# Nurses and Midwives for Health

## WHO European Strategy for Nursing and Midwifery Education

Section 9 Prospective Analysis Methodology Questionnaire

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Section 9

Prospective Analysis Methodology Questionnaire

#### ABSTRACT

The WHO European Strategy for Nursing and Midwifery Education included a commitment to provide a series of tools to support those Member States that had requested assistance in implementing the Strategy. This Guidance document represents key elements of that support. Included in the pack (Sections 1-8) are two prototype curricula (one for nursing and one for midwifery); key elements of curriculum design for practice-based professions, including competency-based education and training; teaching, learning and assessment strategies consistent with the principles of adult education; guidance on quality control and educational evaluation; criteria for the preparation of nurse and midwife teachers and mentors; criteria for the accreditation of schools of nursing and/or midwifery; and criteria for national and international accreditation of certificated and experiential learning. Section 9 is a detailed research tool for use by each Member State in assessing its baseline position in relation to the fundamental principles of initial education for nurses and midwives and their subsequent annual progress towards implementation of the strategy. Member States are asked to complete this tool (questionnaire) annually. The results will be analysed and will form part of a longitudinal research study on nursing and midwifery education in Europe over a ten-year period. A list of key references and a glossary are included.

#### Keywords

EDUCATION, NURSING MIDWIFERY – education STRATEGIC PLANNING GUIDELINES QUESTIONNAIRES EUROPE

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### **Section 9**

## **PROSPECTIVE ANALYSIS**

### **9A NURSING EDUCATION**

(The Prospective Analysis for Midwifery Education follows in Section 9B)

#### Introduction

Section 9 of the WHO European Strategy for Nursing and Midwifery Education (WHO 2000a) states that guidance will be prepared on a method of systematic analysis and forward planning, to assist Member States in their implementation of the Strategy; such guidance to be available to any Member State that wishes it.

This document, part of the package of guidelines prepared to support Member States in implementing the Strategy, contains guidance on the use of the Prospective Analysis Methodology (PAM) (WHO 1989). It is emphasized, however, that this is but one of a number of similar methods of systematic analysis and forward planning, and Member States may select whichever method they prefer. Because nursing and midwifery are major and integral parts of any country's health care system, and also because of their different political, economic and cultural systems, it is important for countries to be aware that fundamental change in nursing and midwifery education will not only have implications for the health care system but also for the wider context, including possibly for the system of general school education. This is why, as stated in the Strategy (WHO 2000a: p. 13):

The time scale for implementation of the Strategy will differ in the various countries of the Region. Each Member State's strategy must include measurable indicators linked to its specific time scale. These will be set by the country itself, based on the results of its analysis of the present position and of its vision for the future.

#### **Country Implementation Group**

As an essential first step, each Member State will need to set up a Country Implementation Group, which will be responsible for preparing the Action Plan for implementation of the Strategy. According to WHO (WHO 2000a: p. 4):

... educators alone cannot bring about the needed change in schools of nursing and of midwifery, or in any educational system. It is also necessary to involve, for example, ministries of health and of education, the legislative or regulatory bodies that set the rules and regulations for nursing and midwifery education, health professionals and members of the community, including patients.

The membership of the Country Implementation Group should therefore include key representatives from policy-making at ministry level, from nursing and midwifery education, from hospital and

primary care management and practice, from other health care professions, and from patients and other interested lay people. It will be helpful to have a member experienced in research or audit, to whom can be delegated the authority and responsibility to conduct the systematic analysis, a task that will take time and require skills in data collection, analysis and reporting.

#### Conducting the systematic analysis

The Strategy states the fundamental principles of the initial preparation of nurses and midwives, and it is against each of these principles that the systematic analysis will be conducted. Regular review of progress and updating of the country's position in relation to achievement of the fundamental principles and implementation of the Strategy will be required. This review should be conducted annually. Careful completion of responses in respect of each principle, i.e. provision of the country's initial baseline data, will be time-consuming, but is essential if future progress is to be measured accurately. Thereafter, updating will be considerably less time-consuming. Responses to *each* of the principles, listed below in Part I, should state simply "yes" (meaning that the principle has already been achieved in the country) or "no" (indicating that it is not yet achieved). If a "no" response is recorded, countries should complete one of the following two options:

moderate change requires to be implemented; *or* major change requires to be implemented.

Part II of the Prospective Analysis presents a one-page summary of the answers to Part I. This provides an "at a glance" profile of the country's position in relation to each of the fundamental principles of the Strategy. In Part III, those countries that have indicated a "no" response to any of the principles should then give further details and list the step-by-step changes needed, stating who would be involved in and given the responsibility to make the changes, and the time scale involved.

This systematic process of analysis will facilitate the setting of measurable indicators by each country, by means of which they can assess progress in their journey towards implementation of the entire Strategy.

#### Submission of report

A progress report should be prepared for WHO and submitted at the regular annual updates, as requested by WHO European Nursing and Midwifery Unit. On receipt, the country reports will be collated, and an annual report on progress in the Region towards implementation of the Strategy will be prepared by the WHO European Nursing and Midwifery Unit. This will be issued to all Member States. To preserve confidentiality, each country will be allocated a unique identification number (ID No.) and results will be reported using these numbers. Each country will be informed of its ID No. so that, should it wish, it can compare its position with those of other countries in the Region.

*Note*: A separate analysis should be conducted for nursing and for midwifery, as these professions are likely to be at different stages of development in the Member States wishing to use this guidance. It is important to distinguish between the two in this analysis, and to avoid delaying progress in one because of issues relating to the other. Please therefore complete both analyses, i.e. one for nursing and one for midwifery.

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## PART I (NURSING)

Analysis of the current position of the country in relation to the fundamental principles underpinning the initial education programme for nursing (WHO 2000a: Section 7)

**MEMBER STATE** 

.....

Date of completion of analysis

This is the ..... analysis conducted by this country (insert first, second, third, etc.)

#### PLEASE TICK APPROPRIATE BOX(ES) IN RELATION TO EACH OF THE PRINCIPLES

<u>Principle 1</u> Nursing is an integral part of the essential legislative and regulatory framework for the health care professions in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Major

<u>Principle 2</u> Nursing education and practice are underpinned by values focusing on the promotion and maintenance of health in individuals, families and communities and on individual and holistic care of those who are ill. It promotes non-judgemental care that is sensitive to the social, cultural, economic and political context of our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 3</u> Nursing education takes into account the health care needs of the population of our country and is conducted to agreed standards for quality of care.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 4</u> Nursing education has the individual, be it the patient or the healthy person, as its main focus, and takes into account the significance of the contexts within which those individuals live and work, including their families, partners, social groups and communities.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 5</u> A proportion of nursing education is interdisciplinary and multiprofessional.

