion
- Malposition and malpresentation
- Cervical dystocia
- Augmentation of labour
- Maternal and foetal distress
- Caesarean section
- Cord presentation and prolapsed cord
- Intrapartum haemorrhage
- Rupture of uterus
- Intrapartum infections
- Premature labour
- Complication of the third stage of labour
- Basic emergency obstetric care
- Severe pre-eclampsia and eclampsia
- Hypertension
- Diabetes mellitus
- Anaemia
- Malaria
- HIV and AIDS
- Embolism
- Management of women with obstetric and medical conditions during labour and delivery

### Unit3: Postnatal complications

- Puerperal sepsis
- Thrombo-embolic disorders (thrombo-phlebitis, embolism)
- Psychiatric disorders
- Traumatic complications
- Puerperal haemorrhages
- PMTCT, VCT, ART
- National protocols, policies, standards/packages/ guidelines for postnatal care
- Management of women with obstetric and medical conditions during the postnatal period

### Teaching Strategies

Problem-based learning, lectures/discussions, simulation and demonstration of skills, reflection role play and e-learning

### Assessment

#### Formative Assessment

Assignments, tests and quizzes.

#### Summative Assessment

Written examinations.

### Resources

Clinical skills laboratory.

### Reading Materials

1. Beischer, N.A., Mackay, E.U., Colditz, P.B. (1997). Obstetrics and the newborn (3rd edition). London, W.B. Saunders.
2. Fraser, D. & Cooper M.A. (2006). Myles textbook for midwives (14th Edition). Edinburgh: Churchill Livingstone.
3. Olds, S.B., London, M.L. & Ladewig, P.A. (2000). Maternal-newborn nursing: a family and community-based approach. London: W.B. Saunders.
4. Sellers, P.M. (2001). Midwifery. Cape Town: Juta & Co.
5. Birnbach, D.J. (2000). Textbook of obstetric anesthesia. New York: Churchill Livingstone.
6. Campbell, S. (2000). Gynaecology by ten teachers. London: Arnold.
7. Chamberlain, G. (2000). A practice of obstetrics and gynaecology: A textbook for general practice and DRCOG. Edinburgh: Elsevier Ltd.
8. Diamond, B. (2006). Legal aspects of midwifery. Books for Midwives.
9. Henderson, C & MacDonald, S. (2004). Mayes' midwifery (13th Edition). London: Bailliere Tindall.
10. James, D.K., Steer, P.J., Weiner, C.P & Gonik, B. (2005). High risk pregnancy management options (3rd edition). London: WB Saunders.
11. James, D.K., Johnson, I & McEvan, A. (2000). Obstetrics and gynaecology. Vade-Mecum. London: Arnold.
12. Wickham, S. (2006). Midwifery: best practice 2. (Volume 4). Edinburgh: Elsevier Ltd Bank

### 3.3.3.6 Midwifery Science II (Practice)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Midwifery Science II (Practice)
5. Module Code	6. MID 302
7. Year	8. Three
9. Total hours / credits	10. 450/10

## Description

This module builds on knowledge and skills acquired in the Anatomy and Physiology, Women's Health and Midwifery Science I modules. The module will enable learners to put theory acquired in Midwifery Science II into practice. Learners will develop competencies for managing women with medical and obstetric conditions and complications during antenatal, labour and delivery and postnatal periods. The learners will rotate in various clinical settings: high-risk antenatal ward, labour and delivery room and postpartum wards to acquire relevant competencies.

## Aim

To enable the learner to develop competencies for managing clients with medical and obstetric conditions, emergencies and complications.

## Learning Outcomes

At the end of this module, the learner should be able to:

11. Identify medical and obstetric conditions/complications during antenatal, labour and delivery and puerperium periods.
12. Use the midwifery management process and the decision-making framework in managing clients with medical and obstetric complications.
13. Refer urgently women with complications requiring a higher level of care.
14. Order relevant investigations and interpret their findings.
15. Prescribe and administer pharmacological agents as per scope of practice and country policies.
16. Counsel and support women with complications and emergencies and families.
17. Educate women on health-seeking behaviours.
18. Collaborate with other health professionals in managing abnormal puerperal conditions.
19. Document and keep accurate records.

## Teaching Strategies

Problem-based learning, case studies, simulation and demonstration of skills, reflection, role play, e-learning, clinical practice, clinical conferences and seminar presentations.

## Assessment

### Formative Assessment

Logbook, case studies, clinical practice and OSCE.

### Summative Assessment

Final practical and oral examinations, OSCE and clinical performance

## Competencies

### Unit 1: Pregnancy

#### Competency 1: Care provision

Conduct a comprehensive assessment of a client in an emergency situation.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Comprehend screening procedures to identify women's medical and obstetric conditions and emergencies during pregnancy</li> <li>Comprehend principles and procedures to be followed in managing high-risk and emergency situations in maternity care settings</li> </ul>	<ul style="list-style-type: none"> <li>Value the importance of screening and involving clients with obstetric and medical conditions and emergencies during pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Conduct a comprehensive assessment of a client to identify risk factors during pregnancy</li> <li>Prioritize assessment findings and stabilization measures for urgent and emergency situations</li> <li>Involve women and families in assessing the presenting situation and in decision making</li> </ul>

#### Competency 2: Care provision

Provide emergency care to the client and refer.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Common complications of pregnancy (hypertension, haemorrhage and gestational diabetes) and their impact on the mother and the baby</li> <li>Comprehend the consequences of unanticipated events in intrapartum and postpartum on the recovery of women</li> <li>The scope of practice for the student midwife in the context of emergency care situations</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the scope of practice of a midwife in managing complications and emergency situations</li> </ul>	<ul style="list-style-type: none"> <li>Recognize and respond effectively to emergencies or urgent situations</li> <li>Provide immediate and urgent care for women experiencing unexpected events</li> <li>Urgently identify and seek appropriate help in the event of an emergency situation that falls outside own scope of practice</li> <li>Provide appropriate psychosocial support to clients and their families experiencing an unexpected event</li> </ul>

**Competency 3: Professionalism**

Respecting the rights of clients in emergency situations.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>The rights of women receiving emergency care</li> </ul>	<ul style="list-style-type: none"> <li>Respect the rights of women receiving emergency care</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledge and advocate for the rights of women to be involved as active participants in the provision of emergency care, including their right to make informed decisions and maintain their dignity and privacy</li> <li>Take into account women's individual preferences and cultural needs even in emergency situations</li> </ul>

**Competency 4: Collaboration and teamwork**

Collaborate effectively with other members of the healthcare team in managing emergency situations.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Components and characteristics of highly-effective teams in maternity care settings with specific reference to emergency care</li> <li>Actions that are not midwife-led activities and identifying potential problems and complications that require collaborative interventions with other members of the healthcare team</li> </ul>	<ul style="list-style-type: none"> <li>Value and appreciate the importance of high performing teams in managing emergency situations in maternity care settings</li> </ul>	<ul style="list-style-type: none"> <li>Apply relevant guidelines or policies to ensure timely consultation and referral</li> <li>Consult with, and refer to, another midwife or appropriate health care provider when the needs of the woman fall outside own scope of practice or competence</li> <li>Develop and maintain collegial networks with midwifery colleagues and others to optimize outcomes for the woman</li> </ul>

**Competency 5: Care provision**

Manage a client and her family that are dealing with loss.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Theories about loss and grief relevant to the care of childbearing women (i.e., grieving unexpected outcomes in pregnancy)</li> <li>Strategies to support families through grief and loss experiences</li> </ul>	<ul style="list-style-type: none"> <li>Self-awareness of own values and beliefs around maternal or infant loss, adjustment to transition, and death</li> <li>Respect women undergoing grief during pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Involve women/families in care planning and facilitate meaningful and effective approaches to specific losses in pregnancy and during the transition to parenthood</li> <li>Provide culturally and spiritually sensitive care to childbearing women and their families experiencing loss or difficult transitions</li> </ul>

## Competency 6: Counselling and health education

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the principles of health education for antenatal clients with medical and obstetrical conditions</li> <li>Understand high quality counselling related to clients with medical and obstetric conditions and complications</li> </ul>	<ul style="list-style-type: none"> <li>Accept the role and responsibility of providing health education to clients and families</li> <li>Value effective counselling</li> </ul>	<ul style="list-style-type: none"> <li>Identify learning needs of clients and families in antenatal clinics</li> <li>Formulate a plan for teaching clients</li> <li>Plan an effective counselling session</li> <li>Create a safe, secure and effective counselling space</li> <li>Assemble the appropriate counselling materials or aids</li> </ul>

## Skills

- Obtain a comprehensive history
- Screen women during antenatal care to identify medical and obstetric conditions and complications and / or refer timely
- Administer and monitor the effects of pharmacological drugs for management of medical and obstetric complications
- Observe universal precautions throughout the labour process to prevent infection
- Perform maternal resuscitation
- Counsel and support parents/ family during grieving process
- Advocate for the client in all aspects of care
- Analyze preconception and antenatal history
- Perform a thorough physical examination
- Perform maternal resuscitation where required
- Utilize the midwifery management process in managing women with medical and obstetrical conditions and complications
- Refer timely women with complications for management at a higher level of health care system
- Administer the effects of pharmacological drugs for management of medical and obstetric conditions during antenatal care
- Monitor the effects of pharmacological drugs for management of complications
- Counsel and support women and families where necessary
- Advocate for clients' right to treatment and care
- Document accurately care given to ensure continuity of care.

