# Diploma In Midwifery Curriculum Document 2012



**Bangladesh Nursing Council** 

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## 1. Introduction

The Diploma in Midwifery is an integral part of the strategic direction of the Bangladesh Government to increase the midwifery workforce and decrease maternal and infant mortality and morbidity in Bangladesh. The Government has endorsed the strategic direction for enhancing the contribution of nurse-midwives for midwifery services to contribute to the attainment of the Millennium Development Goals (MGDs) 4 and 5. It is imperative that if Bangladesh is to meet these goals the country has a skilled, competent midwifery workforce to provide quality maternal and newborn health care as and when needed. Millennium Development Goals 4 and 5 have specific indicators to be met by 2015. MDG 4 has as its focus the reduction of child mortality, while MDG 5 seeks to improve maternal health, and reduce maternal mortality. Bangladesh seeks to reduce its maternal mortality ratio from 193 per 100, 000<sup>1</sup> and the newborn mortality rate of 50/1000 births <sup>2</sup> if it is to reach the targets of the MDGs 4 and 5 by 2015.

The first part of the strategic direction was an initiative by the Bangladesh Government in 2010 to provide a Post-Basic Midwifery Certificate. This was in recognition that midwives and a midwifery service are integral to the achievement of MDG 4 and  $5^3$ . The next step in the strategic direction is the 3 year Diploma of Midwifery.

Bangladesh Nursing Council (BNC) developed this midwifery curriculum with technical assistance from the World Health Organization (WHO). The curriculum is informed by the International Confederation of Midwives' (ICM) Standards for Education and it prepares midwives to meet the ICM competencies for practice.

<sup>&</sup>lt;sup>1</sup>Streatfield, P., Arifeen, S., Al-sabir, A., & Jamil, K. (2010). Bangladesh Maternal Mortality and Health Care Survey (2010) Retrieved September 6<sup>th</sup>, 2011, from http://www.dghs.gov.bd/dmdocuments/BMMS\_2010.pdf

<sup>&</sup>lt;sup>2</sup>National Institute of Population Research and Training (NIPORT) (2007). Bangladesh Demographics and Health Survey 2007. Retrieved January 4<sup>th</sup>, 2010, from

http://www.measuredhs.com/pubs/pdf/FR207/FR207%5BApril-10-2009%5D.pdf

<sup>&</sup>lt;sup>3</sup> United Nations News Centre (2008). UN-endorsed initiative to train midwives could save hundreds of thousands of lives. Retrieved January 4<sup>th</sup>, 2010, from

http://www.un.org/apps/news/story.asp?NewsID=28150&Cr=UNFPA&Cr1=

Therefore, the curriculum aims to prepare midwives to practice autonomously across the scope of midwifery practice.

These midwives will have expertise in normal pregnancy, birth and postnatal and will recognise when things deviate from the normal. They will appropriately advocate, consult with and refer to obstetricians or other medical doctors. Additionally, these midwives will be competent in a number of skills that are not in the midwifery scope of practice in which a midwife, either through delegated responsibility or an emergency situation, needs to be competent. These midwives will provide highly skilled midwifery care to women and newborns, and will further enable the attainment of Millennium Goals 4 and 5 for women and their children in Bangladesh.

## 2. Description of the programme

#### 2.1 Title of the Programme

Diploma in Midwifery

#### 2.2 Duration of Training

The duration of the Diploma in Midwifery is three years

#### 2.3 Qualification Awarded

Diploma will be awarded by Bangladesh Nursing Council Diploma in Midwifery

### 2.4 Licensure by Bangladesh Nursing Council

Licence to practice as a Registered Midwife in Bangladesh

## 3. Philosophy

The Bangladesh Nursing Council and its members espouse certain beliefs about women, maternity experience, the midwife, midwifery professionalism, and leadership, as well as health including reproductive health, and the teaching and learning of midwifery. These beliefs underpin this curriculum and programme.



#### Figure One: Philosophy of Midwifery Curriculum

#### 3.1 The woman

The woman is at the centre of midwifery practice. This places the emphasis on the important person, the woman, and it ensures that midwifery care is carried out in a way in which the woman is a priority and is empowered. The midwife advocates for women in a number of areas including reproductive health and rights. The woman is recognised as a unique being within the context of her family and community, and is respected and treated with dignity.

#### **3.2** The maternity experience.

The maternity experience is a term that refers to the process of pregnancy, labour, birth and the first six weeks after birth. The maternity experience is a normal life event. The woman and the midwife work together to ensure an optimal outcome, and when complications arise medical help is accessed. Factors that impact on the maternity experience for a woman and her family (e.g. environmental, socio-economic and cultural influences) are recognised as integral to the provision of quality midwifery care.

#### 3.3 The midwife

The midwife works in partnership with the woman and her family throughout the maternity experience. The midwife is someone who has completed a recognized educational programme in midwifery and is licensed by the Bangladesh Nursing Council as a registered midwife.

The Bangladesh Nursing Council and Midwifery Society accept the International Confederation of Midwives' definition of a midwife (2011):

A midwife is a person who has successfully completed a midwifery education programme that is duly recognized in the country where it is located and that is based on the ICM Essential Competencies for Basic Midwifery Practice and the framework of the ICM Global Standards for Midwifery Education; who has acquired the requisite qualifications to be registered and/or legally licensed to practice midwifery and use the title 'midwife'; and who demonstrates competency in the practice of midwifery.<sup>4</sup>

This curriculum recognises that the student midwife undertakes a journey through which she learns that the midwife-woman relationship is based on trust, respect and professionalism. The midwife brings her own values, beliefs and cultural background, and develops her personal and professional qualities to give optimal care. The midwife informs, counsels and empowers the woman and her family to ensure they achieve a safe and healthy pregnancy, birth and postnatal period.

<sup>&</sup>lt;sup>4</sup> International Confederation of Midwives. ICM international definition of a midwife (revised June 15<sup>th</sup> 2011). Retrieved September 2<sup>nd</sup>, 2011 from

http://www.internationalmidwives.org/Portals/5/2011/Definition%20of%20the%20Midwife%20-%202011.pdf

The midwife understands the ethical, legal and professional standards that inform midwifery practice. This means that while the midwife must acquire knowledge and skills to give safe effective care, she must do this within a scope of professionalism and woman-centred care.

The midwife must provide safe midwifery clinical service. The midwife engages actively with the woman: watching, anticipating, acting and reflecting. The midwife practices in a way that is respectful of and in accordance with the social and cultural norms of the country.