Yes	
No	

Is the change that requires to be implemented:

 $\square$ 

Moderate	

Major

<u>Principle 6</u> Admission to nursing education follows successful completion of secondary school education, with qualifications equivalent to those required by our country for university (or equivalent higher education institution) entrance. Alternatively, entry is based on formal accreditation of prior learning and/or relevant experience, which is a normal route of entry to the university (or equivalent higher education institution) concerned, and is acceptable to the nursing statutory body – where such exists.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 7</u> The length of the programme is sufficient to achieve the specified competencies and is not less than three years.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 8</u> Students are not employees during their education, and enjoy a status equivalent to other university (or equivalent higher education institution) students in our country. This applies throughout the theory and practice components of their education.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 9</u> Successful completion of the nursing programme leads to professional qualification as a nurse.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

#### Principle 10 (Applies only to midwifery programmes)

<u>Principle 11</u> The academic level of the professional qualification as a nurse is that of a university (or equivalent higher education institution) degree in nursing.

Yes	
No	

If no:

Is the change that requires to be implemented:

 $\square$ 

Moderate	

Major

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 12</u> There is only one level of qualified nurse in our country (i.e. one level of basic nursing).

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	

Major

<u>Principle 13(a)</u> The curriculum is research-based/evidence-based.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 13(b)</u> The curriculum is competency-based.

	Yes	
If no:	No	
	ge that rec	quires to be implemented:
Mode	erate	

 $\square$ 

Major
-------

<u>Principle 14</u> The specified competencies include the ability to practise in hospital and community settings and as a member of the multiprofessional health care team.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 15</u> The relevant EC Council Directives for nursing serve as the minimum in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
----------	--

Major

<u>Principle 16</u> Initial preparation and qualification forms the basis for continuing professional development and education.

Yes	
No	

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 17</u> The university, its school or department of nursing and the practice placement areas in the hospitals and community settings are formally accredited\* and have in place systems of quality improvement/control.

(Note: Please answer this question in relation to whatever type of nursing school your country has, whether or not it is at university level.)

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<sup>\*</sup>Accreditation is a process, based on a system of external peer review, and using written standards, by which the quality of a university's activities and its educational programmes are assessed and, if satisfactory, approved.

<u>Principle 18</u> The nursing programme is formally accredited, is regularly reviewed and has valid systems of evaluation and quality improvement/control in place at local and national levels.

Y	Yes	
1	No	

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 19</u> The nursing programme has credits allocated to the learning that takes place in both the educational institution and the practice placement settings.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Principle 20 The director or head of the nursing school or department is a qualified nurse.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 21</u> The teaching of nursing, in both theory and practice, is carried out by a qualified nurse.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
----------	--

Major

#### <u>Principle 22</u> (a) to (j)

Note: if your country has no qualified nurse teachers, please move to 22 (i) and (j)

#### Teachers of nursing:

(a) Hold a degree at an academic level equivalent to the requirements for university (or equivalent higher education institution) teachers in our country.

	Yes	
If no:	No	

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(b) Hold a teaching qualification (i.e. have passed a specific examination to become a teacher).

Yes	
No	
	_

Is the change that requires to be implemented:

Moderate
----------

Major

If no:

(c) Hold the qualification to which the programme leads.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(d) Have a minimum of two years of relevant practical experience.

Yes	
No	

Is the change that requires to be implemented:

 $\square$ 

Moderate [	
------------	--

Major

(e) Teach within the area of specialist nursing practice in which they have expertise.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(f) Maintain their clinical competence.

Yes	
No	

Is the change that requires to be implemented:

Moderate	
Major	

(g) Are responsible for the clinical supervision of students on practice placement within their areas of specialization.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(h) This responsibility [at (g) above] is shared with the student's clinical mentor.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

#### Principle 22 (continued)

There are no qualified nurse teachers in our country, therefore:

(i) Qualified teachers will be sought from other countries by means of validated networks.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

#### **OR**

(j) Appropriately qualified nurses will be selected to attend teacher preparation courses.

Yes	
No	

If no:

Is the change that requires to be implemented:

 $\square$ 

Moderate	

Major

#### Principle 23 (a) to (e)

Note: if your country has no qualified nurse mentors, please move to 23 (d) and (e)

Clinical nurses who teach, act as mentors and support students in their practice placements are:

(a) Experts in their field of practice.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(b) Receive appropriate preparation for their roles as teachers, mentors and providers of support.

	Yes	
If no:	No	

Is the change that requires to be implemented:

Moderate	
Major	

(c) Maintain their clinical competence.

Yes	
No	
	• • • •

Is the change that requires to be implemented:

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

Our country has no qualified nurse mentors, therefore:

(d) Qualified nurse mentors will be sought from other countries by means of validated networks.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate
----------

Major

(e) Appropriately qualified nurses will be selected to attend mentor preparation courses.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 24</u> Student nurses receive clinical supervision while in clinical placements, whether in hospital or community settings. The level and amount of such supervision corresponds to the stage of their education.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 25</u> Teachers from disciplines that contribute to nursing education are experts in their own subjects and hold a degree equivalent to the requirements for university (or equivalent higher education institution) teachers in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 26</u> University schools and departments of nursing have, or have adequate shared access to, appropriate human and physical resources including equipment, clinical skills laboratories and libraries.

(Note: Please answer this question in relation to whatever type of nursing school your country has, whether or not it is at university level.)

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

#### THANK YOU VERY MUCH FOR COMPLETING PART I OF THE PROSPECTIVE ANALYSIS DOCUMENT. PLEASE NOW TURN OVER THE PAGE AND COMPLETE PART II, WHICH IS A ONE-PAGE SUMMARY OF THE ANSWERS YOU HAVE GIVEN IN PART I.

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## PART II (NURSING)

#### NURSES AND MIDWIVES FOR HEALTH A WHO EUROPEAN STRATEGY FOR NURSING AND MIDWIFERY EDUCATION

#### PROSPECTIVE ANALYSIS - NURSING EDUCATION / COUNTRY SUMMARY PROFILE

#### MEMBER STATE .....

#### Date of completion of this profile .....

(This date should be the same as that for completion of Part I)

#### Instructions for completion

Countries should summarize their answers to Part I by placing a tick under the Yes or No columns, then, for each "No" response, tick whether Part I indicates that a moderate or major change is required.

Fundamental principle	YES	NO	If NO, what type of change is required?	
			Moderate	Major
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
(not applicable)			<u> </u>	
11				
12				
<b>13</b> (a)				
13 (b)				
14				
15				
16				
17				
18				
19				
20				
21				
<b>22</b> (a)				
22 (b)				
22 (c)				
22 (d)				
22 (e)				
22 (f)				
22 (g)				
22 (h)				
22 (i)				
22 (j)				
23 (a)				
23 (b)				
23 (c)				
23 (d)				
23 (e)				
24				
25				
26				

THANK YOU VERY MUCH FOR COMPLETING PART II. PLEASE NOW COMPLETE PART III, WHICH IS THE FINAL PART OF THE ANALYSIS.

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## PART III (NURSING)

## **PROSPECTIVE ANALYSIS: NURSING EDUCATION**

Details of actions required to implement the fundamental principles of the Strategy, with related time scale.

These details will form the basis for the Member State's Action Plan, which will be prepared by the Country Implementation Group.

#### **MEMBER STATE**

.....

Date of completion .....

Note: A separate page has been allocated to each principle, to give sufficient space for answers.

<u>Principle 1</u> Nursing is an integral part of the essential legislative and regulatory framework for the health care professions in our country.