## Unit 2: Labour and delivery

### Competency 1: Care provision

Conduct a comprehensive assessment of a client in an emergency situation.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Medical and obstetric conditions and emergencies during labour and delivery</li> <li>Application of the midwifery management process</li> </ul>	<ul style="list-style-type: none"> <li>Value the importance of identifying clients with obstetric and medical conditions and emergencies during labour and delivery</li> <li>Appreciate priority setting in emergencies</li> </ul>	<ul style="list-style-type: none"> <li>Conduct a comprehensive history taking and physical assessment of a client with medical and obstetric conditions and complications</li> <li>Prioritize assessment findings and stabilization measures for urgent and emergency situations</li> </ul>



## Competency 2: Care provision

Provide emergency care to the client and refer.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Common medical and obstetric conditions and complications during labour and delivery (i.e., eclampsia, antepartum and postpartum, haemorrhage, cord prolapse) and their impact on the mother and the baby</li> <li>Comprehend consequences of unanticipated events in intrapartum and postpartum on the recovery of women</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the scope of practice of a midwife in managing complications and emergency situations</li> </ul>	<ul style="list-style-type: none"> <li>Recognize and respond effectively to emergencies or urgent situations</li> <li>Execute immediate and urgent care for women experiencing unexpected events</li> <li>Urgently identify and seek appropriate help in the event of an emergency situation that falls outside own scope of practice</li> <li>Provide appropriate psychosocial support to clients and their families experiencing an unexpected event</li> </ul>

## Competency 3: Professionalism

Respecting the rights of clients in emergency situations

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>The rights of women receiving emergency care</li> <li>Understand the concept of accountability in the provision of midwifery care</li> </ul>	<ul style="list-style-type: none"> <li>Respect the rights of women receiving emergency care</li> <li>Show commitment to the provision of high quality, safe and effective client care</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledge and advocate for the rights of women to be involved as active participants in the provision of emergency care, including their right to make informed decisions and maintain their dignity and privacy</li> <li>Take into account women's individual preferences and cultural needs even in emergency situations</li> <li>Safely perform learned skills to clients with medical and obstetric conditions</li> <li>Adhere to health facility/ policies and principles regarding ethical behaviour and client confidentiality appropriate in the maternity unit</li> </ul>

## Competency 4: Collaboration and teamwork

Collaborate effectively with other member of the healthcare team in managing emergency situations.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Components and characteristics of highly-effective teams in maternity care settings with specific reference to emergency care</li> <li>Actions that are not midwife-led activities and identifying potential problems and complications that require collaborative interventions with other members of the healthcare team</li> </ul>	<ul style="list-style-type: none"> <li>Value and appreciate the importance of high performing teams in managing emergency situations in maternity care settings</li> </ul>	<ul style="list-style-type: none"> <li>Apply relevant guidelines or policies to ensure timely consultation and referral</li> <li>Consult with, and refer to, another midwife or appropriate health care provider when the needs of the woman fall outside own scope of practice or competence</li> <li>Develop and maintain collegial networks with midwifery colleagues and others to optimize outcomes for the woman</li> </ul>

## Competency 5: Care provision

Manage a client and her family that are dealing with loss.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Theories about loss and grief relevant to the care of childbearing women (i.e. grieving unexpected outcomes in labour and delivery)</li> <li>Strategies to support families through grief and loss experiences</li> </ul>	<ul style="list-style-type: none"> <li>Self-awareness of own values and beliefs around maternal or infant loss, adjustment to transition, and death</li> <li>Respect women undergoing grief during labour and delivery</li> </ul>	<ul style="list-style-type: none"> <li>Involve women/families in care planning and facilitate meaningful and effective approaches to specific losses in labour and delivery, and during the transition to parenthood</li> <li>Provide culturally and spiritually sensitive care to childbearing women and their families experiencing loss or difficult transitions</li> </ul>

## Competency 6: Counselling

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the principles of counselling for clients with medical and obstetrical conditions</li> <li>Understand high-quality counselling related to clients with medical and obstetric conditions and complications</li> </ul>	<ul style="list-style-type: none"> <li>Accept the role and responsibility of providing counselling to clients and families</li> <li>Value effective counselling</li> </ul>	<ul style="list-style-type: none"> <li>Identify the needs of clients with medical and obstetric complications</li> <li>Formulate a plan for teaching clients</li> <li>Plan an effective counselling session</li> <li>Create a safe, secure and effective counselling space</li> </ul>

## Skills

- Obtain a comprehensive history
- Screen women in labour to identify abnormal labour patterns, intervene and or/ refer timely
- Administer oxytocin appropriately for labour induction or augmentation and treatment of intrapartum and postpartum bleeding
- Identify and manage postpartum complications
- Administer and monitor the effects of pharmacological drugs for the management of postpartum complications
- Perform appropriate hand manoeuvres to manage malpresentation
- Conduct vacuum extraction/forceps delivery as per protocol
- Insert intravenous line for fluid replacement and blood transfusion
- Observe universal precautions throughout the labour process to prevent infection
- Perform maternal resuscitation
- Perform manual removal of the placenta
- Counsel and support parents/ family during grieving process
- Advocate for the client in all aspects of care
- Obtain a comprehensive labour and delivery history
- Analyze preconception and antenatal history
- Perform a thorough physical examination
- Identify women with medical and obstetric conditions and complications
- Identify maternal infections and treat or refer for treatment as appropriate
- Perform maternal resuscitation where necessary
- Utilize the midwifery management process in managing women with medical and obstetric conditions and complications
- Refer timely women with complications for management at a higher level of health care system
- Administer the effects of pharmacological drugs for management of labour and delivery complications
- Monitor the effects of pharmacological drugs for management of labour and delivery complications
- Counsel and support women and families where necessary
- Document accurately care given to ensure continuity of care.

## Unit 3: Puerperium

### Competency 1: Care provision

Conduct a comprehensive assessment of a client in an emergency situation.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Medical and obstetric conditions and emergencies during the puerperium</li> <li>Principles and procedures to be followed in managing high-risk and emergency situations in maternity care settings</li> </ul>	<ul style="list-style-type: none"> <li>Value the importance of screening and involving clients with obstetric and medical conditions and emergencies during the puerperium</li> </ul>	<ul style="list-style-type: none"> <li>Conduct a comprehensive assessment of a client with medical and obstetric conditions and complications during the puerperium</li> <li>Prioritize assessment findings and stabilization measures for urgent and emergency situations</li> <li>Involve women and families in planning care</li> </ul>

### Competency 2: Care provision

Provide emergency care to the client and refer.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Common complications during the puerperium (hypertension, haemorrhage and sepsis) and their impact on the mother and the baby</li> <li>Comprehend the consequences of unanticipated events in postpartum on the recovery of women</li> <li>The scope of practice for the student midwife in the context of emergency care situations</li> </ul>	<ul style="list-style-type: none"> <li>Appreciate the scope of practice of a midwife in managing complications and emergency situations</li> </ul>	<ul style="list-style-type: none"> <li>Recognize and respond effectively to emergencies or urgent situations</li> <li>Provide immediate and urgent care for women experiencing unexpected events</li> <li>Urgently identify and seek appropriate help in the event of an emergency situation that falls outside own scope of practice</li> <li>Provide appropriate psychosocial support to clients and their families experiencing an unexpected event</li> </ul>

### Competency 3: Professionalism

Respecting the rights of clients in emergency situations.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>The rights of women receiving emergency care</li> </ul>	<ul style="list-style-type: none"> <li>Respect the rights of women receiving emergency care</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledge and advocate for the rights of women to be involved as active participants in the provision of emergency care, including their right to make informed decisions and maintain their dignity and privacy</li> <li>Take into account women's individual preferences and cultural needs even in emergency situations</li> </ul>

## Competency 4: Collaboration and teamwork

Collaborate effectively with other member of the healthcare team in managing emergency situations.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Components and characteristics of highly-effective teams in maternity care settings with specific reference to emergency care</li> <li>Actions that are not midwife-led activities and identifying potential problems and complications that require collaborative interventions with other members of the healthcare team</li> </ul>	<ul style="list-style-type: none"> <li>Value and appreciate the importance of high performing teams in managing emergency situations in maternity care settings</li> </ul>	<ul style="list-style-type: none"> <li>Apply relevant guidelines or policies to ensure timely consultation and referral</li> <li>Consult with, and refer to, another midwife or appropriate health care provider when the needs of the woman fall outside own scope of practice or competence</li> <li>Develop and maintain collegial networks with midwifery colleagues and others to optimize outcomes for the woman</li> </ul>

## Competency 5: Care provision

Manage a client and her family that are dealing with loss.

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Theories about loss and grief relevant to the care of childbearing women (i.e., grieving unexpected outcomes in pregnancy)</li> <li>Strategies to support families through grief and loss experiences</li> </ul>	<ul style="list-style-type: none"> <li>Self-awareness of own values and beliefs around maternal or infant loss, adjustment to transition, and death</li> <li>Respect women undergoing grief during pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Involve women/families in care planning and facilitate meaningful and effective approaches to specific losses in pregnancy and during the transition to parenthood</li> <li>Provide culturally and spiritually sensitive care to childbearing women and their families experiencing loss or difficult transitions</li> </ul>

## Competency 6: Counselling and health education

Knowledge	Attitudes/Behaviours	Skills
<ul style="list-style-type: none"> <li>Understand the principles of health education for clients with medical and obstetric conditions</li> <li>Understand high-quality counselling related to clients with medical and obstetric conditions and complications</li> </ul>	<ul style="list-style-type: none"> <li>Accept the role and responsibility of providing health education to clients and families</li> <li>Value effective counselling</li> </ul>	<ul style="list-style-type: none"> <li>Identify the learning needs of clients and families</li> <li>Formulate a plan for teaching clients</li> <li>Plan an effective counselling session</li> <li>Create a safe, secure and effective counselling space</li> </ul>

## Skills

- Discharge plan
- Follow-up care within next 6 weeks
- Family planning methods

### 3.3.3.7 The Sick Neonate

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. The Sick Neonate
5. Module Code	6. NEO SC 304
7. Year	8. Three
9. Total hours / credits	10. 30/2

## Description

This module is specifically designed to equip the learner with the necessary knowledge and skills to detect congenital abnormalities and complications, provide safe and effective care and refer the high-risk neonate for specialized care. It also focuses on basic emergency neonatal care.

## Aim

To equip the learner with the knowledge, skills and appropriate attitudes required to provide quality evidence-based care to high-risk new-borns.

## Module Learning Outcomes

At the end of this module, the learner should be able to:

11. Identify new-borns with high-risk conditions.
12. Provide care to neonates with respiratory, metabolic, thermoregulatory and gestational age-related conditions.
13. Document record of patient assessment and care.

## Module Content

- Developmental and psychosocial aspects of the neonate
- Risks associated with gestational age
- Meconium aspiration
- Respiratory distress syndrome
- Feeding of the new-born and options
- Asphyxia neonatorum
- Congenital abnormalities: Hydrocephalus, Anencephaly
- Metabolic disorders: hypoglycaemia, hyperglycemia, hypocalcaemia, hypo potassium, infant of a diabetic mother
- Heat regulation: hypothermia, hyperthermia, cold injury
- Infections in the new-born: sepsis in the new born, skin and cord infections, ophthalmia neonatorum, tetanus, presumed severe HIV disease (PSHD), gastroenteritis
- Hyperbilirubinemia
- Infants with congenital abnormalities with and without genetic influence: congenital heart diseases, ventricular septal defect, coarctation of the aorta

- Gastrointestinal congenital anomalies: omphalocele and gastroschisis, harelip and cleft palate
- Birth injuries, cerebral palsy, fracture of extremities, dislocation, cuts and abrasions
- Abuse of neonates: desertion, dumping, neglected, starved, physically inflicted injuries, sexual molestation
- Medication administration, signs of toxicity, indications and use
- Respiratory support measures
- Care of infants with specific conditions in the hospital as well as at home
- Growth monitoring and milestone achievements
- Infection prevention
- Management of new-born's environment
- Professional conduct issues

## Teaching and Learning Strategies

Lectures/discussions, problem-based learning, small group discussions, case studies, seminar presentations, role play, simulation, demonstration and return demonstrations.

