

Qualification Comparability Document

Information provided by the Nursing Council of Kenya in reference to Diploma Programme of Midwifery.

**PROGRAMME
REQUISITES.
DIPLOMA PROGRAM –
KENYA REGISTERED
MIDWIFE BASIC
PROGRAM**

Criteria:	Criteria Met? (please tick)	
	YES	NO
Midwives must complete a minimum of 4800 hours over the programme of which a: <ul style="list-style-type: none"> • Minimum of 2400 hours must be in midwifery practice • Minimum of 1920 hours must be in midwifery theory. 	Minimum midwifery theory hours is 1350 Minimum midwifery practical / teaching hours is 2790 .	

THEORY CONTENT

Professional and cultural frameworks for midwifery practice including:		
Criteria:	Evidence:	Comment:
a) history and professional organization of midwifery	Professionalism in Midwifery	Core concepts in midwifery: Definitions; Scope of midwifery; history of midwifery; factors influencing midwifery education and practice; roles and responsibilities of midwives; emerging issues in midwifery.
b) midwifery partnership	Professionalism in Midwifery	Midwifery regulatory and professional bodies: ICM; National Midwifery Council; Midwifery Association of Kenya; other relevant professional bodies. • el.
c) cultural competence	<ul style="list-style-type: none"> • Medical Sociology and Anthropology • Community Midwifery 	<ul style="list-style-type: none"> • social-cultural aspects of health and illness • Cultural traditions surrounding pregnancy
d) roles of midwives including midwifery scope	Professionalism in Midwifery	Core concepts in midwifery: Definitions; Scope of

of practice		midwifery; history of midwifery; factors influencing midwifery education and practice; roles and responsibilities of midwives; emerging issues in midwifery Scope roles is covered separately in scope of practice document
e) professional relationships	Professionalism in Midwifery	Midwifery model of care and midwifery practice: Multidisciplinary approach to care; teamwork and collaboration; challenges for professional midwifery.
f) reflective practice	Professionalism in Midwifery	Critical thinking in midwifery: Concept of critical thinking; significance of critical thinking in midwifery care; critical thinking process; clinical reasoning; problem solving in midwifery practice.
Anatomy and physiology including:		
Criteria:	Evidence:	Comment:
a) foundational	<ul style="list-style-type: none"> Human Anatomy and Physiology 	Introduction to anatomy and physiology: definition of terms; life characteristics; homeostasis; directional terms; planes.
b) general systems and an applied course	<ul style="list-style-type: none"> Human Anatomy and Physiology 	The human cell ,Integumentary system, Musculoskeletal system Nervous system, Special senses, Endocrine system,Hematological system,. Cardiovascular system, Lymphatic system , Gastro-intestinal system, Respiratory system: Urinary system, Reproductive system ,Embryology.
c) physiology of pregnancy, labour, birth and postnatal care	<ul style="list-style-type: none"> -Preconception care -Normal Pregnancy 	<ul style="list-style-type: none"> -Introduction to preconception Care, Health Assessment, Recognition and reduction of risk factors ,Pre-existing conditions and risk factors , Screening -Reproductive anatomy and physiology ,Conception and pregnancy, Change and adaptation in pregnancy, Antenatal health assessment, Maternal and newborn health: Healthful living in pregnancy, Women at risk and/or special needs, Structured Childbirth education

	<p>-Normal labour and birth</p> <p>-Normal Puerperium</p> <p>- The Normal Newborn.</p>	<p>-Concepts in labour, onset of labour, admission of woman in labour, first stage of labour:, Second stage of labour ,third stage of labour, Fourth stage.</p> <p>- Physiological and psychological changes in puerperium , Management of puerperium:.</p> <p>Targeted post-natal care, Lactation and breastfeeding. Physiological changes , Immediate care of the newborn, Essential newborn care.</p>
Communication skills including:		
Criteria:	Evidence:	Comment:
a) working with grief and loss	<ul style="list-style-type: none"> • Communication and Counseling • Fundamentals of midwifery 	<p>Concepts in communication and communication process, therapeutic communication techniques, counseling process and techniques, Public relation</p> <p>Grief and bereavement: grieving process; death; end of life care.</p>
b) managing conflict	Leadership and Management	Conflict and conflict resolution covered in managerial roles, management skills, management approaches.
c) consultation and referral	Fundamentals of midwifery	Admission, discharge and referral process
d) giving and receiving feedback	Communication and Counseling	Concepts in communication and communication process, therapeutic communication techniques,