#### 3.4 Health

Health is complete physical, mental, social and spiritual wellbeing and not merely the absence of disease or infirmity. This definition of health from the World Health Organization also includes sexual reproductive health, rights, processes and functions. Implicit in this understanding of health is the right to be informed and to have access to safe, effective, affordable and acceptable methods of fertility regulation and appropriate health care services. There needs to be a provision of health care services which will enable women to go safely through pregnancy, childbirth and her reproductive life so to provide couples with the best chance of having a healthy infant<sup>5</sup>

#### 3.5 Midwifery Professionalism and Leadership

Professionalism and leadership are imperative for good midwifery practice. The midwife is "with" women throughout the childbirth experience and her reproductive life. Women have the right to access a woman-centred midwifery service which is evidence-based, competent, and clinically skilled, regulated, and meets professional standards of clinical practice.

<sup>&</sup>lt;sup>5</sup>World health Organization (website) Reproductive health. Retrieved January 4<sup>th</sup>, 2010, from <u>http://www.who.int/topics/reproductive\_health/en/</u>

Midwives have a special responsibility to make an impact on maternal and newborn health indicators, and to make motherhood safer for all women. To this end the professionalism of midwives and the leadership they demonstrate will contribute to achieving safer motherhood for all. The curriculum reflects a midwifery profession that is committed to promoting reproductive health, normal birth and safe effective midwifery care that is acceptable and appropriate to each woman and her family and remains flexible and responsive to changes and developments in midwifery practice.

#### 3.6 Teaching and learning in midwifery

The principles of teaching and learning in midwifery are respect, working together and support. A supportive, encouraging learning environment is considered the right of every student.

#### 3.6.1 The Student as adult learner

The student is recognised as being an adult learner with previous life experience relevant to the learning situation and is responsible for their own learning. The student is therefore involved in the learning, ensuring that the process is dynamic and interactive rather than didactic. As an adult learner the student:

- Analyses and evaluates the subject matter, engaging with it and utilising skills of critical thinking.
- Reflects on practice, constantly seeking to understand and improve skills, knowledge and communication.
- Identifies learning needs and articulates these to the teacher.
- Is proactive in seeking opportunities to ensure optimal learning.

#### **3.6.2** Role of teacher

The teacher comes with equal adult status, including expertise in the clinical practice of midwifery and teaching. The teacher is responsible for sharing expertise with the student so as to enable and empower the student to learn. Teaching and learning is focused on the development, interpretation and analysis of knowledge - not just the transmission of knowledge and skills.

The role of the teacher is to:

- Create an environment in which students can become midwives
- Enable students to understand the practice and scope of midwifery
- Assist the development of students' own practice and knowledge of midwifery

- Facilitate the development of critical thinking skills, ensuring that students can respond to problems and complications
- Encourage students to explore, understand and learn from each practice experience
- Discuss progress with students, reflecting with them on their learning, their achievements and their challenges
- Encourage students to reflect on practice
- Facilitate the student's individual learning plan/gaols/strategies and monitor practice development to assist them to meet the outcomes of the programme

#### Preparation of Lecturers:

Training of the Trainers is required to ensure that lecturers are:

- Current in their knowledge and practice of midwifery
- Able to use competency based learning methods and methods of assessment
- Competent in the knowledge and skills they will teach
- Able to use all the learning and clinical tools associated with the programme

#### **3.6.3** Teaching methods

Teaching methods are chosen to reflect the philosophical and educative focus of the programme. Narrative pedagogy (Diekelmann & Diekelmann, 2009)<sup>6</sup> underpins this curriculum as this engages teachers and students in thinking about the theory and practice of midwifery in an integrated manner. Natural 'story telling' about experiences in clinical practice facilitates the link between theory and clinical practice. Natural 'story telling' is formally incorporated into the curricular approach as this blends interpretation of narratives with aspects of enquiry-based learning. Through the reflection on, and interpretation of narratives, students recognise the uniqueness of each woman's story, explore their own beliefs and values and apply their thinking to midwifery practice. This process facilitates the link between theory and practice (Gilkison, 2011).<sup>7</sup>

<sup>&</sup>lt;sup>6</sup> Diekelmann, N., & Diekelmann, J. (2009). *Schooling, learning, teaching: Toward narrative pedagogy*. Bloomington: iUniverse.

<sup>&</sup>lt;sup>7</sup> Gilkison, A. (2011). *Implementing a narrative-centred curriculum in an undergraduate midwifery programme: A hermeneutic study* (Doctoral thesis). AUT University, Auckland.

Teaching methods which facilitate the student's seeking of evidence, critical thinking, analysis and reflection are essential to this programme. This approach ensures practice situations are explored in a way that identifies the scientific knowledge base, the skills of midwifery management, and the sense of what it is like for the woman and her family, and the contextual influences.

#### **3.6.4** Clinical Practice

Midwifery practice is complex and is requires the midwife to use knowledge from a variety of sources to achieve a positive outcome for women and their babies. Each practice situation is a unique event and often includes an array of complicating factors.

To enable midwives to work effectively within such a practice setting an educational process must have midwifery practice at the centre. The practice of midwifery can only be learnt in the environment where midwifery occurs and by undertaking actual midwifery practice. Knowledge and clinical practice can only be integrated when the students explore real practice situations. This facilitates analysis and critical thinking, along with a supportive learning environment that empowers the student to critique not only practice but also the evidence for practice. In this way the teaching and learning of midwifery practice is dynamic and interactive, as it engages the student, the woman, the midwife and the lecturer.

Hence midwifery-related practice experiences are central and fundamental elements of the curriculum. The curriculum incorporates a thread across the programme that shows structured and increasingly integrated development of practice expertise.

### 4. Scope of Midwifery Practice

Scope of practice refers to the job a midwife does; it describes her work, the nature of her work, the boundaries of her clinical practice and the referral systems which support her practice. The scope of practice for a midwife as defined by the Bangladesh Nursing Council is underpinned by the WHO SEARO Standards of Midwifery Practice for Safe Motherhood, and the International Confederation of Midwives' Scope of Practice.

#### 4.1 Scope of practice

The midwife may practice in facilities and the community by applying sound theoretical, scientific and midwifery knowledge, critical thinking, decision-making skills, a wide range of clinical skills, professionalism and leadership.

- The scope of practice of a midwife is the management of the normal physiological processes of pregnancy, labour, birth and postpartum period up to six weeks, including care of the newborn. During this time the midwife works independently with the woman and her family, providing highly skilled midwifery and women-centred care. The midwife as independent practitioner is responsible and accountable for her practice.
- The midwife has a special responsibility to make an impact on the maternal and newborn health indicators, and to make motherhood safer for all women. The midwife identifies complications and where able, she consults with and refers to medical specialists. Where there is no access to medical help the midwife will manage the complications and where necessary implement life-saving emergency measures, as per delegated authority.