## Assessment / Evaluation

### Formative Assessment

Written assignments and tests

### Summative Assessment

Written and oral examinations

## Reading Materials

1. Beck, D., Ganges, F., Goldman, S. & Long, P. (2004). Care of the newborn reference manual. Washington, D.C.: Save the Children Federation.
2. Beischer, N.A., Mackay, E.U., Colditz, P.B. (1997). Obstetrics and the Newborn (3rd Edition). London, W.B. Saunders.
3. Cloherty, J.P. & Eichenwatt, E.C (Editors) (2003). Manual of neonatal care. Philadelphia: Lippincott, Williams and Wilkins.
4. Dare, A. (2003). A practical guide to working with babies. Cheltenham: Nelson Thornes Ltd.
5. Kenner, C. & Lott, J.W. (2007). Comprehensive neonatal care (4th Edition).Edinburgh: Elsevier Ltd.
6. Klaus, M.H., Fararoff, A.A. (2001). Care of the high-risk neonate (5th Edition). Philadelphia: W.B. Saunders.
7. Olds, S.B., London, M.L. & Ladewig, P.A. (2000). Maternal-newborn nursing: a family and community-based approach. New Jersey, W.B. Saunders.
8. Saving Newborn Lives Malawi (2005). Kangaroo mother care training manual.
9. Save the Children Federation (USA).
10. Sellers, P.M. (2001). Midwifery. Cape Town: Juta & Co.

## Competencies

### Competency 1: Care provision

Assessment of a new-born baby

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Knowledge of how to assess special conditions such as jaundice and local infection</li> <li>Knowledge of danger signs and symptoms indicating that the baby is not breathing well and needs help</li> </ul>	<ul style="list-style-type: none"> <li>Value the importance of examining a sick neonate for specific conditions</li> </ul>	<ul style="list-style-type: none"> <li>Assess a young infant (from 0 to 2 months) for signs of very severe disease, or local infections (IMCI)</li> <li>Identify danger signs indicating problems that need to be addressed (e.g., hypothermia, jaundice, malformations, etc.)</li> </ul>

### Competency 2: Care provision

Provide care to a new-born baby.

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Understanding of immediate care of a sick neonate</li> <li>Initiation of breathing, resuscitation:</li> <li>conditions associated with breathing difficulties at birth</li> <li>Explain the resuscitation process of a new-born baby</li> <li>Knowledge of equipment required for resuscitation of a new-born baby</li> <li>Breastfeeding:</li> <li>Understand expressed breastfeeding</li> <li>Nasogastric feeding</li> <li>Administration of intramuscular injections</li> </ul>	<ul style="list-style-type: none"> <li>Advocate on behalf of the client as appropriate</li> <li>Appreciate the importance of resuscitating sick neonates</li> <li>Value alternative methods of breastfeeding</li> </ul>	<ul style="list-style-type: none"> <li>Provide immediate care to the sick neonate</li> <li>Recognize the need for suction/ventilation</li> <li>Perform basic resuscitation of a new-born baby using appropriate equipment</li> <li>Assess the appropriateness of checks for proper operation of resuscitation devices</li> <li>Provide appropriate after-care if a baby requires help with its breathing at birth</li> <li>Assist and support expressed breastfeeding</li> <li>Insert a nasogastric tube</li> <li>Calculate drugs</li> <li>Administer injections containing the correct dosages, observing the principles of good care and taking the required precautions</li> </ul>

### Competency 3: Communication with family members of new-born babies

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Communicating about the condition of the sick neonate</li> <li>Bonding with a sick neonate</li> </ul>	<ul style="list-style-type: none"> <li>Communicate respectfully and compassionately with clients and their families</li> <li>Appreciate the importance of bonding</li> </ul>	<ul style="list-style-type: none"> <li>Explain clearly, in an understandable manner, the condition of a sick new-born baby to the mother and family members</li> <li>Assist the mother and family members to bond with a sick neonate</li> </ul>



**Competency 4: Teamwork and collaboration**

Work in partnership with other members of the healthcare team.

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Understand the roles of the different members of the team in the provision of care to neonates</li> </ul>	<ul style="list-style-type: none"> <li>Collaborate with mothers and families to achieve mutually agreed upon health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>Communicate abnormal findings to the appropriate member(s) of the healthcare team in a timely manner</li> <li>Participate in the planning and delivery of neonatal care in collaboration with the healthcare team, including the patient, the family and healthcare providers</li> </ul>

**Competency 5: Professionalism**

Adhere to ethical and legal frameworks applicable to neonatal care.

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Understand ethical principles, values, concepts, and decision making that apply to neonatal care</li> <li>Understand the roles and responsibilities of an advocate</li> </ul>	<ul style="list-style-type: none"> <li>Value the application of ethical principles in day-to-day practice</li> <li>Value acting in accordance with codes of ethics and accepted standards of practice</li> <li>Value roles and responsibilities as a patient's advocate</li> </ul>	<ul style="list-style-type: none"> <li>Utilize an ethical decision-making framework in clinical situations</li> <li>Identify and address ethical concerns, issues and dilemmas that affect neonatal care</li> <li>Serve as an advocate for a sick neonate</li> </ul>

**Competency 6: Management**

Quality improvement.

Knowledge	Attitudes	Skills
<ul style="list-style-type: none"> <li>Understand the application of the concept of quality improvement in neonatal care</li> <li>Understand how to utilize evidence to improve the quality of care</li> </ul>	<ul style="list-style-type: none"> <li>Value the need for continuous improvement in clinical practice</li> </ul>	<ul style="list-style-type: none"> <li>Base individualized care on best current evidence, patient values and clinical expertise</li> </ul>

### 3.3.3.8 The Sick Neonate (Practice)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. The Sick Neonate(Practice)
5. Module Code	6. NEO 306
7. Year	8. Three
9. Total hours / credits	10. 135/3

## Description

This module provides an opportunity for the learner to apply knowledge of new-born health in developing skills for the provision of care to sick new-borns.

## Aim

To equip the learner with appropriate skills and attitudes for the provision of care to the sick new-born within the relevant cultural context.

## Module Learning Outcomes

At the end of this module, the learner should be able to:

11. Apply knowledge of normal physiology of the new-born in managing the sick new-borns.
12. Utilize the midwifery management process to manage sick new-borns.
13. Apply knowledge, attitudes, skills and practices in the diagnosis and management of a neonate with high-risk conditions.

## Competencies

The ability to:

- Undertake emergency measures for respiratory distress
- Initiate resuscitation of asphyxiated new-born
- Initiate and maintain kangaroo mother care for the low birth-weight baby
- Arrange for referral if potentially serious complications arise, or in case of very low birth weight
- Perform a gestational-age assessment
- Assist parents to access community resources available to the family
- Support parents during the grieving process for loss of pregnancy, stillbirth, congenital birth defects or neonatal death
- Support parents during transport/transfer of new-born or during separation from infant
- Support and educate parents who have given birth to multiple babies (e.G., Twins, triplets) about special needs and community resources
- Provide appropriate care for a baby born to an hiv-positive mother
- Develop a discharge plan together with the mother and family for postnatal follow-up
- Document all information appropriately.

## Teaching Strategies

Demonstration, simulation, case study, clinical conferences, reflective logs.

## Assessment / Evaluation

### Formative Assessment

Evaluation of procedures.

### Summative Assessment

Oral and practical exams, OSCE and clinical performance.

## Skills

- Admission of a sick neonate
- History taking
- Resuscitation
- Oxygen administration
- Initiate Kangaroo Mother Care
- Calculate and administer drugs
- Calculate and administer feeds
- Collect blood samples
- Initiate phototherapy
- Insert nasogastric tube
- Assess a neonate for signs of local infections
- Preparing midwifery care plans
- Counsel an HIV-positive mother on feeding her infant
- Discharging a sick neonate

## 3.4 Year 4

### 3.4.1 Introduction

Year 4 introduces learners to mental health and psychiatric nursing, management of the care unit and community midwifery. At this level, the learners are expected to take full responsibility for their own learning, identifying gaps and addressing them before they leave the programme.

### 3.4.2 Learning outcomes

On successful completion of the year 4 the learners will be able to:

- Demonstrate clinical competence in the provision of mental health and community-based midwifery services.
- Provide mental health nursing and community-based midwifery care according to the ethical, legal, professional and cultural frameworks guiding the practice.
- Communicate effectively and with respect with mental health and psychiatric nursing clients using various modes of communication.
- Collaborate in a responsible and accountable manner with members of the multidisciplinary health team, other professionals and clients in the provision of quality mental health and community-based midwifery care.
- Provide leadership in nursing and midwifery care provision and in the multidisciplinary healthcare team.
- Take responsibility for personal and colleagues' continuing professional development needs to maintain competencies and improve quality of care.
- Assign, direct and supervise other categories of staff in carrying out particular roles or functions aimed at achieving patient-care goals.
- Participate in quality improvement exercises in the health-care provision units to enhance health-care outcomes.

### 3.4.3 Semester Modules

#### 3.4.3.1 Mental Health and Psychiatric Nursing (Theory)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Mental health and psychiatric nursing (theory)
5. Module Code	6. NURS 401
7. Year offered	8. Four
9. Total hours/ credits/	10. 45/3

### Description

This module focuses on theoretical knowledge on mental and common psychiatric conditions. It introduces the learner to concepts in mental health nursing and the variety of common psychiatric conditions in all stages of the lifespan. The learners will acquire skills in the assessment of and management modalities for patients with mental health or psychiatric disorders using the nursing process and requisite interpersonal skills and attitudes necessary to act as a therapeutic agent. The module covers the common mental health diagnostic systems.

## Aim

The goal of this module is to equip learners with the knowledge required to identify mental health problems and common psychiatric conditions to promote mental health in order to mitigate psychiatric disorders, and to manage the common psychiatric conditions.

## Learning outcomes

On successful completion of this module the learners will be able to demonstrate knowledge of:

1. Common mental health and psychiatric terminology and concepts.
2. Common mental health problems and psychiatric disorders.
3. Mental health assessment approaches for individuals, families, groups and communities.
4. Mental health promotion and mental illness prevention strategies.
5. Common diagnostic assessment tools for mental and psychiatric health.
6. Management of common psychiatric disorders.

