

Framework study plan Bachelor's degree 2006

Degree course in
Midwifery

at the University of Applied Sciences
Western Switzerland

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Preamble

The Midwifery degree course is an integral part of the "Health" field of the HES-SO, which also includes the degree courses in Nutrition and Dietetics, Occupational Therapy, Physiotherapy, Psychomotricity, Radiologic Medical Imaging Technology and Nursing.

1. Introduction to the profession

The work of a midwife is centred on the woman during her full period of fecundity. The midwife provides independent, comprehensive support and monitoring of women and newborns in good health, from conception to the time before, during and after the birth, also involving the family. Midwives also assist at physiological childbirths under their own responsibility. They keep women, couples and families informed and provide care, taking account of usages and customs and of individual wishes.

As maternity specialists, midwives assist the (future) mother to develop her own resources, combining a fundamental knowledge of the natural process of maternity with technological proficiency.

Having physiology as a field of activity in independent practice within a care profession paradoxically adds to its complexity. Recognition of the limits of independent actions implies permanent vigilance with regard to the standards and to the emergence of imbalance within balance. The complexity of the profession and the demanding skills it requires lies in the subtle maintenance of balance – the balance of physiology, but also that between mother and child, between acting and allowing to happen, determination and flexibility, technology and tradition, interdisciplinarity and autonomy, etc.

The image, environment and demands of the profession of midwife have changed considerably in the modern age. Developments in the political, economic and social context are reflected in the development of new structures more in line with the demands of women and their society. These numerous changes will increase the complexity of a profession that is at the heart of the social dynamic.

Faced with these changes, the profession is opening up and orienting itself by developing new perspectives: specific research and a broadening of the areas of intervention in line with the social evolution of women.

2. Concept of the degree course

Maternity and the perinatal period form a context of **complex professionalisation**, in which developments can never be accurately foreseen. It involves complexity as the parameters that have to be taken into account are numerous, the knowledge called upon is wide and varied and there are always uncertainties. It is therefore a matter of developing, right from the start of the practical training, those skills which prepare students for enlightened participation and ultimately equip them for the appropriate management of obstetric and perinatal situations. In order to do this they first of all need to build up the skills normally called for in less complex situations, and then move on to from there to introduce more complex elements progressively.

In response to the professional requirement for autonomy, decision-making and empowerment, the course has drawn up a skills base, on the basis of an analysis of the exercise of the profession of midwife and the uncertainties that confront midwives in their daily lives. This skills base has been drawn up using a deductive method founded on generic skills: the activities demanded of students have been broken down into the specific skills expected.

In the direct option of the midwifery course, the Bachelor-level skills will be developed on the basis of the knowledge and skills acquired by students in their previous education and training or during their preparatory year (preparatory modules) which precede the start of the Bachelor's degree course.

For the post-basic option at Bachelor level, the entry level is different, since this course is aimed at students who already have a UAS/Bachelor's degree in nursing. These students will already have developed related skills and knowledge, some of which will be interchangeable with those of midwives. This means that the programme, understood as the way of expressing the means and processes for achieving the end results, appears to be the best solution from an educational, structural and organisational point of view for offering persons beginning the course at this level the best conditions for reaching the final level of attainment. With this in mind and in response to these aspects, the programme is designed to provide for the development of the skills specific to the profession.

2.1 Skills base

A. • Decide on the suitable actions to be taken for the support, maintenance and/or restoration of the physiological process of maternity, during pregnancy, the birth and the postpartum period

- A.1. knowing how to be a vigilant, responsible observer;
- A.2. in all situations providing personalised, systemic information;
- A.3. respecting the demands, needs, resources and limits of the woman, her family and the environment;
- A.4. combining the principles of the obstetric art to give a diagnosis;
- A.5. choosing the appropriate preventive, palliative and therapeutic measures, within the scope of the legal limits;
- A.6. accepting responsibility for their actions.

B. Adapt what they do within an ethical framework

- B.1. using the available technical resources wisely within their professional field;
- B.2. relying on the ethical and legal reference frameworks;
- B.3. providing information to various partners enabling them to make an enlightened choice;
- B.4. coordinating their actions with the woman, the couple and the healthcare team;
- B.5. supporting the woman, the couple and the family in their decision-making;
- B.6. upholding the rights of the woman, the child and the family;
- B.7. analysing their own life experiences while recognising the connections with the exercise of their profession and evaluating their approaches;
- B.8. recognising and keeping within the limits of their autonomy.

