Competency Assessment Tool For Applicants requesting Alberta Equivalency

This assessment tool has been developed to assist you in identifying for the College of Midwives of Alberta how you have met the competencies equivalent to those required for Midwifery practice and registration in Alberta. Relevant education is defined in the Alberta Midwifery Health Discipline Committee Registrant's Handbook, June 2012, page 4: "It is recognized that candidates for portfolio assessment have acquired competence through various routes of institutional learning, apprenticeship, self-study, distance education and continuing education or a combination of any or all of the above". Relevant education is considered to be any form of education whether formal, non-formal, apprenticeship or self-directed which has enabled you to acquire the competencies as set out below. In all cases, authentic verification documentation such as transcripts, course syllabi/outlines, certification, licensing, workshop certificates, etc. are required. All documentation must be independently verifiable.

It is important that you read the instructions and complete this tool accurately as the information you provide is used to assess your qualifications for the purposes of determining your eligibility for registration as a midwife. Be sure to organize your documented verification in a manner that can be easily found. Applications will be returned if they are incomplete or the referenced material is difficult to locate.

Methodologies and abbreviation meanings:

Educational Methodologies:

- Institutional Learning (IL) is learning from an established organization such as college or university, typically in a classroom setting or distance learning modality.
- Self study (SS) independent learning through reading or reviewing learning material (i.e. electronic media).
- Practicum (P) learning a competency, job or skill by working for a fixed period of time with someone who is a competent, registered health care professional who has attained that competency, job or skill.
- Continuing Education(CE) -education obtained through certification workshops, conferences, seminars, etc.

Evaluation Methodologies:

- Written evaluation (WE) typically an examination or test. Some competencies may be evaluated by marked assignments or written report.
- Practice Site (PS) any community based practice, agency, organization, institution or business where you have hands-on experience using the competency under the supervision of a qualified evaluator.
- Simulation/Lab (SL) simulation is imitating real world processes and is often accomplished with the assistance of equipment or mannequins designed to simulate the competency being tested.
- Objective Structured Clinical Evaluation (OSCE) circuit of short (the usual is 5–10 minutes although some use up to 15 minute) stations, in which each individual is examined on a one-to-one basis with one or two impartial examiner(s) and either real or simulated patients (actors).
- Other (O) if utilizing this category, the applicant must clearly describe the method of evaluating the competency and the qualifications of the evaluator. Peer review is an example of an "Other" evaluation methodology.

Note: Verification documentation such as preceptor reports, check sheets, outlines or log books verified by an authorized person must be submitted.

College of Midwives of Alberta Competence Equivalency Assessment Tool

Applicant's Name	(Last,	First,	Middle

Abbreviations:

IL – Institutional Learning
SS – Self Study
A –Apprenticeship
DF – Distance Education

DE – Distance Education P – Practicum

O – Other

WE – Written Evaluation PS – Practice Site

S L – Simulation/Lab

OSCE – Objective Structured Clinical Evaluation

CE – Continuing Education

If you have not acquired a competency or do not have verifying documentation of meeting a competency, please note in "Documentation verification and Location" column.

Do not write in shaded areas. These areas are for Committee/College use only.

				С	ommittee Use Only
Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
Sample Competency A	IL □ SS □ P □ CE □ Check all that apply Leave blank if not acquired	Identify which document you are using to verify this competency. Include page numbers and any other distinguishing identifiers. If you have not acquired this competency or do not have verifying documentations, note it in this column.	WE PS SL OSCE OSCE OSCE OSCE OSCE OSCE OSCE OSCE	YoNo	Greyed areas are for office use only.