## Content

- Mental health and psychiatric terminologies

### Causes of mental health problems and psychiatric disorders

- Biological causes
- Genetic causes
- Socio-cultural causes
- Bio-psychosocial and environmental causes

### Risk factors

- HIV and ARVs
- Diabetes
- Hypertension
- Hepatic disorders
- Renal disorders
- TB and Anti-tuberculosis medications
- Febrile disorders
- Malnutrition

### Mental health and psychiatric assessment methods

- Functional assessment
- Community assessment
- Mental health status assessment
- Rehabilitation assessment
- Mental health promotion and prevention strategies

## Common psychiatric disorders

- Anxiety Disorders
- Mood disorders
- Psychotic disorders
- Substance use disorders
- Psychiatric disorders common in children and adolescents
- Personality disorders
- Aggressive behaviour

## Therapeutic nursing interventions

- Counselling
- Group therapy
- Psycho education
- Group activities
- Psychosocial rehabilitation
- Psychotropic drugs

## Teaching methods

Lectures, discussions, problem-based learning, role play, seminar presentations, reflection on case presentations by learners, individual and group assignments

## Assessment strategies

### Formative Assessment

Practical skills

### Summative Assessment

Oral (case study presentation), practical examination, OSCE

## Reading materials

1. Elder R, Evans K, Nizette D (2009). Psychiatric mental health nursing. Elsevier Australia.
2. Frisch CN (2005). Psychiatric mental health nursing: understanding the client as well as the condition, 3rd ed. Delmar Pub.
3. Uys LR, Middleton L (2010). Mental health nursing: a South African perspective, 5th ed. Juta & Co.
4. Videck S (2011). Psychiatric-mental health nursing. Lippincott Williams & Wilkin.

## Competencies

### Competency 1: Integration of basic sciences to patient care

Understand the important assessment needs of sick and well children.

Knowledge	Attitude/behaviour	Skills
<ul style="list-style-type: none"> <li>Articulates theories and concepts related to the care of clients with mental health concerns and their families.</li> <li>Describes prototype disease processes including prevention, diagnosis and treatment for individuals with mental health concerns.</li> </ul>	<ul style="list-style-type: none"> <li>Acknowledges the unique experiences and knowledge of mental health clients and their families</li> </ul>	<ul style="list-style-type: none"> <li>Reflects on the environmental and interpersonal factors when assessing needs of clients with mental health concerns as well as their families and communities.</li> <li>Includes client with mental health concerns in developing an individualized nursing care plan.</li> </ul>

### 3.4.3.2 Mental Health and Psychiatric Nursing (Clinical)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Mental health and psychiatric nursing (clinical)
5. Module Code	6. NURS 403
7. Year offered	8. Four
9. Total hours/ credits/	10. 135/3

## Description

This module will offer learners the opportunity to apply the knowledge acquired from the theory module on mental health and knowledge and competencies from biomedical and behavioural sciences. It will provide practical experience in a variety of mental health and psychiatric settings. Learners will be expected to assess, diagnose, plan, implement and evaluate care for clients with common mental health or psychiatric problems using available tools.

## Aim

To equip learners with competencies to identify, assess and diagnose mental health problems; promote mental health; hinder psychiatric disorders; and manage persons with mental health or psychiatric disorders in all stages of the lifespan using a variety of management modalities and identifying social factors that hinder or promote mental health.

## Learning outcomes

On successful completion of this module learners will be able to:

1. Assess and identify mental health problems of clients, families, groups and communities.
2. Plan, implement and evaluate mental health promotion and mental illness prevention programmes.
3. Utilize appropriate psychiatric assessment tools.
4. Conduct client examination to determine the mental health state or for functional or rehabilitation assessment.
5. Formulate psychiatric diagnoses.
6. Plan, implement, monitor and evaluate mental health nursing care plans.
7. Create and maintain therapeutic milieus conducive to the management of mental health or psychiatric conditions.
8. Demonstrate therapeutic communication and interpersonal skills when interacting with individuals, families or communities.
9. Integrate competencies acquired from biomedical and behavioural sciences in the management of clients with mental health disorders.

## Teaching Methods

Problem-based learning, case studies, simulation and demonstration of skills, reflection, role play, e-learning, clinical practice, clinical conferences and seminar presentations.

## Assessment strategies

### **Formative assessment (60%)**

Weekly case presentations, oral examination

### **Summative assessment (40%)**

Objective structured clinical examination (OSCE), casebook or logbook evaluation.

## Reading materials

1. Elder R, Evans K, Nizette D (2009). Psychiatric mental health nursing. Elsevier Australia.
2. Frisch CN. (2005). Psychiatric mental health nursing: understanding the client as well as the condition, 3rd ed. Delmar Pub.
3. Uys LR, Middleton L (2010). Mental health nursing: a South African perspective, 5th ed. Juta & Co.
4. Videck S (2011). Psychiatric-mental health nursing. Lippincott Williams & Wilkins.



## Competencies

### Competency 1: Client-centred care

Assess mental health of psychiatric client.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>• Demonstrates familiarity with theories and concepts related to the care of clients with mental health concerns and their families</li> <li>• Relates the assessment of the mental health status of an individual to prevention, care and management of mental illness</li> <li>• Distinguishes characteristics of healthy and unhealthy mental statuses</li> </ul>	<ul style="list-style-type: none"> <li>• Acknowledges the unique experiences and knowledge of mental health clients and their families</li> </ul>	<ul style="list-style-type: none"> <li>• Considers environmental and interpersonal factors when obtaining history and assessing needs of clients with mental health concerns as well as their families and communities</li> <li>• Conducts a comprehensive assessment of the mental health status of clients</li> <li>• Appraises information obtained from a client in generating a mental health or psychiatric diagnosis</li> <li>• Utilizes common diagnostic systems and the nursing process in generating a mental status diagnosis</li> </ul>

### Competency 2: Care provision

Plan and implement care for mental health and psychiatric patients.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>• Demonstrates familiarity with treatment modalities for patients with mental disorders</li> <li>• Compares a variety of nursing interventions for mental health or psychiatric disorders</li> </ul>	<ul style="list-style-type: none"> <li>• Values reflective practice in the provision of care to clients with mental health needs</li> </ul>	<ul style="list-style-type: none"> <li>• Designs and implements individualized nursing care plans for clients with mental health disorders</li> <li>• Analyses and revises care interventions and priorities appropriately in accordance with changes in the individual's conditions, needs or circumstances</li> </ul>

### Competency 3: Care provision

Administer medications to mental health and psychiatric patients.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Appraises medications prescribed for mental health conditions such as anxiety, mood, psychotic, personality, cognitive, somatoform and substance abuse disorders</li> <li>Distinguishes interactions of illicit substances with medications from interactions from psychiatric medications</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the experience of those living with mental health concerns and uses it in providing them care</li> </ul>	<ul style="list-style-type: none"> <li>Manages identified mental health or psychiatric disorders utilizing psychopharmacologic agents and other treatment interventions</li> <li>Provides medication education to patients and clients taking into account their assessed capacity to comprehend the information given the acuity of their illness</li> <li>Monitors medications' therapeutic responses, untoward effects, toxicity and potential incompatibility with other medications or illicit drugs</li> </ul>

### Competency 4: Therapeutic communication and interrelationships

Communicates in a therapeutic manner with mentally ill and psychiatric patients.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Explains the rationale for using specific therapeutic communication techniques with patients or clients</li> <li>Comprehends the therapeutic role of the nurse in a mental health setting, for example as an educator, caregiver and advocate, as well as roles that may be counter-therapeutic</li> </ul>	<ul style="list-style-type: none"> <li>Values the significance of the therapeutic relationship and how it differs from a social relationship in the mental health setting</li> <li>Recognizes personal biases and guards against their interference with provision of non-judgmental care</li> </ul>	<ul style="list-style-type: none"> <li>Explores client perceptions of reality, promotes the development of a positive self-concept, assists clients in developing positive coping mechanisms and encourages verbalization of feelings to facilitate behavioural change</li> <li>Provides opportunities for mental health clients to practice therapeutic behaviours, for example by encouraging them to participate in verbal group or unit community meetings</li> <li>Supports clients and their families' sense of resilience, self-esteem, power, hope and recovery</li> <li>Communicates respectfully and compassionately with patients and their families</li> </ul>

**Competency 5: Health promotion**

Provides health education to patients or clients and families.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Identifies appropriate teaching and learning strategies and resources relevant for patients with mental health needs</li> <li>Critiques various mental health promotion programmes and activities</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the need for mental health promotion programmes and activities for all ages</li> </ul>	<ul style="list-style-type: none"> <li>Engages in teaching and learning opportunities with individuals with mental health concerns, their families and communities</li> <li>Develops needs-based health education programmes for individuals, families and communities experiencing mental health or psychiatric conditions</li> <li>Educates clients on the role of stigma in the lives of individuals with mental health concerns, their families and communities</li> </ul>

**Competency 6: Quality improvement and evidence-based practice**

Demonstrates ability to use best evidence to improve the quality of care.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Evaluates the relevance of available evidence when making care decisions pertinent to patients with mental health disorders, such as online and published literature sources on management of mental health disorders</li> <li>Is knowledgeable of accessible sources of evidence that may be used to improve the quality of care for patients or clients with mental health disorders</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the importance of evidence-based practice and quality improvement in mental health and psychiatric nursing</li> </ul>	<ul style="list-style-type: none"> <li>Appropriately evaluates and revises care interventions and priorities in accordance with the changes in the individual's condition, needs or circumstances, guided by available evidence</li> <li>Evaluates multiple sources of evidence to develop safe and appropriate evaluations of care for patients with complex health problems</li> </ul>

**Competency 7: Professionalism**

Practise within legal and ethical nursing and midwifery frameworks.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Understands legal and regulatory frameworks that apply to mental health nursing and midwifery and psychiatric nursing and midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Values patients' uniqueness and the need for unique treatment</li> </ul>	<ul style="list-style-type: none"> <li>Provides care within the ethical and legal frameworks that apply to mental health and psychiatric nursing</li> <li>Demonstrates ability for "reflection in action, reflection for action and reflection on action"</li> </ul>

## Competency 8: Teamwork and collaboration

Provide care to mental health and psychiatric patients in a collaborative team work.

Knowledge	Attitudes and behaviour	Skills
<ul style="list-style-type: none"> <li>Fosters collaboration with professionals in other healthcare disciplines in meeting needs of patients with mental health needs</li> <li>Describes strategies for identifying and managing overlaps in team member roles and responsibilities</li> <li>Identifies systems' factors that facilitate or interfere with effective team functioning</li> </ul>	<ul style="list-style-type: none"> <li>Appreciates the role of the family and community in care provision for the mentally ill patient</li> </ul>	<ul style="list-style-type: none"> <li>Develops plans of care for patients from special populations using the knowledge gained from assessments, and consults with other members of the healthcare team and family members</li> <li>Uses relationships and communication theories appropriately in interactions with inter-professional team members and clients from special populations and their families</li> <li>Actively shares mental health nursing knowledge with other members of the health care team</li> </ul>

### 3.4.3.3 Health Services Management (Theory)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module Title	4. Health services management (theory)
5. Module Code	6. NURS 405
7. Year	8. FOUR
9. Total hours/credits	10. 45/3

## Description

This module builds on the modules on fundamentals of nursing and midwifery, and professional, ethical and legal practice. It is designed to equip the learner with knowledge and attitudes in health services management and leadership necessary for provision of health care. Emphasis is placed on utilization of the management process, leadership theories and approaches for problem solving, clinical decision-making, policy analysis, and monitoring and evaluation.