e) supervising others and delegating tasks	Leadership and Management	Management functions, principles of management Ward management assessment practical assessment
f) adult learning and teaching	Curriculum and Instruction in Midwifery Educational Psychology	Teaching and Learning Learning process, Clinical teaching, Evaluation of learning, Curriculum development.
Midwifery assessment skills including:		
Criteria:	Evidence:	Comment:
a) comprehensive assessment of physical, social, cultural, emotional & spiritual dimensions	Health Assessment	Health Interview and history taking, Physical examination.
b) screening and diagnostic tools	Health Assessment	Diagnostic procedures
Woman's health and health promotion including:		
Criteria:	Evidence:	Comment:
a) sexual health	<ul style="list-style-type: none"> • Gender, Sexual and Reproductive Health • Family Planning and Contraceptive Technology • Gynecology 	<p>Introduction to SRH, Human Sexuality, Adolescent and Youth Sexual Reproductive Health, Youth Friendly Services (YFS), Sexual dysfunctions , Sexual deviations, Sexual Reproductive Health Rights.</p> <p>Methods of family planning, contraceptive methods and technologies</p> <p>Gynecological screening, management of various gynecological conditions</p>
b) pre-conceptual care	Preconception Care	Introduction to preconception Care, Health Assessment, Recognition and reduction of risk factors, Pre-existing conditions and risk factors, Screening.
c) Nutrition for pregnancy, birth and lactation.	Maternal and Infant Nutrition	Nutritional status assessment, Nutrition along the reproductive health lifecycle, Breastfeeding and breastfeeding difficulties,

		Replacement & complementary feeding
d) family violence	Gender, Sexual and Reproductive Health	Gender based violence, types and management. Female genital mutilation Preventive strategies
e) screening programmes	<ul style="list-style-type: none"> Health assessment 	<ul style="list-style-type: none"> Client assessment Gynecological assessment and screening
f) immunization	Public Health for Midwives	definition of terms ,Immunity , vaccines; types, composition, vaccines national immunization schedule; immunization in pregnancy; Vaccination in HIV infection, Immunization safety, adverse events following immunizations (AEFIs), cold chain, Adverse Events Following Immunization, Target population for Immunization and immunization coverage policy and standards; missed opportunities for immunization.
g) sociology	Medical Sociology and Anthropology	Sociology: Definitions; basic principles of sociology; socialization; social change, social-cultural aspects of health and illness; groups and group formation; social institutions.
Breastfeeding including:	Maternal and Infant Nutrition	Breastfeeding and breastfeeding difficulties
baby friendly policies	Maternal and Infant Nutrition	Exclusive breastfeeding
Complexity in pregnancy, labour, birth and the postnatal period including:		
Criteria:	Evidence:	Comment:
a) Pathophysiology of pregnancy, labour, birth and the postnatal period	<p>Complications in Pregnancy</p> <p>Complications in Labour and Birth</p>	<p>-Minor disorders of pregnancy, Major disorders of pregnancy.</p> <p>-Complications in labour, Malpresentation and malposition's, Assisted births and obstetric operations,Obstetric emergencies</p>

	-Complications of puerperium	- Minor complications in puerperium , Major complications of puerperium ,Perinatal loss ,Breast complications.
b) complications including underlying medical conditions and maternal mental health	<ul style="list-style-type: none"> • Complications in Pregnancy 	Medical, surgical and obstetric complications during pregnancy, management
c) emergencies in childbirth	<ul style="list-style-type: none"> • Complications in Labour/ Childbirth 	Malpresentations, malpositions, assisted births, other obstetric complications
Newborn and infant care including:		
Criteria:	Evidence:	Comment:
a) assessment and	<ul style="list-style-type: none"> • Normal Newborn 	Physiological changes, Immediate care of the newborn, Essential newborn care.
b) care of sick newborn	<ul style="list-style-type: none"> • Complications of the Newborn 	Respiratory disorders, neonatal resuscitation, birth injuries, high risk newborn, newborn babies with special needs, congenital abnormalities
Pharmacology including:	Pharmacology for Midwifery Practice	Introduction to pharmacology, Pharmacokinetics, Pharmacodynamics: Commonly used drugs, Drugs used in peripartum
a) management and administration of medication	Fundamentals of Midwifery	Drug administration procedures, routes, drug storage
Research skills including:		
a) evidence-based practice	Midwifery Research Biostatistics	Concepts in research, research process, research proposal development Concepts in biostatistics and statistical data analysis
b) best practice guidelines	Midwifery Research	Evidence Based Midwifery and Reproductive Health Care: definition; rationale; sources of evidence for midwifery practice; levels of scientific evidence, role of the midwife.