Specific Competencies

I.	Antepartum Care:			
A.	Midwives have knowledge of:			
1.	The importance and functions of pre- pregnancy counseling	IL □ SS □	WE □ PS □ SL □	
	, , , , , , , , , , , , , , , , , , , ,	P □ CE □	OSCE 🗆 O 🗆	
2.	The importance and functions of antepartum care	IL□ SS□	WE □ PS □ SL □	
		P □ CE □	OSCE 🗆 O 🗆	
3.	General anatomy and physiology	IL□ SS□	WE□ PS□ SL□	
		P □ CE □	OSCE 🗆 O 🗆	
4.	Anatomy and physiology of the reproductive system	IL□ SS□	WE□ PS□ SL□	
	reproductive system	P □ CE □	OSCE O O	
5.	Physical, emotional and social changes associated with pregnancy	IL□ SS□	WE □ PS □ SL □	
	, , , , , , , , , , , , , , , , , , ,	P □ CE □	OSCE 🗆 O 🗆	
6.	Physical, emotional and social factors likely to influence pregnancy outcome	IL □ SS □	WE □ PS □ SL □	
	, ,	P □ CE □	OSCE □ O □	
7.	Clinical implications of genetics, embryology and fetal development for pregnancy	IL □ SS □	WE□ PS□ SL□	
	outcome	P □ CE □	OSCE 🗆 O 🗆	
8.	Nutritional requirements during pre- conception, pregnancy and lactation	IL□ SS□	WE□ PS□ SL□	
		P □ CE □	OSCE 🗆 O 🗆	
9.	The physiology and management of common discomforts during pregnancy	IL□ SS□	WE□ PS□ SL□	
	3, 3 - 1	P □ CE □	OSCE □ O □	

					Cor	nmittee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
10.	Methods for diagnosing pregnancy and establishing due date	IL □ SS □		WE□ PS□ SL□		
11	Assessing gestational age and assessing the	P CE C		OSCE O O		
11.	progress of pregnancy	IL SS D		WE PS SL O		
12.	Screening and diagnostic tests used during	IL 🗆 SS 🗆		WE DPS DSL D		
	pregnancy	P □ CE □		OSCE O O		
13.	Uses and interactions of any drugs that may	IL□ SS□		WE□ PS□ SL□		
	be used during pregnancy	P CE		OSCE □ O □		
14.	Alternative therapies which may be used	IL□ SS□		WE□ PS□ SL□		
	during pregnancy	P □ CE □		OSCE 🗆 O 🗆		
15.	Environmental, occupational, genetic,	IL□ SS□		WE□ PS□ SL□		
	biologic and pharmacologic hazards to the woman	P □ CE □		OSCE O		
16.	Environmental, occupational, genetic,	IL□ SS□		WE □ PS □ SL □		
	biologic and pharmacologic hazards to the fetus	P □ CE □		OSCE □ O □		
17.	Causes, recognition and treatment of abnormalities which may occur during	IL□ SS□		WE□ PS□ SL□		
	pregnancy	P□ CE□		OSCE 🗆 O 🗆		
18.	Implications of sexually transmitted diseases and vaginal infections prior to and	IL□ SS□		WE□ PS□ SL□		
	during pregnancy	P□ CE□		OSCE 🗆 O 🗆		
19.	Principles and procedure of external cephalic version	IL□ SS□		WE□ PS□ SL□		
		P CE C		OSCE □ O □		
20.	Genetic screening	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE □ O □		
В.	Midwives have the <u>ability to</u> :					
1.	Obtain a health, social and general family history	IL□ SS□		WE □ PS □ SL □		
		P □ CE □		OSCE O O		
2.	Assess and promote the pregnant woman's general health and well-being	IL □ SS □		WE□ PS□ SL□		
2		P □ CE □		OSCE 🗆 O 🗆		
3.	Perform a physical examination, including: i. Maternal blood pressure, pulse,					
	respirations, temperature and weight	IL 🗆 SS 🗆		WE PS SL D		
	measurements and urinalysis, and recognize abnormal findings	P □ CE □		OSCE □ O □		
	ii. Breast exam	IL □ SS □		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
	iii. Uterine size, fetal position and presentation, and estimation of fetal	IL□ SS□		WE□ PS□ SL□		
	size and gestational age	P □ CE □		OSCE 🗆 O 🗆		
	iv. A pelvic and speculum examination	IL □ SS □		WE□ PS□ SL□		
	W. Accordment of the coft and beauti	P□ CE□		OSCE □ O □		
	v. Assessment of the soft and bony structures of the pelvis	IL 🗆 SS 🗆		WE PS SL D		
4.	Perform venipuncture and finger puncture	P CE C		OSCE O O		
•	and myor parietal	IL SS CE CE C		WE□ PS□ SL□ OSCE□ O□		
5.	Confirm pregnancy	IL □ SS □		WE PS SL		
		P CE C		OSCE □ O □		
6.	Assess general nutritional status and	IL 🗆 SS 🗆		WE□ PS□ SL□		
	provide or recommend appropriate counselling	P CE		OSCE □ O □		
7.	Manage common discomforts associated	IL 🗆 SS 🗆		WE□ PS□ SL□		
_	with pregnancy	P□ CE□		OSCE □ O □		
8.	Assess fetal well-being	IL □ SS □		WE□ PS□ SL□		
		P□ CE□	•			