• The midwife's scope of practice will include, but is not limited to, skills and prescription of drugs in relation to complications as per the delegated authority such as: midwifery management and referral of low birth weight and preterm babies, newborn resuscitation, manual removal of placenta, insertion of intravenous cannulars, repair of perineal lacerations, and administration of emergency drugs such as oxytocins, misoprostol, and magnesium sulphate.

- All midwives are teachers, and they have an important professional role within their scope of practice to pass on their knowledge and skills. The teaching of midwifery in both the classroom and clinical areas (including the supervision of midwives) is carried out in a collegial and supportive way to ensure a professional and skilled midwifery workforce.
- Midwives have an important task in education and the promotion of health for the woman, her family and the community. The midwife has a responsibility to inform the woman in relation to all aspects of her care, and to advocate for women. The midwife also has skills and provides education in the areas of sexual reproductive health, pre-conception, antenatal, postnatal, breastfeeding, family planning, infant health, and other relevant areas of women's health.

## 5. Curriculum goal, objective and expected outcomes

#### 5.1 Curriculum goal

The goal of this programme is to provide optimal learning opportunities for the purpose of preparing midwives of the highest calibre who will function autonomously within the competencies and scope of Midwifery practice as defined by the Bangladesh Nursing Council.

#### 5.2 Curriculum Objectives

At the end of the programme, the midwife will:

# 5.2.1 Competently care for women through the normal childbirth experience demonstrating:

- Safe, competent and autonomous midwifery care within the scope of practice during antenatal, intrapartum and postpartum period.
- Conduct of normal deliveries including appropriate monitoring, intervention and referral.
- Screening, monitoring and recognising early signs of obstetric complications.
- Appropriate referral and working collaboratively with doctors when things are no longer normal
- Essential newborn care involving the family and manage the newborn appropriately: competently resuscitate if required, care for unwell baby, and refer as needed.
- Competent management of obstetric and neonatal emergencies and enlist medical help where available.

#### 5.2.2 Provide women-centred midwifery care through:

- Practicing midwifery in partnership with women and their families
- Promoting a positive childbirth experience for women
- Ensuring the woman is the focus of care
- Providing information to the woman and family so they can make informed choices

- Being 'with' the woman throughout the childbirth experience
- Ensuring midwifery care is acceptable and accessible to the woman and family
- Being kind and respectful to the woman and her family

# 5.2.3 Have a comprehensive knowledge base and be able to demonstrate knowledge that:

- Underpins midwifery clinical practice and includes research, science and evidence
- Informs sound clinical judgment and effective technical skills
- Leads to critical thinking in clinical practice
- Facilitates decision-making and anticipatory thinking
- Enables reflection and evaluation of clinical practice

#### 5.2.4 Maintain professionalism in the delivery of midwifery services by:

- Demonstrating accountability, and effectively communicating with women, their families and other professionals.
- Providing an accurate, concise professional record of all clinical events the midwife is involved with.
- Practising midwifery collaboratively with other health care workers at all times, and particularly where there are complications of childbirth
- Advocating for women and their needs and rights within the health service
- Promoting and maintaining ethical, legal and professional midwifery standards.
- Providing midwifery leadership, supervision and education
- Using appropriate strategies to promote and enhance the role of the midwife within the health services and society

## 6. Curriculum Framework

The curriculum is designed to ensure progressive accumulation of midwifery knowledge and skills across the programme. Courses are sequenced so the learning process and content moves progressively from simple to complex, normal to abnormal and uncomplicated to complicated. This progression of learning leads to the acquisition and demonstration of the knowledge and skills necessary for meeting the competencies for midwifery practice required by the Bangladesh Nursing Council. The programme ends with consolidation and integration of all that has been learned to ensure the midwife is competent across the scope of midwifery practice.



Figure 2. The curriculum framework

- 6.1 The curriculum is developed around six pillars (standards) for midwifery practice. These are:
  - Professionalism and Leadership
  - Partnership
  - Knowledge
  - Critical thinking
  - Decision making
  - Competence in Clinical Skills

These midwifery practice pillars (standards) are sequenced in a progressive way over the entire programme and are assessed in the classroom and clinical setting. Each course identifies specific learning outcomes, content and context, within which these practice standards are developed, taught and assessed. The practice pillars (standards) are developed in a way that they are appropriate for the stage and year of the programme. These practice pillars (standards) will ensure that the students meet the Bangladesh Nursing Council competencies for practice and international competencies for practice.

6.1.1 Professionalism and Leadership: Legal, ethical, theoretical, clinical standards and competencies for midwifery practice provide a framework for the midwifery profession and for the practice of each midwife. Midwifery professionalism in this curriculum also includes communication, accountability, advocacy, and assertiveness. Inherent to professionalism in midwifery is leadership which is about influencing, supporting, advocating for, empowering and educating others. It is not about power or coercion, rather it is a leadership model based on partnership and collaboration. A midwifery leader will work to bring about change, as effective leadership is the essential ingredient for positive social change. Midwifery leaders will seek to advance midwifery care. To be a midwifery leader requires good communication skills, vision and courage to advocate for and promote midwifery as essential services for women and their newborn. A midwifery leader also has management skills for effective delivery of midwifery services.

#### 6.1.2 Partnership

Partnership is at the heart of this curriculum as this describes the relationship between the midwife and the woman. Midwives work in partnership with the woman and her family and this relationship is characterized by trust and shared responsibility. Midwifery care takes place in partnership, which means the woman is encouraged to actively participate in her care. The woman and her family's needs and wishes are respected, as are the knowledge, experience and skills of the midwife.

- **6.1.3 Knowledge:** Midwifery has a specific body of knowledge in relation to pregnancy, intra partum and postnatal including the newborn. This includes reproductive health and rights. In this curriculum the midwifery knowledge that is taught covers both the art and science of midwifery and is evidence and research-based.
- **6.1.4 Critical Thinking:** Critical thinking is the linking of theory to practice, assessment to planning and information to action. Critical thinking involves analysis, anticipatory thinking, and the ability to synthesize information and evidence so as to act appropriately and in a timely way. In this curriculum the "what and why" questioning of clinical practice will initially facilitate critical thinking. In the latter part of the curriculum it is expected that students will readily question and link theory to clinical practice, demonstrate anticipatory thinking and act accordingly.
- **6.1.5 Decision-Making:** Making safe decisions and developing sound professional and clinical judgment (about what has been, what is now and what may/could happen next) is at the heart of good midwifery practice. Therefore the process of decision-making in this curriculum follows a problem-solving framework.

