

South African Nursing Council

(Under the provisions of the Nursing Act, 2005)

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DIPLOMA FOR REGISTRATION AS A MIDWIFE (ONE YEAR COURSE)

Regulation	Date
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Amendments	
R.479	10/03/1978
R.2212	31/10/1980
R.1424	01/07/1983
R.2553	15/11/1985
R.1141	29/05/1987

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MIDWIFE

(ONE YEAR COURSE)

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INTRODUCTION - GENERAL PHILOSUPHY FOR THE EDUCATION AND TRAINING OF NURSES

(1) OBJECTS OF THE SOUTH AFRICAN NURSING COUNCIL

The objects of the South African Nursing Council are determined in section 3 of the Nursing Act, Act No. 50 of 1978.

- "3. The objects of the council shall be -
 - (a) to assist in the promotion of the health standards of of the inhabitants of the Republic;
 - (b) subject to the provisions of the Chiropractors Act, 1971 (Act No. 76 of 1971), the Homeopaths, Naturopaths, Osteopaths and Herbalists Act, 1974 (Act No. 52 of 1974), the Pharmacy Act, 1974 (Act No. 53 of 1974), and the Medical, Dental and Supplementary Health Service Professions Act, 1974 (Act No. 56 of 1974), to control, and to exercise authority in respect of, all matters affecting the education and training of, and the manner of the exercise of the practices pursued by, registered nurses, midwives, enrolled nurses and nursing assistants;
 - (c) to promote lizison of the education and training, and the manner of the exercise of practices, referred to in paragraph (b), both in the Republic and elsewhere, and to promote the standards of such education and training and the manner of the exercise of such practices in the Republic;
 - (d) to advise the Minister on any matter falling within the scope of this Act;
 - (e) to communicate to the Minister information on matters of public importance acquired by the council in the course of the performance of its functions under this Act."

(2) DEFINITION OF NURSING SCIENCE

"Nursing Science is a human clinical health science that constitutes the body of knowledge for the practice of persons registered or enrolled under the Nursing Act, as nurses or midwives.

Within the parameters of nursing philosophy and ethics, it is concerned with the development of knowledge for the nursing diagnosis, treatment and personalized health care of persons exposed to, suffering or recovering from physical or mental ill-health. It encompasses the study of preventive, promotive, curative and rehabilitative health care for individuals, families, groups and communities and covers man's lite-span from before birth."

(3) EDUCATION IN NURSING

Council emphasizes that the education and training shall be directed specifically at the development of the nurse on a personal and a professional level and that the principles of learning be observed, namely that learning leads to behaviour change in the cognitive (mental), affective (interpersonal and emotional) and psycho-motor (technical) aspects, through active involvement of the student.

The development of the ability for analytical, critical, evaluative and creative thinking and the stimulation of the exercise of independent judgement of scientific data are of the utmost importance.

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PURPOSE OF THE COURSE

(The approach to the education of students must be person, family and community centred with special emphasis on maternal and child health services as the foundation of community health).

- (a) to guide students, through instruction in the essential physical, biological, sociological, psychological, medical and nursing principles underlying health care, to understand human needs in health and disease, in all the phases of man's existence;
- (b) to help students to appreciate the need of the human being for help to maintain or regain his health and to guide them to utilize the means and measures of assisting the human being to promote, maintain and regain health. The importance of suitable health education in respect of maternal and child health cannot to over-emphasised;
- (c) to educate students to apply the science principles underlying midwifery as the foundation of midwifery practice in hospital wards, in out-patient and other extra-institutional services and in the community;
- (d) to aid students in developing the necessary appreciation of the importance of preventive, curative and rehabilitative health services in the community. The importance of health education must be emphasised in this respect;
- (e) to provide students with a thorough grounding in the mastery of the diagnostic, therapeutic and technical skills of midwifery, with special emphasis on normal midwifery as a basis for the recognition of abnormal conditions. Special attention must be given to the role of the midwife in handling abnormal conditions in the unavoidable absence of medical assistance;

- (f) to enable students to appreciate their role and responsibility in the health services of the community;
- (g) to prepare students to fulfil their role as midwives as members of the multi-disciplinary health team;
- (h) to make students aware that the object of Mothercraft is to equip midwives to educate parents in simple language in the craft of infant and pre-school child care.