Comment	Education	Decument Verificati	Frank - Co.		ommittee Use Only
Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
Assess for signs and symptoms of abnormal conditions	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
Obtain the necessary specimens to determine the presence of sexually	IL□ SS□		WE□ PS□ SL□		
transmitted diseases	P□ CE□		OSCE 🗆 O 🗆		
Obtain the necessary specimens to determine the presence of vaginal	IL□ SS□		WE□ PS□ SL□		
infections	P□ CE□		OSCE □ O □		
12. Obtain the necessary specimens to determine the presence of cytological	IL□ SS□		WE□ PS□ SL□		
changes	P□ CE□		OSCE □ O □		
Educate parents regarding newborn behaviour	IL□ SS□		WE □ PS □ SL □		
Dellavioui	P□ CE□		OSCE □ O □		
 Educate parents regarding newborn nutrition, feeding and care 	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE 🗆 O 🗆		
15. Counsel the mother on the benefits and practice of breastfeeding	IL□ SS□		WE□ PS□ SL□		
practice of breastreeding	P□ CE□		OSCE □ O □		
II. Intrapartum Care:					
A. Midwives have knowledge of:	1	1	1	_	
The process of labour	IL□ SS□		WE □ PS □ SL □		
	P□ CE□		OSCE 🗆 O 🗆		
2. The mechanisms of labour and birth	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
Assessment of maternal well-being	IL□ SS□		WE □ PS □ SL □		
	P□ CE□		OSCE □ O □		
4. Assessment of fetal well-being	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
 Assessment of the onset and progress of labour and birth 	IL□ SS□		WE□ PS□ SL□		
laboul and birth	P□ CE□		OSCE □ O □		
Comfort and support measures during labour and birth	IL□ SS□		WE□ PS□ SL□		
ומטטעו מווע טוונוו	P□ CE□		OSCE □ O □		
7. Holistic approaches to facilitate labour	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
8. Anatomy of the fetal skull and its landmarks	IL□ SS□		WE □ PS □ SL □		
	P□ CE□		OSCE □ O □		
9. Fetal heart rate patterns including	IL□ SS□		WE□ PS□ SL□		
electronic monitoring of these patterns	P□ CE□		OSCE □ O □		
10. Aseptic technique	IL□ SS□		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
11. Significance of ruptured membranes and	IL□ SS□		WE□ PS□ SL□		
methods for reducing risk of infection	P□ CE□		OSCE □ O □		
12. Abnormalities of labour	IL 🗆 SS 🗆		WE□ PS□ SL□		
	P□ CE□		OSCE □ O □		
13. Prevention, assessment and management	IL 🗆 SS 🗆		WE PS SL		
of exhaustion during labour	P CE C		OSCE D O D		