The Midwifery Process and Management framework:

- Assess and identify actual or potential problems
- Develop a plan of care
- Implement plan of care within an appropriate time frame, document, and update as necessary
- Evaluate the effectiveness (at this point, return to first step to gather more information if necessary)
- **6.1.6 Competence in Clinical Skills.** A clinical skill is a task, which is performed to a specific level of competency. Midwifery has a set of clinical skills within the midwife's scope of practice and these clinical skills are taught, learnt, practised and assessed in this curriculum.

These practice pillars (standards) are organized in a progressive way throughout the programme (see section 10) and will be assessed in clinical practice, laboratory/skill practice and classroom settings. In midwifery practice these pillars (standards) of practice are not separate, but to enable the student to cope with the complex nature of midwifery they are addressed separately in the early stages of the programme. As the programme advances, the six processes are increasingly integrated, and this will ensure a highly skilled midwife graduate, providing a workforce that will meet the National and International Midwifery Competencies for Practice.

## 7. Midwifery Competencies for Practice

The Competencies for Midwifery Practice as agreed to by the Bangladesh Nursing Council are informed by:

- 1) The description of a professional midwife in Bangladesh (BNC 1994)<sup>8</sup>
- 2) SEARO Standards for Midwifery Practice for Safe Motherhood<sup>9</sup> and the competencies of the International Confederation of Midwives<sup>10</sup>

#### The midwife will:

- a) Have the requisite knowledge and skills from obstetrics, neonatology, the social sciences, public health and ethics that form the basis of high quality, culturally relevant, appropriate care for women, newborns, and childbearing families.
- b) Provide high quality, culturally sensitive health education and services to all in the community in order to promote healthy family life, planned pregnancies and positive parenting.
- c) Provide high quality antenatal care and monitoring to maximise health during pregnancy. This involves early detection and treatment or referral of selected complications.
- d) Provide high quality, culturally sensitive care during labour. Midwives conduct a clean and safe birth, and handle selected emergency situations to maxize the health of the women and their newborns.
- e) Provide comprehensive, high quality, culturally sensitive postnatal care for women.
- f) Provide high quality, comprehensive care for the essentially health infant from birth to two months.
- g) Provide a range of individualized, culturally sensitive menstrual regulation services for women requiring or experiencing pregnancy termination or loss that are congruent with applicable laws and regulations and in accord with national protocols.

<sup>&</sup>lt;sup>8</sup> Bangladesh Nursing Council (1994) Senior Registered Nurse Curriculum Midwifery,

<sup>&</sup>lt;sup>9</sup> World health Organization (1999). Standards of Midwifery practice for Safer Motherhood, Volume 1: Standards document SEARO World health Organization

<sup>&</sup>lt;sup>10</sup> International Confederation of Midwives (2011). Essential Competencies for Midwifery Practice 2010.

## 8. Curriculum Structure

The curriculum is organized in semesters. There are two semesters in a year and so a total of six semesters in three years:

	Semester 1	Semester 2					
Year 1	20 weeks (392 hours)	20 weeks (760 hours)					
Year 2	20 weeks (760 hours)	20 weeks (760 hours)					
Year 3	20 weeks (760 hours)	20 weeks (760 hours)					
	Total weeks =	120 weeks					
	<b>Total Hours</b>	4192					

#### 8.1 Organization of the course

The course is three years in length:

- The course is organised in Semesters of 20 weeks for theory and practice and two weeks for both midterm an final examinations and assessments a total of 24 weeks a semester.
- The theory weeks are calculated on six hours a day of teaching and study and the clinical weeks on eight hours a day of clinical practice.
- There are six semesters in the three-year programme.
- The total programme hours are 4192
- This is compromised of 1684 hours of theory and 2508 hours of clinical.
- The students will be in theory or clinical Saturday Thursday
- Friday will be the day off.

:

Year One Semest	er One	Year One Semester Two							
Course	Hours (classroom, laboratory, practice)	Course	Hours (classroom, laboratory, practice)						
Social Science	(32/0/0)	Fundamentals of Midwifery	(120/40/0)						
Psychology of Human Behaviours	(32/0/0)	Professional Frameworks	(100/0/0)						
General Biology	(32/0/0)	Normal Neonate	(50/20/80)						
English I	(32/32/0)	Biostatistics and epidemiology	(30/0/0)						
Introduction to computers	(16/0/0)								
Communication in Nursing/Midwifery	(16/32/0)								
Anatomy and Physiology	(80/32/0)	Practice Courses							
Microbiology	(40/16/0)	Midwifery Practice 1	(0/0/160)						
		Midwifery Practice 2	(0/0/160)						
Hours	(280/112)	Hours	(300/60/400)						
Total Hours	392	Total Hours	760						
Year Two Semester T	hree	Year Two Semester For	ur						
Pharmacology	(50/0/0)	The Art and Science of Midwifery II	(90/30/0)						
The Art and Science of Midwifery I	(100/20/0)	Maternal Health Problems	(90/30/60)						
Women's health and family planning	(110/20/90)	Complicated Maternity Experience I	(110/30/0)						
Research and Evidence	(80/0/80)								
English II	(30/30/0)								
Practice courses		Practice courses							
Midwifery practice 3	(0/0/150)	Midwifery Practice 4	(0/0/160)						
		Midwifery Practice 5	(0/0/160)						
Hours	(370/70/320)	Hours	(290/90/380)						
Total Hours	760	Total Hours	760						

## 8.2 Structure of the Programme

Year Three Semest	er Five	Year Three Semester Six					
Course	Hours (classroom, laboratory, practice)	Course	Hours (classroom, laboratory, practice)				
Complicated maternity experience II	(140/40/0)	Complexities of maternity experience	(140/20/0)				
Managing Newborn problems	(100/40/40)	Transition to Registered Midwifery practice	(80/20/100)				
Practice Courses		Practice Courses					
Midwifery Practice 6	(0/0/200)	Midwifery Practicum I	(0/0/200)				
Midwifery Practice 7	(0/0/200)	Midwifery Practicum 11	(0/0/200)				
Hours	(240/80/440)	Hours	(220/40/500)				
Total Hours	760	Total Hours	760				

## 8.3 Summary of Structure of Programme

Year	Semester	Theory hours	Lab hours	Practice hours	Total
1st	One	280	112	000	392
	Two	300	60	400	760
2nd	Three	370	70	320	760
	Four	290	90	380	760
3rd	Five	240	80	440	760
	Six	220	40	500	760
Total		1700	452	2040	4192