Obtain examples of similar legislation from other countries	Years	Months
Draft an appropriate text		
Consult as required with interested parties (list these parties in your Action Plan)		
Secure formal Ministry/Ministries (Health and Education) agreement for the text		
Agree a plan of action for the adoption of the legislation		
Are other actions required? (If so, please list below)		

<u>Principle 2</u> Nursing education and practice are underpinned by values focusing on the promotion and maintenance of health in individuals, families and communities and on individual and holistic care of those who are ill. It promotes non-judgemental care that is sensitive to the social, cultural, economic and political context of our country.

	Years	Months
Review the existing curriculum to identify areas of compatibility and incompatibility with the curriculum as given in Section 8 of the Strategy (Check each element)		
Take steps to modify the existing curriculum to bring it into line with the curriculum as given in Section 8 of the Strategy (List all steps required)		
Are other actions required? (If so, please list below)		

<u>Principle 3</u> Nursing education takes into account the health care needs of the population of our country and is conducted to agreed standards for quality of care.

	Years	Months
Identify the location of and obtain access to the national data on population health care needs		
Use existing national quality standards of nursing care or, if necessary, obtain examples of quality standards		
Take steps to incorporate these into the curriculum		
Are other actions required? (If so, please list below)		

<u>Principle 4</u> Nursing education has the individual, be it the patient or the healthy person, as its main focus, and takes into account the significance of the contexts within which those individuals live and work, including their families, partners, social groups and communities.

_		Years	Months
	Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
	Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
	Are other actions required? (If so, please list below)		

<u>Principle 5</u> A proportion of nursing education is interdisciplinary and multiprofessional.

Review the redesigned curriculum to identify opportunities for interdisciplinary and multiprofessional shared teaching and learning	Years	Months
Consult as required with interested professional groups (list these professional groups in your Action Plan)		
Agree with these professional groups an implementation plan for the commencement of the shared teaching		
and learning		
Are other actions required? (If so, please list below)		

<u>Principle 6</u> Admission to nursing education follows successful completion of secondary school education, with qualifications equivalent to those required by our country for university entrance. Alternatively, entry may be based on formal accreditation of prior learning and/or relevant experience, provided this is a normal route of entry to the university concerned, and acceptable to the nursing statutory body.

<u>Principle 7</u> The length of the programme is sufficient to achieve the specified competencies and is not less than three years.

	Years	Months
Arrange for modification of the statutory regulations governing nursing and nursing education		
Consult as required with interested parties (list these parties in your Action Plan, e.g. Ministry/Ministries of Health and Education, universities, professional		
associations)		
Identify the financial resources required		
Are other actions required? (If so, please list below)		

<u>Principle 8</u> Students are not employees during their education, and enjoy a status equivalent to other university (or equivalent) students in our country. This applies throughout the theory and practice components of their education.

	Years	Months
Analyse the workforce implications of withdrawing student labour in terms of:		
- the total number of replacement posts required		
- the implications for number of placements		
Adjust the number of places available in nursing education programmes in the country		
Identify the financial resources required		
Arrange for modification of the statutory regulations governing nursing and nursing education		
Are other actions required? (If so, please list below)		

<u>Principle 9</u> Successful completion of the nursing programme leads to professional qualification as a nurse.

On the list below, please tick the actions you consider will be required in order for your country to achieve this principle, and your current estimate of the time scale required to implement these, calculated from the above date of completion of this analysis.

	Years	Months
Arrange for modification of legislation and statutory regulations governing nursing and nursing education		
Are other actions required? (If so, please list below)		

Note: Principle 10 applies only to midwifery programmes

<u>Principle 11</u> The academic level of the professional qualification as a nurse is that of a university (or equivalent) degree in nursing.

	Years	Months
Consult as required with interested parties (list these parties in your Action Plan, e.g. Ministry/		
Ministries of Health and Education, universities		
and professional associations)		
Analyse the workforce implications		
Identify the financial resources required		
Arrange for modification of statutory	_	_
regulations governing nursing and nursing education		
Are other actions required? (If so, please list below)		

Principle 12 There is only one level of qualified nurse in our country.

~	Years	Months
Decide on the date for cessation of the second-level nursing qualification		
Review the existing second-level nursing curriculum to identify areas where change is required		
Agree those areas of the WHO curriculum (see Section 8 of the Strategy) that second-level nurses require to complete to upgrade to first level		
Consult with interested parties (list these parties in your Action Plan, e.g. Ministry/Ministries of Education and Health, universities, professional associations)		
Analyse the workforce implications of withdrawing second-level student nurses in terms of the total number of replacement posts required		
Identify the financial resources required		
Adjust the number of places available in nursing education programmes in the country		
Arrange for modification of the statutory regulations governing nursing and nursing education		
Draw up a phased implementation programme for the upgrading of second-level nurses to first level		
Are other actions required? (If so, please list below)		

Principle 13 The curriculum is research-, evidence- and competency-based.

		Years	Months
	Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
	Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
	Are other actions required? (If so, please list below)		

<u>Principle 14</u> The specified competencies include the ability to practise in hospital and community settings and as a member of the multiprofessional health care team.

_		Years	Months
	Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
	Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
	Consider the implications for placements in the community settings		
	Are other actions required? (If so, please list below)		

<u>Principle 15</u> The relevant EC Council Directives for nursing serve as the minimum in our country.

On the list below, please tick the actions you consider will be required in order for your country to achieve this principle, and your current estimate of the time scale required to implement these, calculated from the above date of completion of this analysis. (The Strategy curriculum is designed to meet the EC Directives.)

_	Years	Months
Arrange for modification of statutory regulations governing nursing and nursing education		
Identify the financial resources required		
Are other actions required? (If so, please list below)		

<u>Principle 16</u> Initial preparation and qualification forms the basis for continuing professional development and education.

Assess requirements in terms of continuing	Years	Months
professional development for the existing nursing nursing workforce		
Consider systems to provide continuing professional development		
Identify the financial resources required		
Enable the existing nursing workforce to access continuing professional development		
Are other actions required? (If so, please list below)		

<u>Principle 17</u> The university (or equivalent), its school or department of nursing and the practice placement areas in the hospitals and community settings are formally accredited and have in place systems of quality improvement/control.

Note: Please answer this question in relation to whatever type of nursing school your country has, irrespective of whether it is at university level.

	Years	Months
Obtain examples of systems of educational accreditation and quality improvement/control		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Draft an appropriate system for your country, including regulations to ensure the standards and fairness of the accreditation and quality improvement/control		
Are other actions required? (If so, please list below)		

<u>Principle 18</u> The nursing programme is formally accredited, regularly reviewed and has valid systems of evaluation and quality improvement/control in place at local and national levels.

	Years	Months
Obtain examples of systems of nursing programme accreditation, review and quality improvement/control		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Draft an appropriate system for your country, including regulations to ensure the standards and fairness of the accreditation and quality improvement/control		
Are other actions required? (If so, please list below)		

<u>Principle 19</u> The nursing programme has credits allocated to the learning that takes place in both the educational institution and the practice placement settings.