OSCE 🗆 O 🗆

OSCE □ O □

osce □ o □

OSCE □ O □

WE □ PS □ SL □

WE □ PS □ SL □

WE \square PS \square SL \square

P □ CE □

IL □ SS □

P □ CE □

IL \square SS \square

P □ CE □

IL \square SS \square

 $\mathsf{P} \; \square \quad \mathsf{CE} \; \square$

14. Prevention, assessment and management

15. Prevention, assessment and management of ketonuria during labour

16. Techniques to protect the perineum, avoid

episiotomy and minimize lacerations

of dehydration during labour

					Co	ommittee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
17.	Indications and procedure for episiotomy	IL□ SS□		WE □ PS □ SL □		
10	Indications and procedure for repair of	P□ CE□		OSCE O O		
18.	lacerations or episiotomy	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE O O		
19.	Prevention and treatment of hemorrhage	IL□ SS□		WE □ PS □ SL □		
20	Davies which was the weed division the	P □ CE □		OSCE 🗆 O 🗆		
20.	Drugs which may be used during the intrapartum period	IL□ SS□		WE□ PS□ SL□		
21	Obstetrical interventions used to assist in	P□ CE□		OSCE O O		
21.	labour	IL SS -		WE PS SL =		
22	Obstatrical interventions used in a marganey	P□ CE□		OSCE O O		
22.	Obstetrical interventions used in emergency care	IL□ SS□		WE□ PS□ SL□		
22	Name and account to the account	P□ CE□		OSCE O O		
23.	Neonatal resuscitation	IL□ SS□		WE□ PS□ SL□		
	Midwing have the children	P CE		OSCE O O		
B. 1.	Midwives have the ability to: Provide emotional and physical support to					
	the labouring woman and her support	IL SS S		WE PS SL		
2.	people Conduct a spontaneous labour and birth	P □ CE □		OSCE O O		
۷.	Conduct a spontaneous labour and birth	IL □ SS □		WE PS SL D		
3.	Assess the onset and progress of labour and	P CE C		OSCE O O		
Э.	take appropriate action according to the	IL □ SS □		WE PS SL =		
	 Frequency, duration and intensity of uterine contractions 	P □ CE □		OSCE □ O □		
	ii. Station of the fetal presenting part,	IL 🗆 SS 🗆		WE□ PS□ SL□		
	and position, presentation, attitude, and degree of moulding	P□ CE□		OSCE □ O □		
	iii. Condition of the cervix	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
4.	Recognize abnormal labour patterns and	IL□ SS□		WE□ PS□ SL□		
	identify the probable causes	P□ CE□		OSCE □ O □		
5.	Assess fetal heart tones with a fetoscope,	IL□ SS□		WE□ PS□ SL□		
	doppler and electronic fetal monitor	P□ CE□		OSCE □ O □		
6.	Determine the status of fetal membranes and perform amniotomy as necessary	IL□ SS□		WE □ PS □ SL □		
	and perform animotomy as necessary	P □ CE □		OSCE □ O □		
7.	Assess amniotic fluid	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
8.	Recognize a full bladder and catheterize if	IL□ SS□		WE□ PS□ SL□		
	necessary	P □ CE □		OSCE □ O □		
9.	Protect the perineum, avoid unnecessary episiotomy and minimize lacerations	IL □ SS □		WE □ PS □ SL □		
	episiotomy and minimize lacel ations	P□ CE□		OSCE □ O □		
10.	Perform and repair episiotomy as necessary, in accordance with the	IL□ SS□		WE □ PS □ SL □		
	Midwifery Regulation	P□ CE□		OSCE 🗆 O 🗆		
11.	Inspect the perineal and vulval areas for lacerations, hematomas, and abrasions and	IL□ SS□		WE□ PS□ SL□		
	take action in accordance with the Midwifery Regulation	P□ CE□		OSCE □ O □		
12.	Collect cord blood	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
13.	Recognize signs and separation of the	IL □ SS □		WE □ PS □ SL □		
	placenta; receive and inspect the placenta	P□ CE□		OSCE □ O □		
14.	Recognize and manage postpartum	IL □ SS □		WE□ PS□ SL□		
	hemorrhage	P□ CE□		OSCE □ O □		