Total theory hours	1700 =40%
Total practice hours	2492 =60%
Total hours	4192

Year One	Т	Т	_				7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
		1	Т	Т	Т	Т	Т	Т	Т	Т	Midterm	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Assessment weeks	School Leave
																ī							
Semester 2																							
Sem/wk	1	2	3	4	5	6	7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
Year One	Т	Т	Т	Р	Р	Т	Т	Т	Р	Р	Midterm	Р	Т	Т	Т	Р	Р	Р	Р	Р	Р	Assessment weeks	School Leave
Semester 3																							
Sem/wk	1	2	3	4	5	6	7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
Year two	Т	Т	Т	Р	Р	Т	Т	Т	Т	Т	Midterm	Т	Р	Р	Т	Т	Т	Т	Т	Р	Р	Assessment weeks	School Leave
									·														
Semester 4																							
Sem/wk	1	2	3	4	5	6	7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
Year two	Т	Т	Р	Т	Т	Т	Р	Р	Р	Р	Midterm	Т	Т	Р	Р	Т	Т	Р	Р	Т	T/P	Assessment weeks	School Leave
Semester 5																							
Sem/wk	1	2	3	4	5	6	7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
Year three	Т	Т	Р	Р	Р	Р	Р	Т	Т	Р	Midterm	Р	Р	Р	Т	Т	Т	Т	Р	Р	Т	Assessment weeks	School Leave
Semester 6	1		2	4	~			0	0	10	11 12	10	14	1.5	16	17	10	10	20	01	22	00 101	05 105
	1	2	3	4	5	6	7	8	9	10	11 12	13	14	15	16	17	18	19	20	21	22	23 and 24	25 and 26
Year Three	Т	Т	Р	Р	Р	Р	Р	Т	Т	Р	Midterm	Р	Р	Р	Р	Р	Т	Т	Т	Т	Р	Assessment weeks	School Leave

## 9 Theory (T) (includes Laboratory) Practice (P) Master plan

#### 9.1 Courses' Master Plan

The following Master Plan has only the classroom teaching theory (including laboratory) and clinical practice hours. It does not include library, student individual learning or other student activities. E.g. Art and Science I: 90 hours classroom 30 hours library and other student activities

Year One Semester one										
Courses										
SSPHB = Social Science and Psychology of Human Behaviors, CP= Chemistry and Physics, GBM General Biology and Microbiology, E1= English 1, IC= Introduction to computers, FM= Fundamentals of Midwifery, CM = Communication in Midwifery, AP= Anatomy and Physiology, NNS= Nutrition and Nutritional Support										
Hours SSPHB 64, CP 56, GBM 88, E1-124, IC 46, CM 48, AP112, NNS 56. = 594 hours										
Theory (including laboratory) 1 day = 6 hours,										
Practice, 1 day= 8 hours										
The courses are calculated on a five day week but where needed you can use day six (the library day) for theory or clinical debriefing day for clinical.										
Weeks (20 +4 weeks) T=Theory/Lab										
1 T 2 T 3 T 4 T 5 T 6 T 7 T 8 T 9 T 10 T 11 and 12 Midterm Exam										
13T 14T 15T 16T 17T 18T 19T 20T 21T 22T 23 and 24 Finals Exam										

Year One Semester Two	
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Courses

FM= Fundamentals of Midwifery, PF= Professional frameworks, MP1= Midwifery Practice I, MP2= Midwifery Practice 2 II, NN= Normal Neonate, BE= Biostatistics and epidemiology

Hours FM 120/40, PF 100, MP1 160, MP2 160, NN 50/20/80, BE 30.= 760 hours

Weeks (20 + 4 weeks) T=Theory/Lab, P = Practice

1T	2T	3T	4P	5P	6T	7T	8T		9P	10 P	11 and 12 Midterm Exam
FM	PF	NN	MP	21	FM	PF	F BE MF		MP1		
13P	14 T	15T	16T	17P	18P	19P		20P	21P	22P	23 and 24 Finals Exam
NN	FM	PF/ FM	NN/ FM	NN		MF	2			NN	

#### Year Two Semester Three

#### Courses

P= Pharmacology, E2 = English II, AS1= The Art and Science of Midwifery I, WH= Women's Health and Family Planning, MP3= Midwifery Practice 3, RE= Research and Evidence Based Midwifery

Hour P 50, E2 60, AS1 100/20, WH 110/20/90, MP3 150, RE 80/0/80. =760 hours

#### Weeks (20 + 4 weeks) T=Theory/Lab, P = Practice

1T	2T	3T	4P	5P	6T	7T	8T	9T	10 T	11 and 12 Midterm Exam
A	<b>S</b> 1	Р	Ν	/IP3	E2	AS 1	W	WH RE		
13T	14P	15P	16T	17T	18T	19T	20T	21P	22P	23 and 24 Final Exam
WH	WH (3 days)	/MP3	E2	Р	RE	RE/	AS1	RE	MP3	

Year Two Semester Four

Courses

AS2= The Art and Science of Midwifery II, MHP= Maternal Health Problems, CME1= Complicated Maternity Experience I, MP4 =Midwifery Practice IV, MP5= Midwifery Practice V.

Hours AS2 90/30, MHP 90/30/60, CME1- 110/30, MP4 160, MP5 160. = 760 hours.

#### Weeks (20 +4 weeks) T=Theory/Lab, P = Practice

1T	2T	3P	4T	5T	6T	7P	8P	9P	10 P	11 and 12 Midterm Exam
AS2	CME1	MP4	AS2	M	HP	MP4	MP4		MP5	
13T	14T	15P	16P	17T	18T	19 P	20P	21T	22T/P	23 and 24 Final Exam
CM	CME1 MP5		<u>.</u>	MHP		MP5	MHP	AS2	CME1/ MHP (2 days)	

#### Year Three Semester Five

Courses

CME2= Complicated Maternity Experience II, MNP= Managing Newborn Problems, MP6= Midwifery practice VI, MP7= Midwifery Practice VII.

**Hours** CME2 140/40, MNP100/40/40, MP6 200, MP7 200 = 760 hours

Weeks (20 + 4 weeks) T=Theory/Lab, P = Practice

1T	2T	3T	4P	5P	6P	7P	8T	9T	10 P	11 and 12 Midterm Exam
CME2	CME2	MNP		MP6			CME2	MNP	MNP	
13P	14P	15P	16P	17T	18T	19	T 20P	21P	22T	23 and 24 Finals Exam
MP 6	MP 6 MP7		7	CME2	N	ANP	MP7	MP7	CME2	

#### Year Three Semester Six

Courses

CME= Complexities of maternity experience, TP= Transition to Registered Midwifery Practice, MP1= Midwifery Practicum I, MP2= Midwifery Practicum II,

**Hours** CME 140/20, MP1 -200, MP2 -200, TP80/20/100 = 760hours

Weeks (20 + 4 weeks) T=Theory/Lab, P = Practice

1T	2T	3P	4P	5P	6P	7P	8T	9T	101	Р	11 and 12 Midterm Exam
CN	CME MP1			TP		TP	•				
									(6 đ	days)	
13P	14P	15P	16P	17P	18T	197	20T	21T	2	22P	23 and 24 Finals Exam
	MPII TP C			ME	CME		TP				