	Years	Months
Obtain examples of systems of accreditation of learning including the European Credit Transfer System		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Incorporate an appropriate system into the nursing programme, accompanied by quality controls		
Are other actions required? (If so, please list below)		

Principle 20 The director or head of the nursing school or department is a qualified nurse.

_		Years	Months
	Assess the educational development required to enable senior nurses to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
	Create plans to deal with the workforce planning implications		
	Identify the financial resources required		
	Implement the education programme required		
	Are other actions required? (If so, please list below)		

<u>Principle 21</u> The teaching of nursing, in both theory and practice, is carried out by a qualified nurse.

_		Years	Months
	Assess the educational development required to enable experienced nurses to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
	Create plans to deal with the workforce planning implications		
	Identify the financial resources required		
	Implement the education programme required		
	Are other actions required? (If so, please list below)		

Principle 22 (a) to (j) Teachers of nursing:

- (a) Hold a degree at an academic level equivalent to the requirements for university teachers in our country.
- (b) Hold a teaching qualification.
- (c) Hold the qualification to which the programme leads.
- (d) Have a minimum of two years of relevant practical experience.
- (e) Teach within the area of specialist nursing practice in which they have expertise.
- (f) Maintain their clinical competence.
- (g) Are responsible for the clinical supervision of students on practice placement within their areas of specialization.
- (h) This responsibility is shared with the student's clinical mentor.

	Years	Months
Assess the educational development required to enable experienced nurses to gain these qualifications and to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

Principle 22 (continued) There are no qualified nurse teachers in our country, therefore:

(i) Qualified teachers will be sought from other countries by means of validated networks.

If this option is chosen, estimate for how long your country will require this type of assistance.

	Years	Months
Assistance required for		

## <u>OR</u>

(j) Appropriately qualified nurses will be selected to attend teacher preparation courses.

	Years	Months
Assess the educational development required to enable experienced nurses to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

<u>Principle 23</u> (a) to (e) Clinical nurses who teach, act as mentors and support students in their practice placements are:

- (a) Experts in their field of practice.
- (b) Receive appropriate preparation for their roles as teachers, mentors and providers of support.
- (c) Maintain their clinical competence.

	Years	Months
Assess the educational development required to enable experienced nurses to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

<u>Principle 23 (continued)</u> There are no qualified clinical nurse role models in our country, therefore:

(d) Expert nurses will be sought by means of validated networks.

Please estimate for how long your country will require this type of assistance.

	Years	Months
Assistance required for		
Analyse the language, manpower and financial implications of recruiting the necessary personnel from abroad		
Are other actions required? (If so, please list below)		

<u>OR</u>

(e) Appropriately qualified nurses will be selected to attend mentor preparation courses.

_		Years	Months
	Assess the educational development required to enable experienced nurses to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
	Create plans to deal with the workforce planning implications		
	Identify the financial resources required		
	Implement the education programme required		
	Are other actions required? (If so, please list below)		

<u>Principle 24</u> Student nurses receive clinical supervision (mentorship) while in clinical placements, whether in hospital or community settings. The level and amount of such supervision corresponds to the stage of their education.

_		Years	Months
	Assess the educational development required to enable experienced nurses to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
	Create plans to deal with the workforce planning implications		
	Identify the financial resources required		
	Implement the education programme required		
	Arrange for modification of the statutory regulations governing clinical supervision		
	Are other actions required? (If so, please list below)		

<u>Principle 25</u> Teachers from disciplines that contribute to nursing education are experts in their own subjects and hold a degree equivalent to the requirements for university teachers in our country.

		Years	Months
	Review the existing provision to identify areas of compatibility and incompatibility with this principle		
_	Consult with interested parties (list these parties in your Action Plan) to determine requirements to achieve this principle		
	Implement these requirements		
	Are other actions required? (If so, please list below)		

<u>Principle 26</u> University schools and departments of nursing have, or have adequate shared access to, appropriate human and physical resources, including equipment, clinical skills laboratories and libraries.

Note: Please answer this question in relation to whatever type of nursing school your country has, irrespective of whether it is at university level.

On the list below, please tick the actions you consider will be required in order for your country to achieve this principle, and your current estimate of the time scale required to implement these, calculated from the above date of completion of this analysis.

	Years	Months
Review the existing provision to identify areas of compatibility and incompatibility with this principle		
Consult with interested parties (list these parties in your Action Plan) to determine requirements to achieve this principle		
Identify the financial resources required		
Draw up, in collaboration with the Ministry of Education, a phased programme for implementation of these standards		
Implement the programme in accordance with the timetable developed		
Are other actions required? (If so, please list below)		

THE REGIONAL ADVISER FOR NURSING AND MIDWIFERY OF THE WHO EUROPEAN REGION WISHES TO THANK YOU VERY MUCH FOR COMPLETING THIS ANALYSIS. THE RESULTS WILL BE ANALYSED AND YOU WILL RECEIVE AN ANNUAL REPORT ON THE POSITION OF NURSING EDUCATION ACROSS THE REGION. YOUR COUNTRY WILL NOT BE IDENTIFIED IN THE REPORT BUT, SINCE YOU WILL KNOW YOUR COUNTRY IDENTIFICATION NUMBER, SHOULD YOU WISH YOU WILL BE ABLE TO COMPARE YOUR SITUATION WITH THAT OF OTHER MEMBER STATES IN THE REGION.

## **9B MIDWIFERY EDUCATION**

(The Prospective Analysis for Nursing Education is given in Section 9A)

#### Introduction

Section 9 of the WHO European Strategy for Nursing and Midwifery Education (WHO 2000a) states that guidance will be prepared on a method of systematic analysis and forward planning, to assist Member States in their implementation of the Strategy; such guidance to be available to any Member State that wishes it.

This document, part of the package of guidelines prepared to support Member States in implementing the Strategy, contains guidance on the use of the Prospective Analysis Methodology (PAM) (WHO 1989). It is emphasized, however, that this is but one of a number of similar methods of systematic analysis and forward planning, and Member States may select whichever method they prefer. Because nursing and midwifery are major and integral parts of any country's health care system, and also because of their different political, economic and cultural systems, it is important for countries to be aware that fundamental change in nursing and midwifery education will not only have implications for the health care system but also for the wider context, including possibly for the system of general school education. This is why, as stated in the Strategy (WHO 2000a: p. 13):

The time scale for implementation of the Strategy will differ in the various countries of the Region. Each Member State's strategy must include measurable indicators linked to its specific time scale. These will be set by the country itself, based on the results of its analysis of the present position and of its vision for the future.

## **Country Implementation Group**

As an essential first step, each Member State will need to set up a Country Implementation Group, which will be responsible for preparing the Action Plan for implementation of the Strategy. According to WHO (WHO 2000a: p. 4):

... educators alone cannot bring about the needed change in schools of nursing and of midwifery, or in any educational system. It is also necessary to involve, for example, ministries of health and of education, the legislative or regulatory bodies that set the rules and regulations for nursing and midwifery education, health professionals and members of the community, including patients.

The membership of the Country Implementation Group should therefore include key representatives from policy-making at ministry level, from nursing and midwifery education, from hospital and primary care management and practice, from other health care professions, and from patients and other interested lay people. It will be helpful to have a member experienced in research or audit, to whom can be delegated the authority and responsibility to conduct the systematic analysis, a task that will take time and require skills in data collection, analysis and reporting.