- C. **Support women, couples and their families in all aspects of pregnancy, birth and early childcare, whatever the context**
- C.1. preserving their personal space;
 - C.2. establishing and maintaining a relationship of trust;
 - C.3. evaluating with discernment their personal, family and environmental position;
 - C.4. bringing out each person's individual and socio-cultural resources;
 - C.5. adjusting the partnership with them, keeping a suitable distance by appropriate means;
 - C.6. intervening in the capacity of the woman's and/or her family's representative and/or mediator.
- D. **Regulate their time management, from waiting to emergency situations, long-term and on the spot**
- D.1. understanding individual rhythms – their own and those of others – and harmonising them;
 - D.2. advocating respect for the cycles of the woman, the child and the family;
 - D.3. establishing priorities for actions;
 - D.4. directing the response to an emergency situation.
- E. **Come to terms with the uncertainties and inevitable events associated with their professional sphere**
- E.1. recognising the indicators of what is normal and what is a risk;
 - E.2. anticipating with intuition born of experience;
 - E.3. judging every situation with all its possibilities;
 - E.4. measuring the particular risk;
 - E.5. creating and recreating an adequate, specific response.
- F. **Become involved in the promotion of proactive and preventive health of women and families**
- F.1. developing an accessible education method and adapting it to each woman and her family;
 - F.2. drawing up specific, varied teaching strategies;
 - F.3. seeking collaboration with peers and/or other professionals in the health, social and education networks;
 - F.4. taking a professional stance in deviant or conflicting situations;
 - F.5. formulating a professional opinion and participating in the health system.
- G. **Organise and manage, within their professional sphere, the available human, logistical, financial and administrative resources**
- G.1. planning their own work autonomously while taking account of wider systems;
 - G.2. encouraging team work;
 - G.3. regularly evaluating their own capacities, limits and needs;
 - G.4. delegating or turning to a third party if necessary;

- G.5. taking on different roles if asked;
- G.6. constantly seeking quality and efficiency.

H. Acknowledge their responsibility in the community, whatever the social/health, economic and political context

- H.1. with reference to the current quality standards;
- H.2. maintaining a critical and reflexive view of professional practice, both individually and collectively;
- H.3. participating in the development of a quality procedure;
- H.4. being involved in a procedure for continuing education and updating their practical knowledge;
- H.5. participating in research within their own profession and in an interdisciplinary context;
- H.6. showing others the relevance and value of innovative professional procedures;
- H.7. using the results of research in professional practice.

I. Contribute to professional development by sharing their knowledge and experience

- I.1. supporting the learning of future professionals;
- I.2. participating in peer review of their own representations and knowledge;
- I.3. undertaking analysis of the difference between prescribed work and real work;
- I.4. using the traditional channels (oral transmission, companionship training, etc.) and/or innovative ones (research, new technologies, etc.);
- I.5. participating in the development of professional practices based on scientific foundations.

The construction of the course curriculum takes account of learning progress, from entry-level skills of the direct type (direct option) or of the "partial professional mastery" type (post-basic option), to a full level of expertise for the two options by the end of the course.

Against this background, the course managers have drawn up a single document evaluating the skills arising from practical training. It is prescriptive for the logical organisation and acquisition of skills, and therefore the professional skills expected at the end of the course.

The sequence of skills acquisition during the course depends on the following observation axes:

- the student in the role of learner and professional,
- the student's comprehension of professional situations,
- the student's professional interventions,

at the following levels:

- **partial professional mastery** by the end of the first year in the direct option,
- by the end of the second year in the direct option and the end of the first year in the post-basic option: **confirmed professional mastery**,
- by the end of both the direct and post-basic options: **expert level**.

2.2 Educational and teaching principles

The acquisition of "specific" skills is what gives the degree course its direction: this degree course comprises certain indispensable elements. Taking account of the European recognition standards, the vast majority of the course content is obligatory, especially in the practical part (a number of activities are required for the recognition of the professional qualification at European level).

The individual educational support offered during the degree course enables students to develop independence progressively as they complete their course project.