	Competency	Education	and Location	Method	Met	Comments
15.	Recognize the early signs of maternal shock, initiate treatment, and perform ongoing	IL □ SS □		WE □ PS □ SL □		
16	assessment Perform immediate newborn assessment	P □ CE □		OSCE O O		
10.	and care	IL □ SS □		WE PS SL =		
17	Perform neonatal resuscitation including	P □ CE □		OSCE O O		
17.	intubation	IL □ SS □		WE PS SL -		
18	Assess the need for relief of pain and	P □ CE □		OSCE O O		
10.	intervene using non-pharmacological and	IL □ SS □		WE PS SL D		
	pharmacological measures as required in accordance with the Midwifery Regulation and established guidelines	P □ CE □		OSCE □ O □		
19.	Give injections, insert an intravenous	IL 🗆 SS 🗆		WE□ PS□ SL□		
	catheter and administer intravenous fluids and medications in accordance with the	P □ CE □		OSCE □ O □		
20	Midwifery Regulation and established guidelines					
20.	Administer inhalants in accordance with the Midwifery Regulation and established	IL□ SS□		WE □ PS □ SL □		
21	guidelines	P □ CE □		OSCE O O		
21.	Encourage and assist with the initiation of breast-feeding	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE 🗆 O 🗆		
1111	Postpartum Care of the					
••••	Newborn:					
A.	Midwives have knowledge of:					
1.	Anatomy and physiology of the newborn	IL 🗆 SS 🗆		WE □ PS □ SL □		
		P□ CE□		OSCE □ O □		
2.	Growth and development of the newborn	IL 🗆 SS 🗆		WE □ PS □ SL □		
		P □ CE □		OSCE □ O □		
3.	Newborn assessment	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
4.	Gestational age assessment	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
5.	Newborn screening and diagnostic testing	IL □ SS □		WE□ PS□ SL□		
		P □ CE □		OSCE O		
6.	,	IL□ SS□		WE□ PS□ SL□		
	properties of breast milk and infant formula, and methods of infant feeding	P □ CE □		OSCE □ O □		
7.	Signs and symptoms of abnormal conditions	IL□ SS□		WE□ PS□ SL□		
	in the newborn	P □ CE □		OSCE □ O □		
8.	Prophylactic medications commonly given	IL □ SS □		WE□ PS□ SL□		
	to the newborn	P □ CE □		OSCE □ O □		
9.	Effects of drugs on the newborn, including prescriptive and non-prescriptive	IL□ SS□		WE□ PS□ SL□		
	substances excreted through the breast milk	P□ CE□		OSCE □ O □		
10.	Environmental, biological and pharmacologic hazards to the newborn	IL □ SS □		WE □ PS □ SL □		
	· -	P □ CE □		OSCE 🗆 O 🗆		
11.	Circumcision	IL □ SS □		WE □ PS □ SL □		
		P □ CE □		OSCE 🗆 O 🗆		
	Midwives have the <u>ability to:</u>	ı			,	
1.	Provide initial newborn assessment and care	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE 🗆 O 🗆		
2.	Administer eye prophylaxis and vitamin K	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE O O		

Committee Use Only

					С	ommittee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
3.	Perform newborn physical and behavioral assessment and provide basic newborn care	IL □ SS □ P □ CE □		WE PS SL O		
4.	Assess newborn jaundice	IL □ SS □ P □ CE □		WE PS SL O		
5.	Perform a heel puncture to obtain samples	IL □ SS □ P □ CE □		WE PS SL O		
6.	Assess the ongoing well-being and development of the newborn in the first six weeks of life and make appropriate referrals as necessary	IL SS D		WE PS SL O		
7.	Continue to educate parents regarding newborn growth, development, behaviour, nutrition, feed and care	IL □ SS □ P □ CE □		WE PS SL O		
8.	Provide information to parents on the benefits and risks of immunization	IL SS D		WE DPS SL D		

11/	IV. Postpartum Care of the								
	·								
	Mother								
Α.	Midwives have knowledge of:								
1.	Anatomy and physiology of the postpartum period, including lactation	IL □ SS □	WE □ PS □ SL □						
	postpartam period, moraum, actation	P □ CE □	OSCE □ O □						
2.	Postpartum assessment of the woman	ı∟ □ ss □	WE □ PS □ SL □						
		P□ CE□	OSCE □ O □						
3.	Emotional and psychological aspects of the postpartum period, including	ı∟ □ SS □	WE □ PS □ SL □						
	breastfeeding and early parenting	P□ CE□	OSCE □ O □						
4.	Nutritional requirements for women during the postpartum period	ı∟ □ ss □	WE □ PS □ SL □						
	daring the postpartam period	P□ CE□	OSCE □ O □						
5.	Self-help strategies, including exercise, that will aid the mother in postpartum	ı∟ □ ss □	WE □ PS □ SL □						
	recovery	P□ CE□	OSCE □ O □						
6.	Principles of breastfeeding and management of common breastfeeding	ı∟ □ ss □	WE □ PS □ SL □						
	problems	P□ CE□	OSCE □ O □						
7.	Stimulation and suppression of lactation	IL□ SS□	WE□ PS□ SL□						
		P□ CE□	OSCE □ O □						
8.	Effects of drugs on lactating women	ı∟ □ ss □	WE □ PS □ SL □						
		P□ CE□	OSCE □ O □						
9.	Postpartum discomforts and management	IL□ SS□	WE□ PS□ SL□						
		P□ CE□	OSCE □ O □						
10.	Environmental, occupational, biological and pharmacologic hazards to lactating	ı∟ □ ss □	WE □ PS □ SL □						
	women	P□ CE□	OSCE □ O □						
11.	Assessment and management of postpartum complications, including	IL□ SS□	WE□ PS□ SL□						
	postpartum depression	P□ CE□	OSCE □ O □						
12.	Methods of birth control and family planning, and their risks and benefits,	IL□ SS□	WE□ PS□ SL□						
	including the implications of sexually transmitted diseases	P □ CE □	OSCE □ O □						
13.	Rh incompatibility and administration of	IL 🗆 SS 🗆	WE □ PS □ SL □						
	RhD immune globulin	P□ CE□	OSCE □ O □						