## Conducting the systematic analysis

The Strategy states the fundamental principles of the initial preparation of nurses and midwives, and it is against each of these principles that the systematic analysis will be conducted. Regular review of progress and updating of the country's position in relation to achievement of the fundamental principles and implementation of the Strategy will be required. This review should be conducted annually. Careful completion of responses in respect of each principle, i.e. provision of the country's initial baseline data, will be time-consuming, but is essential if future progress is to be measured accurately. Thereafter, updating will be considerably less time-consuming. Responses to *each* of the principles, listed below in Part I, should state simply "yes" (meaning that the principle has already been achieved in the country) or "no" (indicating that it is not yet achieved). If a "no" response is recorded, countries should complete one of the following two options:

moderate change requires to be implemented; *or* major change requires to be implemented.

Part II of the Prospective Analysis presents a one-page summary of the answers to Part I. This provides an "at a glance" profile of the country's position in relation to each of the fundamental principles of the Strategy. In Part III, those countries that have indicated a "no" response to any of the principles should then give further details and list the step-by-step changes needed, stating who would be involved in and given the responsibility to make the changes, and the time scale involved.

This systematic process of analysis will facilitate the setting of measurable indicators by each country, by means of which they can assess progress in their journey towards implementation of the entire Strategy.

## Submission of report

A progress report should be prepared for WHO and submitted at the regular annual up-dates, as requested by WHO European Nursing and Midwifery Unit. On receipt, the country reports will be collated, and an annual report on progress in the Region towards implementation of the Strategy will be prepared by the WHO European Nursing and Midwifery Unit. This will be issued to all Member States. To preserve confidentiality, each country will be allocated a unique identification number (ID No.) and results will be reported using these numbers. Each country will be informed of its ID No. so that, should it wish, it can compare its position with those of other countries in the Region.

*Note*: A separate analysis should be conducted for nursing and for midwifery, as these professions are likely to be at different stages of development in the Member States wishing to use this guidance. It is important to distinguish between the two in this analysis, and to avoid delaying progress in one because of issues relating to the other. Please therefore complete both analyses, i.e. one for nursing and one for midwifery.

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# PART I (MIDWIFERY)

Analysis of the current position of the country in relation to the fundamental principles underpinning the initial education programme for midwifery (WHO 2000a: Section 7)

### **MEMBER STATE**

.....

Date of completion of analysis

This is the ..... analysis conducted by this country (insert first, second, third, etc.)

### PLEASE TICK APPROPRIATE BOX(ES) IN RELATION TO EACH OF THE PRINCIPLES

<u>Principle 1</u> Midwifery is an integral part of the essential legislative and regulatory framework for the health care professions in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate
----------

Major

<u>Principle 2</u> Midwifery education and practice are underpinned by values focusing on the promotion and maintenance of health in individuals, families and communities and on individual and holistic care of those who are ill. It promotes non-judgemental care that is sensitive to the social, cultural, economic and political context of our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 3</u> Midwifery education takes into account the health care needs of the population of our country and is conducted to agreed standards for quality of care.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 4</u> Midwifery education has the individual, be it the patient or the healthy person, as its main focus, and takes into account the significance of the contexts within which those individuals live and work, including their families, partners, social groups and communities.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 5</u> A proportion of midwifery education is interdisciplinary and multiprofessional.

Yes	
No	

Is the change that requires to be implemented:

 $\square$ 

Moderate	

Major

<u>Principle 6</u> Admission to midwifery education follows successful completion of secondary school education, with qualifications equivalent to those required by our country for university (or equivalent higher education institution) entrance. Alternatively, entry is based on formal accreditation of prior learning and/or relevant experience, which is a normal route of entry to the university (or equivalent higher education institution) concerned, and is acceptable to the midwifery statutory body – where such exists.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 7</u> The length of the programme is sufficient to achieve the specified competencies and is not less than three years.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 8</u> Students are not employees during their education, and enjoy a status equivalent to other university (or equivalent higher education institution) students in our country. This applies throughout the theory and practice components of their education.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 9</u> Successful completion of the midwifery programme leads to professional qualification as a midwife.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 10</u> Qualification as a midwife may be achieved either via a programme based on prior qualification as a nurse or via a direct-entry programme.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 11</u> The academic level of the professional qualification as a midwife is that of a university (or equivalent higher education institution) degree in midwifery.

Yes	
No	

If no:

Is the change that requires to be implemented:

Major

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 12</u> There is only one level of qualified midwife in our country, (i.e. one level of basic midwifery).

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 13(a)</u> The curriculum is research-based/evidence-based.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 13(b)</u> The curriculum is competency-based.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 14</u> The specified competencies include the ability to practise in hospital and community settings and as a member of the multiprofessional health care team.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 15</u> The relevant EC Council Directives for midwifery serve as the minimum in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	

Major

<u>Principle 16</u> Initial preparation and qualification form the basis of continuing professional development and education.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 17</u> The university, its school or department of midwifery and the practice placement areas in the hospitals and community settings are formally accredited\* and have in place systems of quality improvement/control.

(Note: Please answer this question in relation to whatever type of midwifery school your country has, whether or not it is at university level.)

Yes	
No	

Is the change that requires to be implemented:

Moderate	

Major

<sup>\*</sup>Accreditation is a process, based on a system of external peer review, and using written standards, by which the quality of a university's activities and its educational programmes are assessed and, if satisfactory, approved.

<u>Principle 18</u> The midwifery programme is formally accredited, is regularly reviewed and has valid systems of evaluation and quality improvement/control in place at local and national levels.

Yes	
No	

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 19</u> The midwifery programme has credits allocated to the learning that takes place in both the educational institution and the practice placement settings.

Yes	
No	

If no:

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Principle 20 The director or head of the midwifery school or department is a qualified midwife.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 21</u> The teaching of midwifery, in both theory and practice, is carried out by a qualified midwife.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

#### <u>Principle 22</u> (a) to (j)

Note: If your country has no qualified midwife teachers, please move to 22 (i) and (j)

Teachers of midwifery:

(a) hold a degree at an academic level equivalent to the requirements for University (or equivalent higher education institution) teachers in our country.

	Yes	
If no:	No	

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(b) Hold a teaching qualification (i.e. have passed a specific examination to become a teacher)

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	

Major 🗌

(c) Hold the qualification to which the programme leads.

	Yes	
If no:	No	
Is the chang	ge that req	uires to be

s the change that requires to be implemented: Moderate

Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(d) Have a minimum of two years of relevant practical experience.

Yes	
No	

Is the change that requires to be implemented:

 $\square$ 

Moderate	

If no:

Major

(e) Teach within the area of specialist midwifery practice in which they have expertise.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(f) Maintain their clinical competence.

Yes	
No	

If no:

Is the change that requires to be implemented:

Major 🗌

Are responsible for the clinical supervision of students on practice placement within their (g) areas of specialization.

	Yes	
If no:	No	
Is the chan	ge that rec	juires to

o be implemented: Is the

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(h) This responsibility [at (g) above] is shared with the student's clinical mentor.