## Aim

This module aims to prepare the learner to become a nurse-midwife leader, manager, educator and advocate for patients, quality health services and the contribution and role of nursing and midwifery professions in the health agenda.

## Learning outcomes

At the end of this module, learners will be able to:

- Demonstrate understanding of health care organizations in Malawi;
- Demonstrate the understanding of the concept health systems including organization of health care delivery systems;
- Understand concepts leadership and management and their related theories essential for professional nursing practice;
- Management of resources (human, material and financial) to achieve organizational goals;
- Articulate an effective work team and environment through effective communication between patients, nursing staff and other health-care personnel;
- Incorporate human resource management principles and theories related to delegation, allocation and supervision of personnel in practice;
- Utilize staff performance appraisal methods based on recognized criteria and institutional policy;
- Implement quality improvement initiatives in nursing services;
- Monitor and evaluate care provision and services for quality and efficacy;
- Participate in the public health policy formulation process and review the impact on service delivery including the contributions of nursing to the national health agenda.

## Content

### Unit 1: Introduction to health service management

- Health care organizations
- Health systems and the organization of health care delivery systems;
- Approaches for delivering nursing and midwifery care/services
- Management and related theories of effective management
- Management process: planning, organizing, directing, controlling
- Functions of a nurse and midwife as managers;
- Change management and the change process;
- Nurse managers and leaders as change agents;

### Unit 2: Strategic planning

- Strategic planning and strategic planning process;
- Thinking skills for nurse managers: strategic thinking
- Developing a unit operational plan
- Implementing an operational plan
- Strategies for building commitment to the operational plan

### Unit 3: Human resource management

- Human Resource for Health(HRH) policy and planning;
- Development/production of different categories of HRH workforce;
- Education systems for training of health workers;
- Human resources management, including recruitment, retention and motivation;
- Building effective teams;
- Leading and coaching a professional team
- Delegation
- Supervision and follow-up of personnel
- Conflict management

#### **Unit 4: Performance management**

- Introduction to performance management
- Performance evaluation

#### **Unit 5: Finance management**

- Health financing concepts
- Budget and Budgeting process
- Approaches to budgeting
- Types of budget
- Managing the budget
- Cost containment
- Role and responsibility of nurse manager in the budgeting process

#### **Unit 6: Quality management of care services**

- Total Quality Improvement
- Continuous Quality Improvement (CQI)
- Components of a CQI Programme
- Common tools for quality improvement
- Risk management and components of a Risk Management Programme
- Evidence-based practice for quality improvement

#### **Unit 7: Leadership and management in nursing**

- Leadership and related theories of effective leadership
- Types of leadership
- Key attributes/traits of a leader
- Effective communication
- Maintaining a positive working environment
- Coaching and mentoring
- Collaboration and teamwork
- Professional development of staff
- Conflict resolution
- Succession planning

#### **Unit 8: Public health policy formulation**

- Meaning of public health policy
- Public health policy development process
- Policy analysis and advocacy for policy change
- Collaborative processes to influence policy development
- Policy implementation monitoring

## Teaching methods

Lectures, group work, case study, scenario simulation, self-directed learning, reflective diaries, role play.

## Assessment strategies

### Formative assessment (40%)

Mid-term test, case analysis.

### Summative assessment (60%)

Three-hour written theory paper

## Reading materials

1. Yoder-Wise P (2003). Leading and managing in nursing, 3rd ed. Mosby.
2. Kelly-Heidenthal P (2000). Nursing leadership and management. Delmar-Thompson.
3. Swansburg R, (2002). Introduction to management and leadership for nurse managers, 3rd ed. Jones and Bartlett Publishers.
4. Tappen R, Weiss S, Whitehead D (2004). Essentials of nursing leadership and management, 3rd ed. Philadelphia: FA Davis.
5. Treas L (2006). Nursing leadership and management. Kansas.

### 3.4.3.4 Health Services Management (Clinical)

6. Programme	7. 4-Year Integrated Nursing and Midwifery
8. Module Title	9. Health services management (clinical)
10. Module Code	11. NURS 407
12. Year	13. FOUR
14. Total hours/credits	15. 135/3

## Description

This module is designed to enable the learner to acquire attitudes and skills necessary for management of health services. The focus will be on developing competencies in problem solving, decision-making, resource management, policy analysis and interpretation, change initiation, performance appraisal, and quality improvement, monitoring and evaluation. This module will prepare the learner to monitor and evaluate nursing and midwifery practices.

## Aim

To prepare the learner to be an effective nursing and midwifery manager and leader.

## Learning Outcomes

At the end of this module, learners will be able to:

1. Explain how to work as a member of health-care team;
2. Describe the management of human resources for health including, policy and planning; training and management to meet national health service delivery requirements;
3. Demonstrate ability to create a positive working environment through effective communication;
4. Delegate, supervise, direct and control personnel in carrying out their roles in achieving patient care goals;
5. Develop operational plans which are based on national health strategic plans;
6. Manage financial and other health care resources based on informed understanding of issues prevailing in the specific health care system and service;
7. Appraise staff performance based on institutional policy and recognized criteria for performance appraisal;
8. Apply the fundamentals of monitoring and evaluation in the provision of health care;
9. Design, implement and evaluate nursing and midwifery unit policies;
10. Contribute to quality improvement guided by available evidence;
11. Demonstrate ability to lead and manage change in health care practice with the aim of improving quality of care;
12. Facilitate continuous professional development for self and other health personnel.

## Content

### Clinical Skills in

- Strategic planning
- Developing and implementing operational plans

### Human resource management

- Planning for human resources for health;
- Education of health personnel at departmental/unit levels
- Recruitment of personnel
- Motivating staff and retaining them using different retention strategies;
- Delegation
- Supervision and follow-up of personnel
- Managing Conflicts
- Leading and coaching a professional team
- Dealing with resignation and termination
- Continuing professional development

### Finance management

- Budgeting
- Containing costs
- Preparing a budget



## Quality assurance and improvement

- Tools for quality improvement
- Risk methods
- Leading personnel in a nursing unit
- Developing public health policy

## Teaching methods

Demonstrations, group work, case scenarios, case study, lecture, self-directed learning, reflective diaries, case presentations.

## Assessment strategies

### Formative assessment (60%)

Midterm test, practical or clinical assessment, case study analysis, practical work book, reflective diary

### Summative assessment (40%)

Three-hour theory paper, case presentation including an element of practical skills in managing a nursing-midwifery unit

## Reading materials

1. Yoder-Wise PS (2003). Leading and managing in nursing. 3rd ed. Mosby.
2. Kelly-Heidenthal P (2000). Nursing leadership and management. Delmar-Thompson.
3. Swansburg R. (2002). Introduction to management and leadership for nurse managers, 3rd ed. Jones and Bartlett Publishers.
4. Tappen R, Weiss S, Whitehead D (2004). Essentials of nursing leadership and management, 3rd ed. Philadelphia: FA Davis.
5. Treas L (2006). Nursing leadership and management. Kansas

## Competencies

### Competency 1: Management

Effectively understand and apply the management theories in the practice of nursing and midwifery.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates understanding of management theories and principles applicable to nursing and midwifery</li> <li>• Understands the principles of accountability and delegation</li> </ul>	<ul style="list-style-type: none"> <li>• Recognizes the value of delegation</li> <li>• Accepts accountability and responsibility for personal professional judgment and actions</li> </ul>	<ul style="list-style-type: none"> <li>• Manages the unit effectively, applying management theories and principles</li> <li>• Assigns, directs and supervises ancillary personnel and support staff in carrying out roles and functions aimed at achieving patient care goals</li> </ul>

## Competencies

### Competency 2: Management

Effectively understand and apply principles of financial management in the delivery of health care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of the budgeting process, basics and principles; management of budgets; and resource allocation</li> </ul>	<ul style="list-style-type: none"> <li>Values adherence to budget management principles</li> </ul>	<ul style="list-style-type: none"> <li>Develops budgets that demonstrate sound understanding of budgeting principles</li> <li>Keeps records of the unit's financial resources and their utilization and budget submissions</li> <li>Procures the unit's equipment, supplies and resources guided by the needs of the unit</li> </ul>

### Competency 3: Quality improvement

Contribute to quality management and improvement in the unit.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of quality improvement and quality monitoring concepts</li> <li>Demonstrates understanding of the relationship between quality improvement and evidence-based practice</li> </ul>	<ul style="list-style-type: none"> <li>Values quality improvement in the nursing and midwifery unit</li> </ul>	<ul style="list-style-type: none"> <li>Measures, monitors and improves safety, quality, access, system and care delivery processes in the health care unit</li> <li>Utilizes evidence to support decisions on quality improvement in the unit</li> </ul>

### Competency 4: Leadership

Provide leadership in a health-care unit under the guidance of a registered nurse-midwife.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates understanding of leadership skills essential for the practice of nursing and midwifery</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the role of the nurse-midwife as the leader in the unit</li> </ul>	<ul style="list-style-type: none"> <li>Provides effective leadership in the nursing-midwifery unit</li> <li>Facilitates change in the unit to improve health care outcomes</li> <li>Serves as a mentor for junior students</li> </ul>

### Competency 5: Quality improvement

Develop and evaluate an operational plan for the unit.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Applies strategic thinking principles in managing a nursing-midwifery unit</li> </ul>	<ul style="list-style-type: none"> <li>Values strategic and critical thinking processes in the management of a nursing-midwifery unit</li> </ul>	<ul style="list-style-type: none"> <li>Uses systematic approaches in addressing problems and issues in the nursing-midwifery unit</li> <li>Conducts a SWOT (strengths, weaknesses, opportunities, threats) analysis to generate an operational plan for the unit</li> <li>Develops an operational plan for the unit that feeds into the organization's strategic plan</li> <li>Implements and evaluates the unit's operational plan</li> </ul>

### Competency 6: Collaboration and Teamwork

Promote collaboration and teamwork in the unit.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates comprehension of human behaviour, mental processes and individual and group performance</li> <li>Critically analyses the principles and theories applicable to leadership in teams</li> </ul>	<ul style="list-style-type: none"> <li>Recognizes the centrality of a multidisciplinary team approach to patient care</li> <li>Values the perspectives and expertise of each member of the health care team</li> </ul>	<ul style="list-style-type: none"> <li>Participates and effectively provides leadership in multidisciplinary teams</li> <li>Promotes a productive culture by valuing individuals and their contributions to the team</li> <li>Models effective communication and promotes cooperative behaviours in the team</li> <li>Shows tolerance for different viewpoints in the negotiation process</li> </ul>