## 10. Development of the six midwifery pillars (standards) for practice across the curriculum

	Semester 2	Semester 3	Semester 4-5	Semester 6
Professionalism And leadership	Demonstrates ability to practice professionally and show leadership by communicating, and interacting in a professional manner with women, family and other health professionals.	Demonstrates accountability in midwifery practice through documentation and understanding boundaries of midwifery practice. Provides midwifery leadership and advocacy in a clinical situation at a beginning level.	Demonstrates an ability to act professionally and provide safe midwifery care in complicated and complex situations. Critically analyses and acts on issues related to health and well- being of the woman. Develops ability to lead in a clinical situation which requires midwife to advocate for the woman.	The professional midwife is practising in an accountable manner and communicating effectively both verbally and written across the midwifery spectrum of care. The midwife is a leader supporting, advocating, empowering and educating others.
Partnership	Demonstrates ability to form a relationship with a woman and her family establishing trust.	Demonstrates an ability to practice within the complexities of partnership.	Maintains an effective partnership when care is provided in collaboration with other health professionals.	Critically analyses the strengths and weaknesses of their own ability to achieve an effective partnership relationship. Demonstrates an ability to work in partnership with women throughout the maternity experience.
Knowledge	Applies midwifery knowledge to clinical practice.	Applies philosophical, theoretical and scientific midwifery knowledge to competently and safely care for a woman and baby.	Applies philosophical, theoretical and scientific midwifery knowledge to provide effective and safe midwifery care across the scope of midwifery practice.	Integrates theoretical, scientific and midwifery knowledge into her clinical practice.

Critical thinking	Develops ability to assess the clinical picture within the childbirth experience.	Develops ability to assess and respond to changing clinical picture within the childbirth experience.	Develops ability to assess, anticipate and respond to changing clinical picture within the childbirth experience.	Demonstrates professional judgement as a reflective practitioner thinking critically and responding appropriately to changing clinical picture.
Decision- making	Develops an understanding of how decisions are made in midwifery practice.	Demonstrates safe decision-making in midwifery practice.	Demonstrates complex decision-making skills.	Demonstrates ability to make safe and timely complex decisions.
Competence in Clinical Skills	Demonstrates competence in named practice skills.	Demonstrates competence in named practice skills and providing midwifery care within the normal maternity experience.	Competently demonstrates midwifery skills in caring safely for a mother and newborn within the complicated maternity experience. Competently assists in management of emergencies.	Competent and confident in all midwifery skills across the maternity continuum

## 11. Administration of Programme

#### **11.1 Medium of Instruction**

Bengali and English language is used as the medium of instruction. A high level of understanding of written English is required, as much of the material that the students will need to read is in academic English. The students also need to be able to write proficiently in English

#### 11.2 Admission of Students

Applicants who meet the following criteria will be eligible to enter the programme

- 1. Has Bangladesh citizenship
- 2. Has ability to understand written English and write in English
- 3. Has a Medical Certificate indicating health and physical fitness
- 4. Has achieved HSS educational qualification. Must have minimum total GPA 5 in SSC and HSC (not less than 2.50 in any level).
- 5. At least 75% of the applicants for any cadre will at age of 25 and 25% at the age of 35.

#### 11.3 Work Placement after completing Midwifery Education

Students can work only in the field of midwifery after registration.

#### 11.4 Method of selection of students

- 1. Must meet DNS admission policy, which includes written test on General Knowledge, Maths, and English.
- 2. Psychometric testing for aptitude
- 3. Interview as to suitability of candidate for midwifery

## 12. Assessments

#### Overview

The purpose of the programme is to prepare midwives of the highest calibre to function autonomously. Students in the programme will demonstrate that they meet the Bangladesh Nursing Council's and the ICM Competencies for Practice and can practice across the midwifery scope. The student is assessed in the programme against the six midwifery pillars (standards) for practice: professionalism and leadership, partnership, knowledge, critical thinking, decision making, competence in clinical skills and partnership. These practice pillars (standards) underpin and are linked to the competencies for practice and the scope of midwifery practice. In semester one through five the students will be assessed against the six pillars (standards) for midwifery practice and in semester six the student will be assessed against the National Competencies for Midwifery Practice in Bangladesh and the ICM Competencies for Midwifery Practice.

#### 12.1 The Assessments

- The clinical assessments are "excellent" "achieved" or "non-achieved" as the student either meets the standard and is competent to practice or is not.
- The examinations, presentations, case study, practice exemplars and other written material such as assignments are graded.
- There will be mid term and final assessments and exams for theory courses. The clinical and practice assessments will happen throughout the semester.

Grade	Description				
А	Excellent	80.00-100%			
В	Merit	70.00-79.99%			
С	Fair	60.00-69.99%			
D	Weak	50.00-59.99%			
F	Fail	<49.99			

The assessment matrix is as follows for year one and two:

The assessment matrix is as follows for year three:

Grade	Description			
А	Excellent	80.00-100%		
В	Merit	70.00-79.99%		
С	Fair	60.00-69.99%		
F	Fail	<59.99%		

Semester one: Students will have resits as per the nursing curriculum policy for resits. Semester two-five: Students may have a resit for two assessments per semester. Semester six: Students may have only one resit for one assessment in this semester.

If the student in Semester 6 has had an opportunity for re-sit and fails again she cannot have a re-sit unless there are extenuating circumstances. If they re-sit, the grade will not go beyond C.

#### 12.2 Methods of Assessment

Assessment in this programme will be carried out as per course schedule for classroom, laboratory practice skills and clinical:

#### Classroom

- Written Examination
- Oral Presentation/Poster Presentation

#### Laboratory practice skills

- Skills Assessment
- Objective Simulated Clinical Assessments (OSCA)
- Scenario-based practice Assessments
- Viva Voca Assessments

#### Clinical

- Clinical Assessments
- Case Studies
- Communication Assessment

#### **12.3** Required learning activities

Most of the courses in the Midwifery programme have required learning activities. The students are required to complete and take part in these activities to achieve the course. If they have not taken part in these activities and completed them they cannot pass the course.

#### 12.4 Certification/Registration

At the end of the three year programme students who have passed all the assessments in the programme of the educational institution must then pass the BNC licensing examination in order to be registered as a midwife in Bangladesh.