In order to ensure the development of skills, training during the course is based on several major principles:

- The teaching of adults: the education given in the course enhances the personal and professional experiences of students, in particular enabling them to benefit as appropriate from procedures for the validation of what they have learned previously. Motivation and personal involvement are stimulated, enabling students to develop autonomy.
- The skills-based approach leads students to draw on their resources: to combine their knowledge, their know-how following workshops in skill labs, their experience and their personal resources. As training for this "combined" form of knowledge, **problem-solving based learning**, based on typical situations, enables students to understand, analyse, develop a critical approach, be creative, seek scientific proof, in order to become competent reflexive practitioners.
- Integrative alternation adds to the structure, providing for the development of reflexivity, and contextualising the development of the specific professional skills needed for professional practice.

2.3 Course axes

The course is aligned around 7 axes grouped around multidisciplinary themes, enabling students to develop their professional skills.

These course axes make up the reference system for the health and social work degree courses, promoting the development of shared modules and corresponding to research areas.

Axis 1: "Professional interventions" covers the teaching and learning systems relating to the conceptual frameworks and specific methodology of the various professions (the conceptual and practical "tools" of a given profession), but also the methodologies shared by several courses. These methodologies, which may be considered as transversal, touch on widely varying areas, for example observation, interviews, audio-visual methods, music, counselling, awareness of the personal implications in professional activities and in care and assistance relationships, professional and general ethics, etc.

This axis is put into practice in professional life along the following lines:

- Adapting oneself to the professional field of midwifery
- Preparing for parenthood
- Forming relationships during perinatal care
- Acting autonomously/acting in collaboration with others

Axis 2: "Professions, institutions and organisations" covers the teaching and learning systems relating to groups and the institutions to which professionals belong. It also explores the range of collaboration issues facing various professions and institutions. Among other things, this includes the legal, historical and organisational dimensions of the professions, work organisation and collaboration, management and administration.

This axis is put into practice in professional life along the following lines:

- Referring to the past
- Living the present: the midwife and society
- Constructing the future

Axis 3: "Individuals, cultures and societies" covers the teaching and learning systems relating to the bio-psycho-social development of individuals, the dialectic between individual and society and the different strata or fracture lines of a given society. This field also includes the knowledge of the stages and cycles of the life of human beings in their various contexts.

This axis is put into practice in professional life along the following lines:

- Understanding: Women and culture
- Knowing: Woman and couple/Woman and family
- Acting: Women and society

Axis 4: "Social and health problems, institutional responses" covers the teaching and learning systems relating to the problems and themes of social and health policies, examined in their various dimensions: psychological, sociological, legal, philosophical, ideological. This area enables students to take account of institutional responses in respect of certain aspects of public health, prevention or care.

This axis is put into practice in professional life along the following lines:

- Sociology, economics and the politics of health systems
- Current social/health problems
- Community health

Axis 5: "Health sciences" covers the teaching and learning systems relating to the multiple determinants of health, and to the notions of balance and imbalance. This field also promotes the acquisition of connected or contributory skills useful or necessary for providing care or for a specific treatment, such as the constituent elements of food, ionising effects, biomedical sciences, etc.

This axis is put into practice in professional life along the following lines:

- Health/sickness concept
- Biomedical healthcare disciplines
- Different approaches to maternity (obstetric philosophy)

Axis 6: "Technologies and their scientific foundations " covers the teaching and learning systems relating to the various technologies useful for the occupations under consideration, including those that simply assist intellectual work (IT, telematics). Mastery of technologies depends on as great an understanding as possible of their main scientific foundations.

This axis is put into practice in professional life along the following lines:

- Technology and society
- Science, technology and their impact on obstetric care

Axis 7: "Learning processes and professional project" covers the teaching and learning systems relating to the processes of the course itself, with the idea of a reflexive relationship to the course and to the transformations it stimulates at various levels – personal, professional and relational. This area enables students to acquire the tools that will facilitate their learning and the management of their individual educational project, and it provides the means for feedback on the education process of which students are stakeholders.

This axis is put into practice in professional life along the following lines:

- Education and training provision
- Learners and their relationship with knowledge
- Professional project and professionalisation processes

2.4 Alternation – practical training

The practical training takes the form of integrated alternation: the two places of education and training – the education centre and the location of the practical training – contribute jointly to the acquisition of skills. It is a shared educational project, especially as the two locations are contractually linked by the process of the practical training, which guarantees the connection between theory and practice, as well as providing the conditions necessary for the development of professional skills. Theoretical, practical and methodological learning are undertaken as much during periods of practical experience as on the educational campus. This type of education involving *integrated alternation* is characterised by:

- a reflexive approach to situations;
- the development of autonomy;
- the capacity to adapt to a diverse range of situations;
- tripartite negotiations of the contracts for educational practical experience;
- an evaluation method that involves all concerned.