### Competency 7: Leadership and change

Effectively manage change in the delivery of nursing & midwifery services.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands change management theories and principles</li> <li>Explains the importance, necessity and process of change</li> <li>Apply change theories to nursing and midwifery practice</li> </ul>	<ul style="list-style-type: none"> <li>Demonstrates awareness of personal reaction to change and strives to remain open to new ideas and approaches</li> </ul>	<ul style="list-style-type: none"> <li>Participates in the process to improve patient care, work environment and patient and staff satisfaction</li> <li>Anticipates consequences of change, plans ahead and changes approaches to get best results</li> </ul>

**Competency 8: Continued competence**

Participate in continuing professional development programme.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates comprehension of the concept of continuous professional development (CPD)</li> <li>• Demonstrates knowledge of the process of developing and implementing a CPD programme</li> </ul>	<ul style="list-style-type: none"> <li>• Appreciates the importance of CPD to improve health outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Conducts a needs analysis to inform activities in a CPD programme</li> <li>• Develops, implements and evaluates personal and colleagues' CPD plans</li> </ul>

**Competency 9: System-based approach to nursing and midwifery**

Promotes and supports systems approach to delivery of health care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrate understanding of how each individual care provider is dependent and influences other care team members (e.g., specialists in different fields, pharmacists, social workers, psychologists, physical therapists)</li> </ul>	<ul style="list-style-type: none"> <li>• Values systems thinking in the delivery of quality service in the unit</li> </ul>	<ul style="list-style-type: none"> <li>• Contribute in optimising performance of the team by respecting the policies of other departments with an input in patient care (e.g. ordering dates, stock collecting dates, etc.)</li> <li>• Communicates to other member of the system in advance the needs of the unit to ensure smooth functioning (e.g. placing drug orders timeously in pharmacy)</li> </ul>

**3.4.3.5 Community Midwifery (Theory)**

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Community midwifery (theory)
5. Module Code	6. MID 400
7. Year	8. FOUR
9. Total hours/ credits	10. 45/3

**Description**

This module enables the learner to understand the basic concepts and principles of primary health care as it relates to midwifery practice in the community. It provides in-depth knowledge in the care of women and their new-born babies and families in the community.

## Aim

This module equips the learner with knowledge of the primary health care approach and relevant theories in the management of mothers-to-be or new mothers and their families and communities.

## Learning outcomes

On successful completion of this module the learner should be able to:

1. Demonstrate knowledge of the primary health care approach and theories and models applicable to midwifery.
2. Demonstrate familiarity with socio-cultural, political and economic determinants of health and epidemiological patterns to formulate strategies for improving maternal, new-born and child health.
3. Demonstrate knowledge of midwifery care provision practices in the community setting.
4. Identify and refer clients who require care at the health facility level.
5. Understand the communities' cultural practices and beliefs that have impact on maternal, new-born and child health.
6. Demonstrate familiarity with the health education, counselling and communication strategies sensitive to traditional and cultural beliefs of the community.
7. Demonstrate community mobilization skills to promote maternal and new-born health and prevent morbidity and mortality.
8. Demonstrate understanding of approaches to collaborate in multidisciplinary teams and with multi-sectoral agencies and other stakeholders in the community to promote and strengthen maternal and child health services.

## Content

- The concept community midwifery
- District midwifery
- Stakeholders in the community
- Community mobilization
- Community midwifery services
- Primary health care
- The referral system and transition of care from the health care settings to the community
- Determinants of maternal and neonatal health
- Cultural practices and beliefs on motherhood and childbirth
- Role of the family and community midwifery services
- Prenatal, intranatal and postnatal care at the community level, including home visits, baby care and home-based care for women and babies at risk or with complications
- Safe motherhood and the role of the community
- The midwife's role in promotion of safe motherhood in the community
- Recognition and management of obstetric emergencies in the community
- Role of the midwife as a member of the health team
- The place and value of women in the community
- Male engagement in maternal and infant health
- Factors contributing to harmful traditional practices
- Strategies for elimination of harmful traditional practices
- Social justice and injustice
- Collaboration with related sectors in the community

## Teaching methods

Lectures, group work, case study, scenario simulation, self-directed learning, reflective diaries, role play.

## Assessment strategies

### Formative Assessment (40%)

Assignments, reports, case studies, midterm examination

### Summative Assessment (60%)

Final examination and project report.

## Reading materials

1. Dunkley J (2000). Health promotion in midwifery: a resource for health professionals. London: Bailliere Tindall.
2. Beischer NA, Mackay EU, Colditz PB (1997). Obstetrics and the new-born, 3rd ed. London: WB Saunders.
3. Birnbach DJ (2000). Textbook of obstetric anesthesia. New York: Churchill Livingstone.
4. Campbell S (2000). Gynaecology by ten teachers. London: Arnold.
5. Chamberlain G (2000). A practice of obstetrics and gynaecology: a textbook for general practice and DRCOG. Edinburgh: Elsevier Ltd.
6. Diamond B (2006). Legal aspects of midwifery. Books for Midwives.
7. Henderson C, MacDonald S (2004). Mayes' midwifery, 13th ed. London: Bailliere Tindall.
8. James DK, Steer PJ, Weiner CP, Gonik B (2005). High risk pregnancy management options, 3rd ed. London: WB Saunders.
9. James DK, Johnson I, McEvan A (2000). Obstetrics and gynaecology, Vade-Mecum. London: Arnold.
10. Olds SB, London ML, Ladewig PA (2000). Maternal new-born nursing: a family and community based approach. London: WB Saunders.
11. Sellers PM (2001). Midwifery. Cape Town: Juta & Co.
12. Fraser D, Cooper MA (2006). Myles textbook for midwives, 14th ed. Edinburgh: Churchill Livingstone.

### 3.4.3.6 Community Midwifery (Clinical)

1. Programme	2. 4-Year Integrated Nursing and Midwifery
3. Module title	4. Community midwifery (clinical)
5. Module Code	6. NURS 402
7. Year	8. Four
9. Total hours/ credits	10. 170/4

## Description

This module will enable the learner to develop skills and appropriate attitudes utilizing the primary care approach for managing childbearing families, new-born babies and communities within the community setting.

## Aim

This module will equip the learner with competencies for providing community midwifery care in a community setting.

## Learning outcomes

On successful completion of this module the learner should be able to:

11. Utilize the primary health care approach in managing childbearing families in a community setting.
12. Integrate concepts from gender-based violence and sexual and reproductive health in managing childbearing families.
13. Identify political and socio- cultural determinants of and gender barriers to maternal and neonatal health.
14. Apply the principles of community mobilization to promote maternal, new-born and child health.
15. Identify key players in maternal and neonatal health in the community.
16. Function in a multidisciplinary team.

## Clinical skills

- Utilize the primary health care approach, theories and models in midwifery
- Gather information for compiling a community health profile on reproductive health and midwifery issues
- Conduct community diagnoses
- Analyse socio-cultural, political and economic determinants of health and epidemiological patterns to formulate strategies for improving maternal and child health
- Carry out midwifery practice in collaboration with relevant stakeholders
- Utilize the midwifery management process in providing culturally safe community midwifery care
- Refer clients that require care at a health facility level
- Mobilize communities to promote maternal and new-born health
- Advocate for the protection of the rights of women, families and communities in sexual and reproductive health issues
- Identify environmental factors and socio-cultural determinants of health, including dangerous cultural practices associated with maternal and neonatal outcomes

- Support women and families with HIV/AIDS and preterm infants on kangaroo mother care in promoting health
- Educate men and women about gender inequalities
- Collaborate with multidisciplinary teams, multi-sectoral agencies and other stakeholders to strengthen the referral system and to ensure that transportation and communication infrastructure is readily usable during emergencies
- Collaborate with key stakeholders in providing midwifery and family planning care in the community
- Provide feedback to midwives, health care providers and other health professionals and communities on maternal and neonatal outcomes of referred cases
- Educate communities on gender inequalities that undermine maternal and neonatal health
- Provide family life education to adolescents and communities
- Keep an accurate record of birth outcomes, referred cases and services rendered

## Teaching methods

Demonstration of skills, role play, e-learning, clinical practice and seminar presentations

## Assessment strategies

### Formative assessment (60%)

Group project, community needs assessment with specific focus on midwifery related issues, individual projects, family visit and study in a home with a new mother and her baby, case study report following a discharged client in the community for a period of three months, test.

### Summative assessment (40%)

Final examination and health promotion project report.

## Reading materials

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## Competencies

### Competency 1: Care provision

Conduct an assessment to develop a profile of reproductive health and midwifery issues affecting a community.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Applies the principles and theories of negotiating community entry and conducting a community profile</li> <li>Demonstrates comprehension of how socio-cultural, political and economic determinants of health and epidemiological patterns are applied to formulate strategies for improving maternal and child health</li> <li>Demonstrates knowledge of the role of epidemiology, sanitation, community diagnosis and vital statistics or records in community-based midwifery</li> <li>Is familiar with the national and local health infrastructure resources and how to access them when needed for midwifery care</li> </ul>	<ul style="list-style-type: none"> <li>Values community involvement</li> </ul>	<ul style="list-style-type: none"> <li>Negotiates community entry with community leaders and critical stakeholders</li> <li>Gathers information for compiling a profile on reproductive health and midwifery issues affecting the community</li> <li>Draws up a profile of the state of maternal and child health in the community as reflected in the state of water supply, housing, environmental hazards, food and the common threats to health</li> </ul>

### Competency 2: Care provision

Mobilize the community to participate in maternal and baby health promotion initiatives.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Demonstrates comprehension of the principles of community-based primary care using health promotion and disease prevention strategies</li> </ul>	<ul style="list-style-type: none"> <li>Values advocacy for issues affecting women and new-born babies</li> </ul>	<ul style="list-style-type: none"> <li>Participates in planning, implementation and evaluation of needs-based, health-promotion programmes in partnership with the community</li> <li>Participates in mobilizing resources to meet the health needs of women and their families</li> </ul>

**Competency 3: Care provision**

Conduct a home visit with a family with of a pregnant woman or a new mother and a baby following delivery at home.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates awareness of the principles of community-based primary care using health promotion and disease prevention strategies</li> <li>• Demonstrates understanding of the safe, locally available herbal or non-pharmacological preparations for relieving common discomforts of pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>• Is non-judgmental and respectful of other cultures</li> </ul>	<ul style="list-style-type: none"> <li>• Demonstrates respect for local culture and customs in the provision of care to the mother and baby at home</li> <li>• Provides care to the mother and baby in a manner that takes into consideration both beneficial and harmful traditional and modern routine health practices valued in that community</li> </ul>