Courses	Assessment
Year One Semester One	
Social Science	Mid Term and Final Exam
	Written Paper and Presentation
Psychology of Human Behaviours	Mid Term and Final Exam
	Written Paper and Presentation
General Biology	Mid Term and Final Exam
	Written Paper
English I	Mid Term and Final Exam
6	Written Paper and conversation
Introduction to computers	Mid Term and Final Exam
I	Written Paper
Communication in	Final exam and Group assignment
Nursing/Midwifery	Weekly notes
Anatomy and Physiology	Mid Term and Final Exam
	Lab and Quiz
Microbiology	Mid Term and Final Exam
	Lab and written reports
Year One Semester Two	
Fundamentals of Midwifery	Final Exam
	Group presentation
Professional Frameworks	Group poster presentation
	Role play
Midwifery Practice 1	Holistic postnatal assessment
	Practice Portfolio and Practice Exemplars
Midwifery Practice 2	OSCA: Competency in antenatal assessment
	Practice Portfolio and Practice Exemplars
Normal Neonate	Clinical Examination of the neonate
	OSCA: neonatal resuscitation
Biostatistics and epidemiology	Mid Term and Final Exam
	Group presentation

#### 12.5 Assessment schedule

Year Two Semester Three	
Pharmacology	Mid Term and Final Exam
	Written Paper
En aliah H	Mid Term and Final Exam
English II	Written Paper and oral presentation
	1 1
The Art and Science of Midwifery I	Mid Term and Final Exam
	Written Assignment
Women's health and Family	OSCA physical examination of woman
Planning	Group presentation
Midwifery practice 3	Normal Labour Viva Voce
	Practice Portfolio and Practice Exemplars
Research and Evidence based	Written Assignment
Midwifery	Group presentation
Courses	Assessment
Year Two Semester Four	
The Art and Science of Midwifery	Mid Term and Final Exam
II	Case Study
Midwifery Practice 4	Viva Voce
When y I factice +	Case study
Maternal Health Problems	Mid Term and Final Exam
	Case study
Complicated Maternity Experience	Mid Term and Final Exam
	Written assignment
Midwifery Practice 5	Practice Portfolio and Practice Exemplars
When when y i factice 5	OSCA Obstetric Emergencies
Year Three Semester Five	~
Complicated maternity experience II	Mid Term and Final Exam
	Viva Voce
Managing Newborn Problems	Group presentations of scenarios of newborns
	with problems
	Clinical assessment of Newborn with problems
Midwifery Practice 6	Clinical assessment complicated labour
	Peri operative continuum clinical exercise
Midwifery Practice 7	Clinical assessment. Practice Portfolio and Practice Exemplars
Voor Three Somester Six	
Year Three Semester Six	Written Assignment
Complexities of maternity	Group Poster Presentation
experience	_
Midwifery Practicum I	Practice Portfolio
	OSCA obstetric emergencies
Midwifery Practicum II	Practice Portfolio
	OSCAs across the scope integrating critical thinking, decision making and communication
Transition to Midwifery practice	Peer teaching session
	Portfolio showing the student meets the BNC and
	ICM competencies includes exemplars
	rem competencies includes exemptais

## **13.** Course Descriptions

The Course descriptions that follow are all written with the understanding that the content that is taught is research-based and evidence-based. The content will also be underpinned by physiology and pathophysiology where appropriate. At all stages of the programme documentation of clinical events will be assessed. Referral and consultation in relation to complications and midwifery scope of practice is an integral part of the programme.

#### Year One Semester One

#### Course 1.1 Social Science. (32/0/0)

Boundaries and social matters; relationship between social science and other sciences; the influence of social structure including political and economic aspects on health care system; culture embedding in society including values, beliefs, and practices of human behaviours; social change and Bangladesh culture and its influence on health within Bangladesh community.

#### Course 1.2 Psychology of Human Behaviour. (32/0/0)

Definition; selected psychological theories explaining human behaviours including biological theories, behavioural theories, social learning theory, stress-coping theories; motivation; personality; and developmental psychology across lifespan.

#### Course 1.3 General Biology. (32/0/0)

Introduction to fundamental concepts in the biological sciences including the organization and common characteristics of living matter, cell structures and functions, food production by photosynthesis, harvesting energy, mechanisms of cell reproduction, genetics, evolutions, and human biology.

#### Course 1.4 English I. (32/32/0)

Basic grammatical structures of English and basic semantics, that is, how small changes in structure can affect the meaning of sentences; basic reading and listening techniques for constructing informal written essays and spoken English in daily life.

#### Course 1.5 Introduction to Computers. (16/0/0)

History of computing and internet; roles of computers in our society; computer terminology; computer hardware and devices; operating systems; and application programs.

#### Course 1.6 Communication in Nursing/Midwifery. (16/32/0)

Introduction to interpersonal communication in nursing; assertive and responsible communication; interpersonal and therapeutic relationship; key elements in building relationships including warmth, respect, genuineness, empathy, self-disclosure, questioning and expressing opinions; barriers to effective communication; communicating with other health care professionals; enhancing interpersonal communication skills through practice experience in consideration of professional standards.

#### Course 1.7 Anatomy and Physiology. (80/32/0)

Anatomical structure and physiological functions of human body: movement; homeostasis and metabolism of body systems including nervous system, endocrine system, cardiovascular system, respiratory system, digestive system, urinary system, reproductive system, hematologic system, sensory organs, integumentary system, and immune system.

#### Course 1.8 Microbiology. (40/16/0)

Basic microbiology, parasitology, and immunology; nature, reproduction, growth, and transmission of common microorganisms and parasites in Bangladesh; prevention including universal precaution and immunization, control, sterilization, and disinfection; and specimen collections and examination.

**<u>NOTE</u>**: Year One Semester One in Midwifery Programme comes from Nursing Diploma Curriculum, as do the additional English, Pharmacology, and Biostatistics/Epidemiology courses.

#### Year One Semester Two

#### Course 1.9 Fundamentals of Midwifery. (120/40/0)

Develops the knowledge base and skills for midwifery care related to the normal maternity experience. Midwifery care during antenatal, intrapartum and postnatal, including care of newborn, are introduced to the students. The course will also provide knowledge about anatomy and physiology related to the normal maternity experience.

#### Course 1.10 Professional Frameworks. (100/0/0)

Introduction to midwifery, the midwifery model of care, midwifery standards of practice, and the theoretical, frameworks that inform the midwifery profession both in Bangladesh and internationally. The course will explore the legal and theoretical frameworks that govern reproductive health in Bangladesh. The course will also explore the socio-economic and environmental factors that impact on maternal and newborn health in Bangladesh. In addition the course will provide knowledge and provide a foundation for the development of skills of midwifery leadership, advocacy and assertiveness.

#### Course 1.11 Normal Neonate (50/20/80)

Midwifery practice is developed to a level where the student provides safe, competent and confident midwifery care in relation to the normal neonate. Midwifery assessment and management of the newborn at and immediately after birth is taught along with examination of the newborn. This course will also develop knowledge about lactation and breastfeeding.