The aspects of pre-natal care, intra-natal and post-natal care and the care of the child up to the age of one year have always formed a normal part of midwifery. This part of mothercraft, which should be taught under the subject of Midwifery, includes all aspects of the subject, commencing with the ante-natal period during which the attitude of the woman to her pregnancy, folklore with regard to pregnancy and her phycical and mental health during pregnancy are taken into account, and labour and total care following the birth of her child.

The importance of breast-feeding must be emphasised not only in the interest of the infant, but also in relation to the health of the mother.

The 20 periods of instruction prescribed under the heading Mothercraft, should therefore be devoted exclusively to the total care of the pre-school child up to the age of 5 years.

GUIDE/ 5

GUIDE

1. Class teaching should be related as closely as possible to the clinical instruction of students in the wards and other departments of the school and in the community health services. The need for constant consultation and co-operation between all those who participate in the education of students in both the theoretical and the clinical fields, cannot be over-emphasised.

The importance of accurate observation and skill in recording and reporting observations must be stressed as one of the most important duties of the midwife.

In teaching special skills, techniques and record keeping, the scientific basis of and the reasons for these measures should be emphasised.

- 2. It is important that the subject matter be presented in a manner which will enable students to integrate concepts in such a way that they will be able to provide scientifically accurate and humane care according to the individual needs of the persons they care for.
- 3. Throughout the course, students should be guided in their personal and professional adjustments.
- 4. (a) It is important that the law governing the practice of midwifery, including the regulations regarding the conduct of registered midwives which shall constitute improper or disgraceful conduct and the conditions under which they may carry on their profession, shall be taught at an applied level throughout the course.

The following aspects must be stressed:

- (i) the fact that it is the duty of a registered person to keep abreast of the law governing midwifery practice, to be in possession of the applicable legislation at all times and to obtain the amendments published from time to time;
- (ii) the importance of reading legislation objectively, of being able to annotate existing legislation and of referring to legislation correctly, e.g. quoting by correct numbers;

- (iii) that it is important that the principles of both common and statutory law as applicable to midwifery, must be borne in mind in daily practice.
- (b) The applicable portions of legislation pertaining to the various subjects, must be dealt with.
- 5. The importance, and the possible methods, of keeping abreast of developments in midwifery and within the profession after registration, should be emphasised throughout the course.
- 6. It is important that medical practitioners and dentists be associated with the teaching of the applicable aspects of the curriculum.

DIRECTIVE

- 1. "Periods of instruction" include group clinical demonstrations, seminars, symposiums, tutorials, group discussions and group project work both in the classroom and in patient care.
- The minimum periods of instruction indicated in the directive, excludes time to be spent in the preparation of individual studies and projects.
- 3. It is important that tutors and students realise that the natural, human and medical sciences and public health at an applied level form integral parts of the examination in Science and Art of Midwifery.
- 4. Schools shall satisfy themselves that students who qualified for registration as nurses under regulations published prior to 2 May 1975, have adequate knowledge of the theory and practica for preventive and promotive health care and family planning, especially concerning primary, secondary and tertiary health care (refer to Council's guide lines in respect of primary health care, as contained in circular 38/78 dated 14 December, 1978): Where necessary students should be given additional instruction or they should be required to update their knowledge of this subject.
 - N.B. (i) If it is desired that instruction be given by a person holding a qualification not mentioned below, application must be made to the Council;
 - (ii) a period of instruction extends over at least 40 minutes.

CLINICAL PRACTICA

Clinical practica in midwifery shall extend over at least 960 hours.

Paragraph (1)(a): Social Sciences, Social Care and Mental Health

Care, with special reference to midwifery and the

care of the mother and child and social assistance
relating thereto.

(At least 10 periods of instruction)

Tutor; registered nurse holding the Diploma in Nursing Administration; registered nurse holding a degree in nursing. A person holding at least two University courses in Sociology or Psychology, or a person holding at least two University courses in Sociology and one course in Psychology or vice versa, may give instruction in the appropriate portions of the subject.

Paragraph (1)(c): Biological Sciences

Anatomy and Physiology

(At least 30 periods of instruction)

Medical practitioner; tutor; midwife.

Revision of the basic Anatomy and Physiology with special reference to the Anatomy and Physiology of fertilisation (with emphasis on basic genetics), pregnancy and labour, puerperium, the foetus and the new-born.

Applied Anatomy and Physiology shall be included in the instruction under paragraph (2).

Paragraph (2): Science and Art of Midwifery, Neo-natal Care, Mothercraft (from infancy to the pre-school child)

(At least 240 periods of instruction)

(a) History of Midwifery

(Preferably by means of the project method)

Midwife.