**Competency 4: Care provision**

Provide care to a mother and her new-born baby at home.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Demonstrates familiarity with the normal process of involution and healing following delivery, including after an abortion</li> <li>• Is familiar with the lactation process and common associated concerns of engorgement, shortage of milk, etc.</li> <li>• Demonstrates understanding of maternal nutrition, rest, activity and physiological needs</li> <li>• Demonstrates comprehension of infants' nutritional needs</li> </ul>	<ul style="list-style-type: none"> <li>• Works with families in a culturally sensitive manner</li> </ul>	<ul style="list-style-type: none"> <li>• Takes selective history from the new mother and her family members on the pregnancy, labour and birth</li> <li>• Performs a focused physical examination of the mother and new-born baby</li> <li>• Assesses new mothers for uterine involution and healing of lacerations or repairs</li> <li>• Assists in initiation and support of uninterrupted and exclusive breastfeeding, depending on the health status of the new mother</li> <li>• Identifies and treats maternal infections or refers the patient for treatment as appropriate</li> <li>• Records patient findings and the interventions offered and follow-up action if needed</li> </ul>

**Competency 5: Professionalism**

Advocate for safe motherhood in the community.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>• Critically analyses the concept of safe motherhood in the community and the factors influencing promotion of safe motherhood</li> </ul>		<ul style="list-style-type: none"> <li>• Advocates for the protection of the rights of women, families and communities as part of promotion of sexual and reproductive health</li> </ul>

## Competency 6: Health promotion

Engages in health promoting activities taking into consideration diversity of clients.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Applies health education principles in training women and their families on care of the mother and her baby</li> <li>Demonstrates understanding of the immunization needs, risks and benefits for an infant of up to two months of age</li> <li>Demonstrates knowledge of selected complications in the postnatal period such as persistent anaemia, haematoma, embolism, mastitis, depression and thrombophlebitis</li> </ul>	<ul style="list-style-type: none"> <li>Advocates for women, families and new-born babies in need of maternity care</li> </ul>	<ul style="list-style-type: none"> <li>Educates women on health-seeking behaviours</li> <li>Educates mothers on caring for themselves and their infants after delivery including on rest and nutrition</li> <li>Counsels women and their families on sexuality and family planning after delivery</li> <li>Educates parents on danger signs and when to take their infant for health care</li> <li>Promotes parent-infant bonding and attachment</li> <li>Educates women and their families on preparation of the home and family for the new-born baby</li> </ul>

## Competency 7: Collaboration and teamwork

Collaborates with the client/patient and members of the multi-disciplinary team in the provision of care.

Knowledge	Attitudes and behaviours	Skills
<ul style="list-style-type: none"> <li>Understands the importance of collaborating with multidisciplinary teams, multi=sectoral agencies and other stakeholders in strengthening the referral system to ensure that transportation and communication infrastructure provides ready access for health care during emergencies</li> </ul>	<ul style="list-style-type: none"> <li>Values the team approach to community-based midwifery</li> </ul>	<ul style="list-style-type: none"> <li>Determines when referral is needed and refers clients who require care at a health facility level</li> <li>Collaborates with key stakeholders in providing midwifery and family planning care in the community</li> </ul>

## 4. References

## 4. References

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## **5. Definition of terms**

## 5. Definition of terms

<b>Accreditation</b>	Recognition status granted to an Institution or programme for a stipulated period of time after a Regulatory Body (Quality Council) evaluation indicates that it meets minimum standards of quality
<b>Assessment</b>	Systematic evaluation of a student's ability to demonstrate the achievement of the learning goals intended in a curriculum (CHE, 2004).
<b>Attitude</b>	The most important behaviour of the nurses and midwives which reflects empathy, understanding, comforting, valuing, etc., in the care of clients.
<b>Basic Nursing and/or midwifery Education</b>	A formally recognized program of study providing a broad and sound foundation in the behavioural, life and nursing/midwifery sciences for the general practice of nursing/midwifery and for a leadership role and as a basis for post-basic education or specialized advanced nursing/midwifery practice.
<b>Client</b>	A recipient of health care regardless of the state of health. May be an individual, family, group or community with whom the nurse or midwife interacts.
<b>Clinical accompaniment</b>	The conscious and purposeful guidance and support of students, based on their unique learning needs, by creating learning opportunities that make it possible for them to grow and become independent critical practitioners.
<b>Clinical learning</b>	The acquisition of knowledge, skills and values in the clinical practice settings or environments that stimulate clinical practice.
<b>Clinical setting/ Practice Setting</b>	Physical surroundings or facilities where nursing and/or midwifery are practiced. They may range from the hospital to the community settings.
<b>Competent</b>	A level of performance demonstrating the effective application of knowledge, skill and judgment.
<b>Competency</b>	Basic knowledge, skills, attitudes and judgment required to safely perform the prescribed role.
<b>Competency-based curriculum</b>	Organized around functions (or competencies) required for the practice of nursing and midwifery in specified settings. The intended output of such a competency-based curriculum is a nurse midwife who can practice at a defined level of proficiency, in accord with local conditions to meet local needs.
<b>Content</b>	Topic to be included in the curriculum, including depth and relevance.
<b>Credit</b>	Value assigned to a given number of notional hours of learning.

<b>Critical thinking</b>	Is the mental, orderly and structured process of vigorously and dexterously applying, analysing, synthesizing, conceptualizing and/or evaluating information gathered
<b>Curriculum</b>	All the learning activities, processes and materials that are planned, implemented, monitored and evaluated to prepare learners to achieve specified educational objectives within a specified time, expected learning outcomes and competencies.
<b>Discipline of nursing and/or of midwifery</b>	The subject area that comprises the art and science of nursing and/or of midwifery.
<b>Evidence-based practice</b>	The integration of best research evidence with clinical expertise and patient values to provide high quality services.
<b>Examination</b>	A written, oral or practical assessment of learning, including supplementary examination and re-examination, continuous evaluation, and evaluation of experiential learning.
<b>Experiential learning</b>	Learning through experience or learning in the field- or work-based placements. Common experiential learning strategies include small group teaching, role plays, reflective diaries, problem solving, return demonstrations and simulations.
<b>Formative assessment</b>	Type of assessment used to improve learning and to give feedback to students on progress made. It serves needs intrinsic to the educational process (CHE, 2004).
<b>Holistic care</b>	Caring for the whole person including mental and psychosocial aspects rather than just the symptoms of a disease or health problems.
<b>Integrated curriculum</b>	A curriculum that is coherent in structure, processes and outcome and that links theory and practice in the professional education of a nurse and/or of a midwife. It attempts to fuse independent disciplines into a more unified meaningful whole.
<b>Learning</b>	An internal cognitive process by which knowledge and skill is acquired through instruction and study.
<b>Moderator</b>	A person, apart from the examiner, who is appointed by the institution to be responsible for ensuring the standard of the examination and its accompanying marking framework and response exemplars, and for marking a representative sample of examination responses (CHE, 2004).
<b>Module/unit</b>	A smaller part of a course that focuses on a specific theme through a series of related lessons. Units are sequenced by the instructor in a way that develops student learning of the content of the course.
<b>Notional hours of learning</b>	The learning time that it is conceived it would take an average learner to meet defined learning objectives. It includes concepts such as contact time, time spent in structured learning in the workplace, and individual learning.
<b>Outcomes</b>	Statements describing what a student will know or be able to do as a result of certain learning experiences, such as a course or program; learning that is a result or consequence of instruction.
<b>Practice Placement</b>	The clinical area to which nurses and/or midwives are allocated in order to undertake the practice components of their education. These clinical areas may be in hospital or community settings (WHO, 2003).



<b>Preceptor</b>	A nurse or midwife who has demonstrated competence in practice and guides learners who are acquiring clinical competence as part of a recognized programme of training. The preceptor demonstrates nursing or midwifery practice skills, gives the learner feedback on his/her performance and evaluates the learner's mastery of clinical skills and achievement of learning objectives.
<b>Professional regulation</b>	A process to establish and improve the standards of training (and professional conduct) for nurses (and) midwives (WHO, 2003).
<b>Programme</b>	A specified sequence of courses and other educational experiences that lead to specified outcomes. Certificates or degrees are awarded at the completion of all courses and other requirements in a program.
<b>Programme evaluation</b>	The external quality assurance processes which are undertaken in order to make an independent assessment of a programme's development, management and outcomes, through the validation of the findings of an internal programme self-evaluation (CHE, 2004).
<b>Qualification</b>	Formal recognition and certification of learning achievement awarded by an accredited institution (CHE, 2004).
<b>Quality control</b>	An operational function, applied at all levels by an institution to the management of its activities related to teaching and learning. It is concerned with the checks and measures by which a body determines that the operations for which it is responsible are working as planned and intended, including their fitness for the purpose specified, and that resources are being optimized and identified goals achieved (WHO, 2003).
<b>Quality assurance or quality monitoring</b>	The arrangements and procedures by which an institution discharges its corporate responsibility for the quality of the teaching and learning it offers, by satisfying itself that its structures and mechanisms for monitoring its quality control procedures are effective and where appropriate, that they promote the enhancement of quality (WHO, 2003).
<b>Recognition of prior learning</b>	Formal identification, assessment and acknowledgement of the full range of a person's knowledge, skills and capabilities acquired through formal, informal or non-formal training, on-the-job or life experience (CHE, 2004).
<b>Summative assessment</b>	Formalized assessment which is used to certificate the attainment of a certain level of education. It is used to serve needs extrinsic to the educational process (CHE, 2004).
<b>Standards</b>	Criteria established by professional or accrediting bodies against which courses and programs can be evaluated.
<b>Work-based learning</b>	A component of a learning programme that focuses on the application of theory in an authentic, work-based context. It addresses specific competences identified for the acquisition of a qualification, which relate to the development of skills that will make the learner employable and will assist in developing his/her personal skills (CHE, 2004).