Yes	
No	

If no:

Is the change that requires to be implemented:

Major

## Principle 22 continued

If no:

If no:

There are no qualified midwife teachers in our country, therefore:

(i) Qualified teachers will be sought from other countries by means of validated networks.

Yes	
No	

Is the change that requires to be implemented in order to do this:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

# OR

(j) Appropriately qualified midwives will be selected to attend teacher preparation courses.

Ye	es 🗌	
No	o 🗌	

Is the change, that requires to be implemented in order to do this:

Moderate	
Major	

## Principle 23 (a) to (e)

Note: If your country has no qualified midwife mentors, please move to 23 (d) and (e)

Clinical midwives who teach, act as mentors and support students in their practice placements are:

(a) Experts in their field of practice.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

(b) Receive appropriate preparation for their roles as teachers, mentors and providers of support.

Yes	
No	

If no:

Is the change that requires to be implemented:

Major	

(c) Maintain their clinical competence.

	Yes	
If no:	No	
Is the chang	that rac	uiros to

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

Our country has no qualified midwife mentors, therefore:

(d) Qualified midwife mentors will be sought from other countries by means of validated networks.

Yes	
No	

If no:

Is the change that requires to be implemented in order to do this:

Moderate	
Major	

(e) Appropriately qualified midwives will be selected to attend mentor preparation courses.

Yes	
No	

If no:

Is the change, that requires to be implemented in order to do this:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 24</u> Student midwives receive clinical supervision while in clinical placements, whether in hospital or community settings. The level and amount of such supervision corresponds to the stage of their education.

	Yes	
If no:	No	
Is the change	that rec	uires to

Is the change that requires to be implemented:

Moderate	
Major	

<u>Principle 25</u> Teachers from disciplines that contribute to midwifery education are experts in their own subjects and hold a degree equivalent to the requirements for university (or equivalent higher education institution) teachers in our country.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

<u>Principle 26</u> University schools and departments of midwifery have, or have adequate shared access to appropriate human and physical resources, including equipment, clinical skills' laboratories and libraries.

Yes	
No	

If no:

Is the change that requires to be implemented:

Moderate	
Major	

Please now go to Part II to complete the profile, and to Part III to complete further details on the required change(s).

## THANK YOU VERY MUCH FOR COMPLETING PART I OF THE PROSPECTIVE ANALYSIS DOCUMENT. PLEASE NOW TURN OVER THE PAGE AND COMPLETE PART II, WHICH IS A ONE-PAGE SUMMARY OF THE ANSWERS YOU HAVE GIVEN IN PART I.

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# PART II (MIDWIFERY)

### NURSES AND MIDWIVES FOR HEALTH A WHO EUROPEAN STRATEGY FOR NURSING AND MIDWIFERY EDUCATION

## PROSPECTIVE ANALYSIS - MIDWIFERY EDUCATION / COUNTRY SUMMARY PROFILE

#### MEMBER STATE .....

#### 

#### Instructions for completion

Countries should summarize their answers to Part I by placing a tick under the Yes or No columns, then, for each "No" response, tick whether Part I indicates that a moderate or major change is required.

Fundamental principle	YES	NO	If NO, what type of change is required?	
			Moderate	Major
1				Ť
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13 (a)				
13 (b)				
14				
15				
16				
17				
18				
19				
20				
21				
22 (a)				
22 (b)				
22 (c)				
22 (d)				
22 (e)				
22 (f)				
22 (g)				
22 (h)				
22 (i)				
22 (j)				
23 (a)				
23 (b)				
23 (c)				
23 (d)				
23 (e)				
24				
25				
26				

THANK YOU VERY MUCH FOR COMPLETING PART II. PLEASE NOW COMPLETE PART III, WHICH IS THE FINAL PART OF THE ANALYSIS.

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# PART III (MIDWIFERY)

# **PROSPECTIVE ANALYSIS: MIDWIFERY EDUCATION**

Details of actions required to implement the fundamental principles of the Strategy, with related time scale.

These details will form the basis for the Member State's Action Plan, which will be prepared by the Country Implementation Group.

# **MEMBER STATE**

.....

Date of completion .....

Note: A separate page has been allocated to each principle, to give sufficient space for answers.

<u>Principle 1</u> Midwifery is an integral part of the essential legislative and regulatory framework for the health care professions in our country.

Obtain examples of similar legislation from other countries	Years	Months
Draft an appropriate text		
Consult as required with interested parties (list these parties in your Action Plan)		
Secure formal Ministry/Ministries (Health and Education) agreement for the text		
Agree a plan of action for the adoption of the legislation		
Are other actions required? (If so, please list below)		

<u>Principle 2</u> Midwifery education and practice are underpinned by values focusing on the promotion and maintenance of health in individuals, families and communities and on individual and holistic care of those who are ill. It promotes non-judgemental care that is sensitive to the social, cultural, economic and political context of our country.

Designs the environment of iteration and	Years	Months
Review the existing curriculum to identify areas of compatibility and incompatibility with the curriculum as given in Section 8 of the Strategy) (Check each element)		
Take steps to modify the existing curriculum to bring it into line with the curriculum as given in Section 8 of the Strategy (List all steps required)		
Are other actions required? (If so, please list below)		

<u>Principle 3</u> Midwifery education takes into account the health care needs of the population of our country and is conducted to agreed standards for quality of care.

	Years	Months
Identify the location of and obtain access to the national data on population health care needs		
Use existing national quality standards of midwifery care, or if necessary, obtain examples of quality standards		
Take steps to incorporate these into the curriculum		
Are other actions required? (If so, please list below)		

<u>Principle 4</u> Midwifery education has the individual, be it the patient or the healthy person, as its main focus, and takes into account the significance of the contexts within which those individuals live and work, including their families, partners, social groups and communities.

_		Years	Months
	Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
	Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
	Are other actions required? (If so, please list below)		

<u>Principle 5</u> A proportion of midwifery education is interdisciplinary and multiprofessional.

Review the redesigned curriculum to identify opportunities	Years	Months
for interdisciplinary and multiprofessional shared teaching and learning		
Consult as required with interested professional groups (list these professional groups in your Action Plan)		
Agree with these professional groups an implementation plan for the commencement of the shared teaching		
and learning		
Are other actions required? (If so, please list below)		

<u>Principle 6</u> Admission to midwifery education follows successful completion of secondary school education, with qualifications equivalent to those required by our country for university entrance. Alternatively, entry may be based on formal accreditation of prior learning and/or relevant experience, provided this is a normal route of entry to the university concerned, and acceptable to the midwifery statutory body.

~	Years	Months
Draw up a phased national plan designed to raise entry qualifications		
Consult as required with interested parties (list these parties in your Action Plan, e.g. Ministry/Ministries of Health and Education, universities, professional	_	_
associations)		
Arrange for modification of the statutory regulations governing midwifery education		
Seek information on systems for accreditation of prior learning and/or relevant experience, so that these can		
be considered for relevance to your country		
Identify the financial resources required		
Are other actions required? (If so, please list below)		

<u>Principle 7</u> The length of the programme is sufficient to achieve the specified competencies and is not less than three years.