						Committee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
В.	Midwives have the ability to:			l		
1.	Assess the health and monitor the progress	IL□ SS□		WE□ PS□ SL□		
	of the woman in the postpartum period	P□ CE□		OSCE □ O □		
2.	Assist the mother to establish and maintain	IL□ SS□		WE□ PS□ SL□		
	the chosen method of infant feeding	□ CE □		OSCE □ O □		
3.	Educate clients regarding P self-care,	IL□ SS□		WE□ PS□ SL□		
	normal postpartum progress, and signs and symptoms of common postpartum complications	P □ CE □		OSCE □ O □		
4.	Facilitate the introduction of the new	IL□ SS□		WE□ PS□ SL□		
	member of the family	P□ CE□		OSCE □ O □		
5.	Conduct the six week postpartum	IL□ SS□		WE□ PS□ SL□		
	assessment	P□ CE□		OSCE □ O □		
6.	Perform a bimanual and speculum	IL□ SS□		WE□ PS□ SL□		
	examination	P□ CE□		OSCE □ O □		
7.	Assess the uterine size, shape, consistency	IL□ SS□		WE□ PS□ SL□		
	and mobility, and cervical and vaginal health	P□ CE□		OSCE □ O □		
8.	Counsel clients in decision-making	IL□ SS□		WE□ PS□ SL□		
	regarding contraceptive methods	P□ CE□		OSCE □ O □		
9.	Instruct clients in the use of contraception	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE □ O □		
10.	Fit diaphragms and cervical caps	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE □ O □		
V.	Education and Counseling: Midwives have knowledge of:					
1.	The principles and processes of informed	IL□ SS□		WE□ PS□ SL□		
	decision making	P□ CE□		OSCE □ O □		
2.	Principles and adult education,	IL□ SS□		WE□ PS□ SL□		
	communication and counseling	P□ CE□		OSCE □ O □		
3.	Theoretical approaches to prenatal and parenting education	IL□ SS□		WE□ PS□ SL□		
	parenting education	P□ CE□		OSCE 🗆 O 🗆		
4.	Issues related to grief and loss in childbearing	IL□ SS□		WE□ PS□ SL□		
	ciniubearing	P□ CE□		OSCE 🗆 O 🗆		
5.	Available community resources	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE 🗆 O 🗆		
6.	Cultural influences on childbearing and child rearing	IL□ SS□		WE□ PS□ SL□		
	rearing	P□ CE□		OSCE 🗆 O 🗆		
7.	Issues related to abuse and discrimination	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE 🗆 O 🗆		
В.	Midwives have the <u>ability to</u> :	1	T	T		
1.	Provide objective information about care alternatives, including options, risks and	IL□ SS□		WE□ PS□ SL□		
	benefits to facilitate informed decision making	P□ CE□		OSCE □ O □		
2.	Identify and respond to clients' educational needs	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE □ O □		
3.	Communicate effectively with clients and their support people	IL□ SS□		WE□ PS□ SL□		
	area support people	P□ CE□		OSCE □ O □		