# Annexes

## Annex 1: Lists of Contributors

**LISTS OF CONTRIBUTORS AT THE VARIOUS STAGES OF THE DEVELOPMENT OF THE REGIONAL PROTOTYPE CURRICULA FOR NURSING AND MIDWIFERY EDUCATION PROGRAMMES FOR THE AFRICAN REGION (in order of timeframe)**

**Development of Regional Prototype/Model Curricula for Nursing and Midwifery Education programmes for the African Region; Ouagadougou, Burkina Faso, 25-29 June 2012: Participants list**

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**Development of Regional Prototype / Model Curricula for Nursing and Midwifery Education Programmes for the African Region, Lilongwe, Malawi; 20-31 August 2012: Participants list**

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5. Dr Sheila Shaibu	Senior Lecturer	University of Botswana	University of Botswana, Faculty of Health Sciences, School of Nursing, P/Bag 00712, Gaborone, Botswana	+267 716 56746	shaibus@mopipi.
6. Prof. Nonhlanhla Alucia Sukati	Dean	University of Swaziland	P O Box 2017, Mbabane, Swaziland	+268 251 70707	nasukati@uniswa.sz
7. Rev Veronica Darko	Registrar / Chief Executive Officer	Nurses and Midwife Council	Box MB 44, Accra, Ghana	+233 244 322 444	nmc@africaonline.com.gh
8. Dr Abigail Kazembe	Lecturer	University of Malawi	Kamuzu College of Nursing, P/Bag 1, Lilongwe	+265 888 396 530	
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10. Mrs Felicitas Kanthiti	Chief Nursing Officer	Ministry of Health	P O Box 30377, Lilongwe, MALAWI	+265 888 841 683	fkanthiti@yahoo.co.uk
11. Mrs Annette Mwansa Nkowane	Technical Officer	World Health Organization/HQ	20 Avenue Appia, Geneva, Switzerland	+41 22791 4314	
12. Dr Seipati Mothebe-soane-Anoh	MPS/IST/WA	World Health Organization/ AFRO	BP 7019, Ouaga 3, Ouagadougou, Burkina Faso	+226 705 31199	
13. Mrs Margaret Loma Phiri	Regional Nursing & Midwifery Focal Point/ AFRO	World Health Organization/ AFRO	BP 7019, Ouaga 3, Ouagadougou, Burkina Faso	+226 78022659	phirim@bf.afro,who.int

**Third Expert Meeting on Development of Regional Prototype Competency-Based Curriculum for Nursing and Midwifery Education, Chrismar Hotel, Lusaka, Zambia; 29 October – 06 November 2012: Participant list**

Name	Organization	Designation	Contact Number	Email Address
1. Hlengiwe Mohale	SANU; SWAZILAND	Lecturer	+26876044561	mohalelengiwe@yahoo.com
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3. Margaret Phiri	WHO/IST-WA; BURKIN A FASO	Regional Focal Point, N&M/AFRO	+226 78022659	phirim@bf.afro.who.int
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5. Dr. Joan H. Shepherd	National School of Midwifery, SIERRA LEONE	Principal NSM	+23230500526/ 078509704	joanheev@yahoo.com
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11. Dr. Ntombifikile Mtshali	UKZN WHOCC; SA	Deputy Director	27312602499	mtshaling@ukcn.ac.za
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**Expert Technical Review Meeting of the Prototype Competency-Based Curricula for Nursing and Midwifery Education Programmes for the African Region, Harare, Zimbabwe; 11-15 March 2013: List of Participants**

<b>Name</b>	<b>Organization</b>	<b>Designation</b>	<b>Contact Number</b>	<b>Email Address</b>
1. Dr Mary Bi Suh Atanga	Senior Lecturer Nursing/ Community Health	University of Buea Cameroon	+237 77239737	mbisuh@yahoo.com
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9. Mrs Regina Nsipa Kanyemba	Nursing &Midwifery	P O Box 198 Causeway Harare, Zimbabwe	+263 773 394 281	rnkanyemba@ yahoo.co.uk kanyembarn@gmail. com

Name	Organization	Designation	Contact Number	E-Mail Address
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15. Dr Teshome Desta	CAH/IST-ESA	86 cnrGlenara Ave & Enterprise Road Highlands, Harare Zimbabwe	+47 241 38094	destat@zw.afro.who.int
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<b>SECRETARIAT</b>				
17. Ms Tricia Matare	Meeting Administrator	86 cnrGlenara Ave & Enterprise Road Highlands, Harare Zimbabwe	+263 712 409 846	mataret@zw.afro.who.int

**Meeting on Validation of Prototype Competency-Based Pre-Service Curricula for Nursing and Midwifery Programmes in the African Region, Johannesburg, South Africa; 15 – 19 July 2013; Participants List**

Name	Organization	Designation	Contact Number	E-Mail Address
1. Dr. Abigail Kazembe	Kamuzu College of Nursing		+261 888396530	kazembeabigail@kcn.unima.mw
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## **WHO and the Global Alliance for Health Workforce (AMPS); Three-day meeting, 9-11 October 2013 on the Training of Midwives, Cotonou, Benin**

Thirteen countries in Francophone Africa have been invited to this workshop: Benin, Burkina Faso, Cameroon, Congo, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, Senegal, DRC, Chad and Togo.

This workshop was organized with the French finance - Muskoka.

UNFPA financed the entire workshop.

The workshop was on improving the quality of training of midwives in Francophone countries. During this workshop status on the latest documents developed by WHO / AFRO were presented and discussed. The results of evaluations of training schools midwives conducted by UNFPA were also discussed.

The objectives of the workshop were:

1. Share the status of the current situation in the education and training of health workers with midwifery skills;
2. Share best practices to harmonize the training of health workers with midwifery skills;
3. Analyze the results of ratings of the quality of the training of midwives.

The meeting gave a go ahead to AFRO to finalise the three prototype curricula with the promise that they would be translated into French.

## Annex 2: Clinical Accompaniment Record

Name of institution: \_\_\_\_\_

[illegible]

## Annex 3: Tool for Clinical Facility Evaluation by Students

**Name of institution:** \_\_\_\_\_

Module Title: \_\_\_\_\_ Semester/Year: \_\_\_\_\_

Clinical Facility: \_\_\_\_\_ Clinical Instructor: \_\_\_\_\_

Criteria	Evaluation					
	N/A	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Staff had a clear directive on our clinical learning expectations						
2. Staff were receptive to students in the clinical facility						
3. Staff demonstrated interest in providing students with opportunities to increase learning						
4. Staff was helpful in identifying learning opportunities for students						
5. Staff showed willingness to serve as mentors to students						
6. Staff criticisms were constructive						
7. Information in morning report and during rounds was relevant						
8. Departments other than nursing were helpful in providing learning opportunities for students						
9. Orientation to the clinical facility and unit was adequate						
10. Supplies and services were readily available for client care						
11. Procedure, policy manuals, library, references were available to support clinical learning						
12. I felt like I was an important element in the delivery of care						
13. Clinical facility provided an opportunity to put theory into practice						

14. Clinical activities were challenging and appropriate to my level of study						
15. The lecturers formed part of the team that facilitated our clinical learning						

What did you find most helpful about the clinical facility?

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What did you find least helpful about the clinical facility?

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Which areas of improvement would you suggest?

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## Annex 4: Module Evaluation

**Name of institution:** \_\_\_\_\_

Module Title: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

Criteria	Evaluation					
	N/A	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The course objectives were clear						
2. The course was well organized						
3. The content was logically sequenced						
4. The course syllabus contributed to my professional development						
5. The required textbooks and readings helped to achieve course objectives						
6. The physical environment and resources were conducive to learning						
7. Library references were appropriate and current						
8. Library references were available						
9. Adequate time was allowed for coverage of each component						
10. The course outcomes were met						
11. The course was meaningful for my professional development						
12. The course provided intellectual challenge						
13. Feedback on assessments was provided on time						
14. Feedback was constructive						
<b>CLINICAL ASPECT (Do not complete this section if this is a non-clinical module)</b>						



1. The module had clear clinical learning outcomes to be achieved						
2. The clinical facilities provided rich learning experiences						
3. Support in the clinical facilities was adequate						
4. Clinical staff had a clear understanding of our clinical learning needs						
<b>THE LECTURER</b>						
5. The lecturer was approachable						
6. The lecturer gave clear and easy explanations to follow						
7. The lecturer encouraged participation						
8. The lecturer was always well prepared for sessions						
9. The lecturer served as a resource person where there was a need						
10. The lecturer explained concepts clearly						

What did you find most helpful about the course?

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What did you find least helpful about the course?

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Which areas in the course need improvement?

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## Annex 5: Sample timetable for Year 3 Semester One

The semester that might be difficult to handle is one with three clinical modules. An example is the first semester of the third year of the integrated nursing and midwifery curriculum. In sample below, the learner can still have 12 days of leave before beginning the next semester in March. The 18 weeks are actually required for that semester.

No	Course Instructor	Module Code	Module Title	ST	CV
1			Normal pregnancy and antenatal care (theory)	C	3
2			Normal pregnancy and antenatal care (Clinical)	C	3
3			Neonatal Nursing (theory)	C	3
4			Neonatal Nursing (clinical)	C	3
5			Normal labour (theory)	C	3
6			Normal labour (clinical)	C	3
	<b>Total</b>				<b>18</b>

Six courses of three credits each = 1

## WEEK 1 (1st October to 7 October)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>	Neonatal nursing (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>	Normal labour (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

(Total 10 hours each for the weeks= 10, four hours each for 16 weeks=64, Total number of theory hours =74 instead of 45. Hence enough time to play with.)

## WEEK 2 (8th October to 14 October)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC(T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 3 (15th October to 21st October)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00-10:00	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
10:00-12:00				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
13:00-15:00				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 4 (22nd October to 28th October)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00-10:00	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
10:00-12:00				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
13:00-15:00				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 5 (29th October to 4th November)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 6 (5th November to 11th November)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 7 (12th November to 18th November)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 8 (19th November to 25th November)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 9 (26th November to 2nd December)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 10 (3rd December to 9th December)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 11 (10th December to 16 December)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 12 (17th December to 19th December)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer



## WEEK 13 (6th January to 14 January)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 14 (15th January to 21 January)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 15 (22nd January to 27 January)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 16 (28th January to 3rd February)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>8:00-10:00</b>	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
<b>10:00-12:00</b>				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
<b>13:00-15:00</b>				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

## WEEK 17 (4th February to 10th February)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00-10:00	Normal pregnancy & ANC Clinical 07:00- 15:00	Normal labour Clinical 07:00- 15:00	Neonatal nursing Clinical 07:00- 15:00	Neonatal nursing (T) Title of lecture Lecturer	Normal pregnancy & ANC (T) Title of lecture Lecturer
10:00-12:00				Normal labour (T) Title of lecture Lecturer	Neonatal nursing (T) Title of lecture Lecturer
13:00-15:00				Normal pregnancy & ANC (T) Title of lecture Lecturer	Normal labour (T) Title of lecture Lecturer

(Hence, 8 hours per week multiplied by 16 weeks of clinical experience + 128 instead of 135 which is one credit of clinical hours = 45 hours. This is manageable)

## WEEK 18 (11th February to 17th February)

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00-10:00	Normal pregnancy & ANC  Clinical Examinations	Normal labour Clinical Examinations	Neonatal nursing Clinical Examinations	Neonatal nursing (T)  Title of lecture Lecturer	Normal pregnancy & ANC (T)  Title of lecture Lecturer
10:00-12:00				Examinations	Examinations
13:00-15:00				Examinations	Examinations

# Notes

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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