_		Years	Months
	Arrange for modification of the statutory regulations governing midwifery and midwifery education		
	Consult as required with interested parties (list these parties in your Action Plan, e.g. Ministry/ Ministries of Health and Education, universities, professional		
	associations)		
	Identify the financial resources required		
	Are other actions required? (If so, please list below)		

<u>Principle 8</u> Students are not employees during their education, and enjoy a status equivalent to other university (or equivalent) students in our country. This applies throughout the theory and practice components of their education.

	Years	Months
Analyse the workforce implications of withdrawing student labour in terms of:		
- the total number of replacement posts required		
- the implications for number of placements		
Adjust the number of places available in midwifery education programmes in the country		
Identify the financial resources required		
Arrange for modification of the statutory regulations governing midwifery and midwifery education		
Are other actions required? (If so, please list below)		

<u>Principle 9</u> Successful completion of the midwifery programme leads to professional qualification as a midwife.

_		Years	Months
	Arrange for modification of legislation and statutory regulations governing midwifery and midwifery education		
	Are other actions required? (If so, please list below)		

<u>Principle 10</u> Qualification as a midwife may be achieved either via a programme based on prior qualification as a nurse or via a direct-entry programme.

_		Years	Months
	Arrange for modification of legislation and statutory regulations governing midwifery and midwifery education		
	Are other actions required? (If so, please list below)		

<u>Principle 11</u> The academic level of the professional qualification as a midwife is that of a university (or equivalent) degree in midwifery.

	Years	Months
Consult as required with interested parties (list these parties in your Action Plan, e.g. Ministry/		
Ministries of Health and Education, universities,	_	_
professional associations)		
Analyse the workforce implications		
Identify the financial resources required		
Arrange for modification of statutory		
regulations governing midwifery and midwifery education		
Are other actions required? (If so, please list below)		

<u>Principle 12</u> There is only one level of qualified midwife in our country.

_		Years	Months
	Decide on the date for cessation of the second-level midwifery qualification		
	Review the existing second-level midwifery curriculum to identify areas where change is required		
	Agree those areas of the WHO curriculum (see Section 8 of the Strategy) that second-level midwives require to complete to upgrade to first level		
	Consult with interested parties (list these parties in your Action Plan, e.g. Ministry/Ministries of Health and Education, universities, professional associations)		
	Analyse the workforce implications of withdrawing second-level student midwives in terms of the total number of replacement posts required		
	Identify the financial resources required		
	Adjust the number of places available in midwifery education programmes in the country		
	Arrange for modification of the statutory regulations governing midwifery and midwifery education		
	Draw up a phased implementation programme for the upgrading of second-level midwives to first level		
	Are other actions required? (If so, please list below)		

Principle 13 The curriculum is research-, evidence- and competency-based.

	Years	Months
Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
Are other actions required? (If so, please list below)		

<u>Principle 14</u> The specified competencies include the ability to practise in hospital and community settings and as a member of the multiprofessional health care team.

	Years	Months
Review the existing curriculum to identify areas of compatibility and incompatibility with this principle		
Take steps to modify the existing curriculum to bring it into line with the principle (List all steps required)		
Consider the implications for placements in the community settings		
Are other actions required? (If so, please list below)		

<u>Principle 15</u> The relevant EC Council Directives for midwifery serve as the minimum in our country.

On the list below, please tick the actions you consider will be required in order for your country to achieve this principle, and your current estimate of the time scale required to implement these, calculated from the above date of completion of this analysis. (The Strategy curriculum is designed to meet the EC Directives.)

	Years	Months
Arrange for modification of statutory regulations governing midwifery and midwifery education	;	
Identify the financial resources required		
Are other actions required? (If so, please list belo	ow)	

<u>Principle 16</u> Initial preparation and qualification forms the basis of continuing professional development and education.

Assess requirements in terms of continuing	Years	Months
professional development for the existing midwifery midwifery workforce		
Consider systems to provide continuing professional development		
Identify the financial resources required		
Enable the existing midwifery workforce to access continuing professional development		
Are other actions required? (If so, please list below)		

<u>Principle 17</u> The university (or equivalent), its school or department of midwifery and the practice placement areas in the hospitals and community settings are formally accredited and have in place systems of quality improvement/control.

Note: Please answer this question in relation to whatever type of nursing school your country has, whether or not it is at university level.

	Years	Months
Obtain examples of systems of educational accreditation and quality improvement/control		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Draft an appropriate system for your country, including regulations to ensure the standards and fairness of the accreditation and quality improvement/control		
Are other actions required? (If so, please list below)		

<u>Principle 18</u> The midwifery programme is formally accredited, regularly reviewed and has valid systems of evaluation and quality improvement/control in place at local and national levels.

	Years	Months
Obtain examples of systems of midwifery programme accreditation, review and quality improvement/control		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Draft an appropriate system for your country, including regulations to ensure the standards and fairness of the accreditation and quality improvement/control		
Are other actions required? (If so, please list below)		

<u>Principle 19</u> The midwifery programme has credits allocated to the learning that takes place in both the educational institution and the practice placement settings.

_		Years	Months
	Obtain examples of systems of accreditation of learning including the European Credit Transfer System		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
	Incorporate an appropriate system into the midwifery programme, accompanied by quality controls		
	Are other actions required? (If so, please list below)		

Principle 20 The director or head of the midwifery school or department is a qualified midwife.

_		Years	Months
	Assess the educational development required to enable senior midwives to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
	Create plans to deal with the workforce planning implications		
	Identify the financial resources required		
	Implement the education programme required		
	Are other actions required? (If so, please list below)		

<u>Principle 21</u> The teaching of midwifery, in both theory and practice, is carried out by a qualified midwife.

	Years	Months
Assess the educational development required to enable experienced midwives to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

Principle 22 (a) to (j) Teachers of midwifery:

- (a) Hold a degree at an academic level equivalent to the requirements for university teachers in our country.
- (b) Hold a teaching qualification.
- (c) Hold the qualification to which the programme leads.
- (d) Have a minimum of two years of relevant practical experience.
- (e) Teach within the area of specialist midwifery practice in which they have expertise.
- (f) Maintain their clinical competence.
- (g) Are responsible for the clinical supervision of students on practice placement within their areas of specialization.
- (h) This responsibility is shared with the student's clinical mentor.

		Years	Months
t	Assess the educational development required to enable experienced midwives to gain these qualifications and to assume this role		
	Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
	Create plans to deal with the workforce planning implications		
]	Identify the financial resources required		
]	Implement the education programme required		
	Are other actions required? (If so, please list below)		

# Principle 22 (continued)

There are no qualified midwife teachers in our country, therefore:

(i) qualified teachers will be sought from other countries by means of validated networks.

If this option is chosen, estimate for how long your country will require this type of assistance.

	Years	Months
Assistance required for		

# <u>OR</u>

(j) Appropriately qualified midwives will be selected to attend teacher preparation courses.

	Years	Months
Assess the educational development required to enable experienced midwives to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities, the medical profession and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

<u>Principle 23</u> (a) to (e) Clinical midwives who teach, act as mentors and support students in their practice placements are:

- (a) Experts in their field of practice.
- (b) Receive appropriate preparation for their roles as teachers, mentors and providers of support.
- (c) Maintain their clinical competence.