The practical training period enables students to spend time in all situations where the profession of midwife is practised: pregnancy consultation departments, hospitalisation of high-risk pregnant women, delivery rooms in a university and regional environment, postpartum services, neonatal services.

The practical training period enables students to acquire the skills defined by the reference base and to complete the number of activities required by the European Union (Directives 80/154/EEC and 80/155/EEC) to obtain a professional qualification recognised throughout Europe. To meet this demand the practical training has been spread over 45 weeks of training per academic year.

The HES-SO practical training provision (framework Agreement) ensures proper supervision at the practical training location by practitioners who are also trainers. Each period of practical training is undertaken on the basis of the tripartite educational contract.

The practical training is coordinated at course level and specifies the options for completing the training available to each student on the course.

The practical training within the course amounts to 52 weeks for the direct option and 34 weeks for the post-basic option.

Attendance during the practical experience period is compulsory. All absences must be made up for. Timetables may sometimes be adjusted in line with the professionals working where the practical training is received (decision to be made by the training location). Depending on where the practical training is undertaken, students may be asked to work irregular hours, nights or weekends.

2.5 Bachelor's thesis

The Bachelor's thesis seeks to introduce students to research methods and to develop the skills required to qualify them as Midwifery graduates. The thesis is undertaken in line with the general and professional ethical principles of research.

It enables students to integrate and structure their professional knowledge by:

- consolidating the theoretical aspects of their knowledge;
- considering a specific issue within the professional sphere;
- formalising a scientific idea;
- acquiring basic skills in research methodology;
- taking a detached critical view of knowledge and professional practices;
- enriching their existing professional knowledge;
- producing new reflections and new knowledge.

The Bachelor's thesis may be undertaken individually or in groups of two or three persons maximum, within their own degree course and campus and/or involving others.

The supervision and assessment methods for the Bachelor's thesis, and the nature of the oral examination, depend on the way it is undertaken.

3. Structure of the studies

The Midwifery degree course is offered in the form of 2 options:

- A three-year direct option of 180 ECTS credits
- A two-year post-basic option at the level of a direct course of 120 ECTS credits

3.1 Academic calendar

Each year of the course is divided into 2 semesters:

- the autumn semester from Week 38 to Week 7, including 2 weeks' holiday at Christmas;
- the spring semester from Week 8 to Week 37, including 1 week's holiday at Easter.

Each campus at which the course is taught arranges the 4 weeks' holidays in accordance with its local (cantonal) requirements and directives.

The academic year includes:

- periods of theoretical education;
- periods of practical training;
- periods in skill labs;
- periods of personal work.

The academic year is organised so that it alternates between theory, practical and autonomous work. The organisation of the degree course at 2 campuses enables students to meet one another during extension modules of 6 weeks spread over the whole course.

3.2 Modular organisation

The course is made up of theoretical modules of 4 or 5 ECTS credits, essentially categorised as basic modules, extension modules and reinforcement modules.

The organisation of the practical training forming 50% provides 83 ECTS credits in the direct option, spread over 52 weeks.

For the post-basic option the practical training gives 53 ECTS credits and is spread over 34 weeks.

The personal work time is 30% with assistance and 30% autonomous. We deem work with assistance to be guided learning for building up new knowledge. We consider autonomous work to be time accounted for within the course for students to undertake their own validations and preparation for examinations.

4. Mobility/internationalisation

The midwifery course offers opportunities for mobility, more particularly for the practical training, as well as international exchanges. Programmes have been developed with this in mind. They should be a minimum of 3 months and may extend to as much as a semester of education.

Mobility generally takes place during the 4th or 5th semester of the course in the direct option, or during the 2nd or 4th semester of the course in the post-basic option. The mobility is based on a project submitted by the student and approved by the course staff.

The mobility is organised by the course staff in consultation with the international exchange manager for each campus.

5. Quality

The Bachelor's degree course in Midwifery is integrated into the HES-SO quality system.

In order to guarantee the regulation of the education systems, the campuses where the course is taught organise an evaluation of the teaching, which also involves students.

Partnership with professional environments is one of the means by which the suitability of the study plan for the requirements of practice is assessed.