(b) Applied Pharmacology

Tutor; pharmacologist; medical practitioner.

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- (c) <u>Dietetics (nutrition and diet therapy)</u>
 in relation to midwifery.

 Qualified dietitian; midwife; tutor.
- (d) Midwifery as a clinical speciality
- (e) Normal pregnancy and the management thereof, including health education for the pregnant woman, breathing and relaxation techniques and ante-natal exercises.
- (f) Complications of pregancy and the management thereof.
- (g) Normal labour and the management thereof.
- (h) Complications of labour and the management thereof.
- (i) Puerperium: normal and the management thereof; _complications and the management thereof; post-natal health education and post-natal exercises.
- (j) Normal baby, development and care up to the age of one year. Abnormalities and complications of the new-born and the treatment thereof.
- (k) Special diagnostic and therapeutic skills

Medical practitioner; midwife. At least 10 periods shall be given by a medical practitioner.

Wherever possible, teaching periods in relation to complications in midwifery should be given by a medical practitioner who is a specialist obstetrician.

The following must be observed in the instruction:

- (i) Both active and passive management of the third stage of labour must be taught;
- (ii) plugging of the uterus and packing of the vagina must <u>not</u> be taught to student midwives and must not be used by midwives under any circumstances;
- (iii) an external version for a transverse lie should be taught in the case of a patient in early labour and in transverse lie of the second twin after the first has been delivered. Version in these cases is attempted only where a medical practitioner is not available;
- (iv) although in terms of the regulations regarding the conduct of registered midwives which shall constitute improper or disgraceful conduct and the conditions under which they may carry on their profession, a registered midwife must call a medical practitioner in the case of a presentation other than an uncomplicated head, student midwives must be taught to undertake other presentations;
 - (v) it is important that due cognizance be given to ante-natal and post-natal exercises and relaxation and breathing techniques in the teaching of the subjects ante-natal care, post-natal care and preventive and promotive health.

(1) Mothercraft

(At least 20 periods of instruction, to be devoted exclusively to the pre-school child from 1 to 5 years, of which at least 10 periods shall be devoted to practica).

Midwife.

(i) Growth and Development

Toddler up to 2 years

Pre-school - 2 years to school-going age.

(ii) <u>Nutrition</u> - feeding patterns and problems. Special emphasis on prevention of deficiency diseases

- (iii) Behavioural Problems Parent-child relationship and other familial factors.
 - (iv) Problems and allergies prevention and diagnosis.
 - (v) Early detection and treatment of physical and mental deficiencies, including conditions of genetic origin.
 - (vi) Health Education with regard to the toddler and the pre-school child.
- (vii) Social Problems and Social Services available, including genetic counselling and "at risk" infants.

The Children's Act shall be taught at an applied level throughout the course. Where possible, ancillary home visits and visits to authorities providing applicable services, would be on inestimable value.

Paragraph (3): Preventive and Promotive Health Care and Family Planning

(At least 15 periods of instruction of which at least 10 must be on family planning).

General nurse and midwife against whose name the Diploma in Community Health Nursing Science is registered; tutor; medical practitioner; midwife.

Practicals in the form of visits and practical experience in personal health services which include genetic services are essential.

(See also item 4 on page 6).

Paragraph (4): Principles of Professional Practice, including the records to be kept by the midwife.

(At least 5 periods of instruction).

Midwife,

Paragraph (5):

Ward Administration and Clinical Teaching,
with special reference to the administration
of labour rooms, nurseries, wards and
ante-natal departments. Medico-legal risks.
Records.

(At least 10 periods of instruction).

Midwife.

Paragraph (6): <u>Records</u>

Throughout the course, students must be taught to appreciate the necessity of keeping accurate records in midwifery practice and the need to exercise particular care in the use, checking and recording of all the medications which she is legally permitted to administer.

The question papers for the final examination will, by and large, be set as follows -

Paper 1

Pregnancy, normal and abnormal; ante-natal care.
Labour, normal and abnormal; care.
Applied anatomy and physiology of pregnancy and labour.
Breathing and relaxation techniques and ante-natal and post-natal exercises.
Record-keeping.

Paper II

The puerperium, normal and abnormal (including the relevant anatomy and physiology).
Physiology of the new-born.
Abnormalities and disease conditions of the new-born.
Post-natal care of mother and baby.
Record-keeping.

Paper III

Family planning. Mothercraft. Ward administration, clinical instruction, professional practice.

June 1979 June 1981

diploma midw/DIRECT/eg