	Years	Months
Assess the educational development required to enable experienced midwives to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

<u>Principle 23 (continued)</u> There are no qualified clinical midwife role models in our country, therefore:

(d) Expert midwives will be sought by means of validated networks.

Please estimate for how long your country will require this type of assistance.

	Years	Months
Assistance required for		
Analyse the language, manpower and financial implications of recruiting the necessary personnel from abroad		
Are other actions required? (If so, please list below)		

<u>OR</u>

(e) Appropriately qualified midwives will be selected to attend mentor preparation courses.

	Years	Months
Assess the educational development required to enable experienced midwives to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Are other actions required? (If so, please list below)		

<u>Principle 24</u> Student midwives receive clinical supervision (mentorship) while in clinical placements, whether in hospital or community settings. The level and amount of such supervision corresponds to the stage of their education.

	Years	Months
Assess the educational development required to enable experienced midwives to assume this role		
Consult with interested parties (list these parties in your Action Plan, e.g. representatives of universities and professional associations)		
Create plans to deal with the workforce planning implications		
Identify the financial resources required		
Implement the education programme required		
Arrange for modification of the statutory regulations governing clinical supervision		
Are other actions required? (If so, please list below)		

<u>Principle 25</u> Teachers from disciplines that contribute to midwifery education are experts in their own subjects and hold a degree equivalent to the requirements for university teachers in our country.

	Years	Months
Review the existing provision to identify areas of compatibility and incompatibility with this principle		
Consult with interested parties (list these parties in your Action Plan) to determine requirements to achieve this principle		
Implement these requirements		
Are other actions required? (If so, please list below)		

<u>Principle 26</u> University schools and departments of midwifery have, or have adequate shared access to, appropriate human and physical resources, including equipment, clinical skills laboratories and libraries.

Note: Please answer this question in relation to whatever type of midwifery school your country has, irrespective of whether it is at university level.

On the list below, please tick the actions you consider will be required in order for your country to achieve this principle, and your current estimate of the time scale required to implement these, calculated from the above date of completion of this analysis.

_		Years	Months
	Review the existing provision to identify areas of compatibility and incompatibility with this principle		
	Consult with interested parties (list these parties in your Action Plan) to determine requirements to achieve this principle		
	Identify the financial resources required		
	Draw up, in collaboration with the Ministry of Education, a phased programme for implementation of these standards		
	Implement the programme in accordance with the timetable developed		
	Are other actions required? (If so, please list below)		

THE REGIONAL ADVISER FOR NURSING AND MIDWIFERY OF THE WHO EUROPEAN REGION WISHES TO THANK YOU VERY MUCH FOR COMPLETING THIS ANALYSIS. THE RESULTS WILL BE ANALYSED AND YOU WILL RECEIVE AN ANNUAL REPORT ON THE POSITION OF NURSING EDUCATION ACROSS THE REGION. YOUR COUNTRY WILL NOT BE IDENTIFIED IN THE REPORT BUT, SINCE YOU WILL KNOW YOUR COUNTRY IDENTIFICATION NUMBER, SHOULD YOU WISH YOU WILL BE ABLE TO COMPARE YOUR SITUATION WITH THAT OF OTHER MEMBER STATES IN THE REGION.

# Glossary

Academic level The level of difficulty of a subject. For example, Level 1 is commonly used to describe the first-year studies in a baccalaureate degree, while Master's level describes study at Master's degree and doctoral level study at the level of Doctor of Philosophy or Doctor of Science.

**Accreditation** The process by which a statutory body, an agency or an organization scrutinizes, evaluates and recognizes an institution, programme or curriculum as meeting the standards necessary for providing a particular service (WHO 2000a). A process, based on a system of external peer review, and using written standards, by which the quality of a university's activities and its educational programmes are assessed and, if satisfactory, approved (from Section 9 of these Guidelines).

Basic nursing education See Initial nursing education.

**Benchmarks** Statements that describe general expectations about standards for an academic award in a defined discipline or subject area. Benchmarking is not about listing specific knowledge and skills or about 'standardising content of programmes, or prescribing any form of national curriculum' ... Benchmarks 'seek to articulate the intellectual attributes that should be possessed by a person who has studied successfully to degree level in the discipline' and such statements 'provide the starting point for the judgements that will be made on standards' (Randall 2000: p. 2).

**Benchmarking** A means of articulating and recording the expectations that are shared within a subject community (Randall 2000: p. 3).

**Competent authority** The body charged with the right and responsibility, under statute, to maintain a register of nurses and/or of midwives.

**Curriculum** The totality of the education programme. The term is defined in more detail in Section 1 of these Guidelines.

**Discipline of nursing and/or of midwifery**: The subject area that comprises the art and science of nursing and/or of midwifery.

**Family** One person or a group of people living together and either related to one another by blood, marriage or adoption or living as partners.

**Holistic care** Nursing and/or midwifery care that views the *patient* (q.v.) as an individual within his or her particular life context and that does not focus purely on one element only, e.g. the presenting health problem or health deficit or, in the case of the pregnant woman, the pregnancy. Holistic care sees the illness/health deficit as an episode in the patient's journey through life, and takes into account the possible cause(s) of that illness and its effects on her/his post-illness recovery, rehabilitation or peaceful death, including the impact on her/his family members and significant others. Likewise, holistic care of the mother takes into account the totality of her life circumstances and the likely impact of the pregnancy and its outcome on her, her family members and significant others.

**Initial nursing and/or midwifery education** A planned educational programme that provides a broad and sound foundation for the effective practice of professional nursing and/or of midwifery and a basis for continuing professional education (adapted from an ICN definition of basic nursing education, 1973).

**Integrated curriculum** 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 (*see also* Section 1.5.2).

Licensing See Registration.

**Medical model** As used in these Guidelines, a nursing and/or midwifery curriculum that focuses more on medical conditions and cure than on the art and science of evidence-based nursing and/or midwifery care.

Module A coherent unit of study or subject within a curriculum.

Nursing science The body of knowledge that is nursing.

**PHARE**: An EU funding organization.

**Patient** The person who is the end-user in all health systems. S/he is the human being who is meant to benefit from our efforts, but who, if reduced to a mere statistic, demonstrates that the heart has gone out of the profession (i.e. the professions of nursing and of midwifery) (WHO 2000a).

**Programme** As used in these Guidelines, the complete course of study (i.e. curriculum) leading to qualification as a nurse or as a midwife.

**Registration** A method of ensuring a record is maintained of those who are *bona fide* nurses and/or midwives.

Skill mix: A group of staff comprising individuals with different levels of qualification and skill.

**Standards** A means of measuring the degree of excellence of an educational programme and of comparing the degree of excellence of one programme with that of others.

SWOT (Strengths, Weaknesses, Opportunities, Threats) A framework for analysis.

Task A single unit of work into which an activity can be subdivided (Hogarth 1978).

**Teamwork** A method of working towards a common goal which enables several persons to make the best use of their qualities by combining their skills and experience (Hogarth 1978).

University level Study within a university for a degree.

Please refer to the Strategy (WHO 2000a), where a further glossary is to be found.

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