						Committee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
4.	Assist the woman and her family in planning	IL□ SS□		WE□ PS□ SL□		
	and preparing for the birth experience and early parenting	P □ CE □		OSCE □ O □		
5.	Assess the emotional status of the woman	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE O O		
6.	Assess the effectiveness of their own	IL 🗆 SS 🗆		WE DPS DSL D		
	counselling skills	P □ CE □		OSCE O O		
7.	Counsel and support the woman and her	IL □ SS □				
	family in responding to grief and loss in			WE PS SL D		
8.	childbearing Provide prenatal and parenting education	P CE C		OSCE O O		
0.	The first of the f	IL SS S		WE PS SL S		
9.	Respond sensitively to cultural differences in	P □ CE □		OSCE O O		
٥.	providing care to clients	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE 🗆 O 🗆		
VI.	Sexuality Midwives have knowledge of:					
1.	Physiological and psychosocial components and common issues of human sexuality	IL □ SS □		WE□ PS□ SL□		
		P□ CE□		OSCE 🗆 O 🗆		
2.	Physiological and psychosocial components and common issues of fertility	IL □ SS □		WE□ PS□ SL□		
	and common issues of fertility	P □ CE □		OSCE □ O □		
3.	Human sexuality during the childbearing	IL□ SS□		WE□ PS□ SL□		
	cycle	P □ CE □		OSCE O		
4.	Fertility during the childbearing cycle	IL □ SS □		WE□ PS□ SL□		
		P□ CE□		OSCE O		
5.	Infertility and its treatment	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE O		
6.	Factors involved in decision-making about	IL □ SS □		WE□ PS□ SL□		
	unplanned or unwanted pregnancies	P□ CE□		OSCE 🗆 O 🗆		
7.	Resources for counselling and referral for	IL □ SS □		WE□ PS□ SL□		
	unplanned or unwanted pregnancies	P□ CE□		OSCE 🗆 O 🗆		
В.	Midwives have the ability to:					
1.	Inform and advise clients on issues of human	IL □ SS □		WE□ PS□ SL□		
	sexuality, fertility and unplanned pregnancies, and make referrals where appropriate	P□ CE□		OSCE □ O □		
VII.	Collaboration with Other					
	Caregivers					
A.	Midwives have knowledge of:					
1.	The roles and responsibilities of other health	IL 🗆 SS 🗆		WE□ PS□ SL□		
	care providers and their standards of practice	P □ CE □		OSCE □ O □		
2.	Terminology relevant to childbearing	IL 🗆 SS 🗆		WE DPS DSL D		
		P □ CE □		OSCE O O		
В.	Midwives have the ability to:			5562 5 5		
1.	Communicate effectively with other	IL □ SS □		WE□ PS□ SL□		
	caregivers, facilitating referral, consultation, and collaboration when appropriate	P CE		OSCE O O		
	ана сонавогации мнен арргоргате				ı	

						Committee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
VI	II.Professional, Legal and					
	Other Aspects					
A.	Midwives have knowledge of:					
1.	The history and philosophy of midwifery	ı∟ ss 🗆		WE□ PS□ SL□		
		P □ CE □		OSCE □ O □		
2.	The standards of practice for midwifery	IL□ SS□		WE□ PS□ SL□		
		P□ CE□		OSCE □ O □		
3.	The code of ethics for the practice of	IL□ SS□		WE□ PS□ SL□		
	midwifery	P□ CE□		OSCE □ O □		
4.	Legislation and health agency policies and	IL□ SS□		WE□ PS□ SL□		
	procedures pertaining to midwifery	P□ CE□		OSCE □ O □		
5.	Legal responsibilities and obligations to	IL□ SS□		WE□ PS□ SL□		
	clients and other health care providers	P□ CE□		OSCE □ O □		
6.	The health care system in Alberta as it	IL□ SS□		WE□ PS□ SL□		
	pertains to the practice of midwifery, including existing health services, protocols	P□ CE□		OSCE □ O □		
	and regulations regarding communicable					
7.	diseases, infection control and immunization Provincial documentation and reporting					
/.	standards and requirements	IL□ SS□		WE□ PS□ SL□		
		P □ CE □		OSCE 🗆 O 🗆		
For	office use only					