**MIDWIFERY
PRACTICE**

The midwifery practice must include:

Criteria:	Evidence:	Comment:
Follow-throughs of women and babies across the scope (prenatal, labour and postnatal)	Clinical placements done in antenatal clinic, antenatal ward, labour ward and postnatal ward	Antenatal clinic – 240 hours Antenatal ward-120 hours Labour ward- 540 hours Post natal ward- 180 hours
Home birth (if not possible, discussion of homebirth and its differences from hospital based maternity services)	covered in community midwifery	Follow up clients in the community with complicated pregnancy.
Placements with case loading midwives.		
Placements in maternity units (may include some gynecological assessment units or paediatric or gynecology wards)	Gynecology ward placement and new born unit placement done	Placement in Gynecology ward takes 180 hours Gynecology clinics takes 60 weeks
Placements in relation to the newborn requiring additional care	new born unit placement done	Placement in newborn unit takes 300 hours
Placements in community maternity/primary health services e.g. pregnancy and parenting classes; well child clinics and home visiting; family planning clinics; women's health clinics; refugee clinics; prison	Community midwifery, family planning and gender based violence (GBV)	-Community midwifery takes 120 hours -family planning takes 120 hours -gender based violence (GBV) counseling center placements takes 30 hours

visits; maternal mental health services	counseling center placements done.	Psychiatry placements takes 60 hours
Reflective practice tutorials/debriefs, writing, logs/journaling	Research done , reflective and academic writings done	-Reflections done every clinical rotation to include Concepts, significance, examples of reflective practice in midwifery care and application (midwifery care study). -Research done to the proposal level.
Clinical tutorials	Teaching Methodology covered.	Teaching and Learning, Clinical teaching: Evaluation of learning, Curriculum development ,Mentorship
Clinical assessments	Clinical assessments done	Checklist available for the clinical assessments.

Simulation to a maximum of 240 hours per programme.	Skills lab	Skills lab takes 255 hours
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SKILLS		
The programme must include the following skills:		
Criteria:	Evidence:	Comment:
A. Antenatal assessment (minimum of 100 assessments must be completed)	Comprehensive management of a pregnant mother is done assessment done.	One (1) summative Assessment done with several antenatal competencies captured in the assessment tool.
Assessment, monitoring and interpretation of fetal heart patterns using a pinard, ultrasound and cardiotocograph equipment and intermittent auscultation	vital signs taking Demonstrates correct and safe use of instruments and equipment	Awarded 2 marks Awarded 6 marks
Vaginal assessment	Complete and accurate Pelvic examination	Awarded 7 marks
Labour assessment	Admission and orientation of a mother in labour, history taking and physical examination, Complete and accurate Pelvic examination, Utilization and interpretation of the partograph	Awarded 11 marks
Supporting woman to work with pain in labour	Provision of physical and psychological support, Provides for Companionship, hydration, nutrition, non-pharmacological comfort measures during labour	Awarded 12 marks
Perineal assessment and repair	Performs Active Management of third stage of labour: On examination of the birth canal	Awarded 11 marks
B. Postnatal assessment of baby , including auscultation of heart sounds and discharge examination	Identity and interpret needs of the patients ,take appropriate action, Relate and consult with relevant team members	Awarded 8 marks

Breastfeeding initiation and ongoing support	Continued care of the newborn including breastfeeding	Awarded 2 marks
Consultation/ referral to another health professional		
Emergencies of childbirth including: a) management of post-partum haemorrhage b) undiagnosed breech c) shoulder dystocia d) eclampsia e) retained placenta f) neonatal resuscitation g) adult resuscitation h) Pre and Post-operative care	Knowledge of obstetric complications and Specific management of obstetric complications	Awarded 4 marks