#### Course 1.12 Biostatistics and Epidemiology. (30/0/0)

Statistic methods of collection, analysis, and presentation of health related data and statistics; selected population statistics (e.g. birth rate, literacy rate, life expectancy); selected health related statistics (e.g. mortality and morbidity rate: incidence and prevalence); principle of epidemiology, occurrence and distribution of diseases; indicators of community health; surveillance; epidemic investigations, prevention and control of communicable and non-communicable diseases.

#### Course 1.13 Midwifery Practice 1. (0/0/160)

This course develops midwifery practice at a beginning level so students can provide safe, competent and culturally safe care within the scope of the normal maternity experience. Beginning midwifery skills and clinical assessment are developed. Midwifery practice will take place in areas in which students can safely begin to practice their skills and develop their knowledge.

#### Course 1.14 Midwifery Practice 2. (0/0/160)

Midwifery practice continues to be developed so that students can gain competence and confidence in providing safe midwifery care within the scope of normal maternity experience. Midwifery skills of clinical assessment and management are developed.

#### Year Two Semester Three

#### Course 2.1 Pharmacology. (50/0/0)

Introduction and basic principles of drug actions: pharmaceutic, pharmacokinetic, and pharmacodynamic; essential drugs; forms of drugs and preparation; action, adverse effect and its management of major drug classes including antibiotics and antiparasitics, antiinflammatory drugs, antipyretics and analgesics, drugs affecting body systems, i.e., gastrobiliary, urinary, cardiovascular, endocrine, and nervous system, anti-psychotic, antineoplastics and immunosuppressive agents.

#### Course 2.2 English II. (30/30/0)

Continuation of English I with grammatical structures of English; reading selected English literature and listening to English media. Course will involve giving English oral presentation and writing formal letters and essays.

#### Course 2.3The Art and science of Midwifery I. (100/50/0)

This course develops midwifery knowledge base and skills so to provide safe, competent and sensitive midwifery care within the scope of the normal maternity experience. The decision points for midwifery care during antenatal, intrapartum and postnatal care are further developed including tests and investigations. This course also includes Pharmacology and antenatal education.

#### **Course 2.4 Women's Health and Family Planning. (90/20/90)**

The health of women in Bangladesh is examined and explored in this course. Conditions which compromise the health of women alongside issues relating to early pregnancy, gynaecological issues and women's health screening are covered in the course. Physical assessment of the well woman is included in this course along with family planning.

#### Course 2.5 Midwifery Practice 3 (0/0/150)

Practice is further developed in this course to provide safe, competent and sensitive midwifery care within the scope of normal maternity experience. Midwifery skills and clinical assessment, management and referral are further developed.

#### Course 2.6 Research and Evidence. (80/0/80)

Examines research and evidence that informs midwifery practice and provides tools to enable students to understand, interpret, and begin to critique research.

#### Year Two Semester Four

#### Course 2.7 The Art and Science of Midwifery II. (80/30/0)

This course further develops and extends knowledge base and skills to provide safe competent and sensitive midwifery care within the scope of normal maternity experience. Midwifery assessment, management and referral alongside in-depth application of decision points for midwifery care in antenatal, intrapartum and postnatal is taught. Pharmacology is further developed and Prescribing is taught.

#### Course 2.8 Maternal Health Problems. (60/20/60)

Pathology and medical conditions that impact on women's health and can be a complicating factor in pregnancy/labour, birth and postnatal are taught in this course. Midwifery assessment, treatment, management and referral of medical conditions including pharmacology are also part of the course.

#### **Course 2.9 Complicated Maternity Experience I. (80/50/0)**

This course develops knowledge and skills in relation to complications of the maternity experience, and in particular the 'big five' causes of maternal death. This course will focus on midwifery assessment, treatment and appropriate management. The course also includes teaching about obstetric emergencies.

#### Course 2.10 Midwifery Practice 4. (0/0/160)

Midwifery practice is further developed in the normal scope of practice and also at a beginning level to recognise and apply knowledge and skills when there are complications of the childbirth experience.

#### Course 2.11 Midwifery Practice 5. (0/0/160)

Midwifery practice is further developed to recognise complications and apply knowledge and skills when there are complications of the maternity experience. Midwifery assessment and management of complications is developed. Obstetric emergencies are also part of this course.

#### Year Three Semester Five

#### Course 3.1 Complicated Maternity Experience II (100/30/0)

This course develops the application of knowledge and skills when there are complications of childbirth experience. This course will focus further on the main complications and obstetric emergencies and will develop further the midwifery assessment and management of these complications. This course will also cover the peri-operative continuum.

#### Course 3.2 Managing Newborn Problems. (100/30/40)

This course develops knowledge and understanding about common complications and medical conditions of the newborn along with practical skills required for caring for the newborn with problems. Assessment, management and appropriate referral of the unwell newborn are also taught. Clinical issues associated with unwell babies and the impact on the family is also explored.

#### Course 3.3 Midwifery Practice 6. (0/0/200)

Midwifery practice is developed to recognise and apply knowledge and skills when there are complications and emergencies of the maternity experience including the peri- operative continuum. Midwifery assessment, management and referral are further developed.

#### Course 3.4 Midwifery Practice 7. (0/0/200)

This course develops midwifery practice in assessment, management and referral of women with medical conditions and complications as well as complex psychological, socioeconomic and environmental factors, which impact on pregnancy and general health

### Year Three Semester Six

#### Course 3.5 Complexities of Maternity Experience. (100/60/0)

Complications of childbirth experience are explored further along with complex issues related to women's social, environmental and psychological health including maternal mental health and ill health. The dilemmas and challenges of childbirth are explored from a national and international perspective. Ethical issues are explored and debated

#### Course 3.6 Transition to Practice. (80/20/100)

This course enables the student to prepare for the transition to becoming a midwife. Includes learning about effective teaching within midwifery practice, further conflict, advocacy skills and leadership skills. Learning in earlier papers is synthesised in readiness for the National Midwifery exam.

#### Course 3.7 Midwifery Practicum I. (0/0/200)

This course will integrate and begin to consolidate the midwifery knowledge and skills that have been learnt in the programme. During this course the student will demonstrate beginning ability to practice autonomously across the scope of practice and begin to demonstrate the practice standards at a level to meet the Bangladesh and International Confederation of Midwives (ICM) Competencies for Practice

#### Course 3.8 Midwifery Practicum II. (0/0/200)

This course will integrate and consolidate the midwifery knowledge and skills that have been learnt in the programme. During this course the student will practice autonomously across the scope of practice and demonstrate the practice pillars (standards) at a level to meet the Bangladesh and ICM competencies for Midwifery practice.