College of Midwives of Alberta

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

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.

				C	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 O Coldicate how this competency was evaluated. You must attach verification documentation such as transcripts, reports, check sheets, log books, etc. Leave blank if you do not have verifying documentation	Y o N o	Greyed areas are for office use only.

Specific Competencies

	Specific competences				
I. A.	Antepartum Care: Midwives have knowledge of:				
1.	The importance and functions of pre- pregnancy counseling	IL 🗆 SS 🗆	WE 🗆 PS 🗆 SL 🗆		
	pregnancy counseling	P CE C	OSCE 🗆 O 🗆	y contract and	Menagan Carlottian (1965) Although the
2.	The importance and functions of antepartum care	IL 🗆 SS 🗆	WE□ PS□SL□		
	bittepartain care	P CE C	OSCE 🗆 O 🗅	****	Statistical and a significant
3.	General anatomy and physiology	IL 🗆 SS 🗆	WE□ PS□ SL□		
		P CE C	OSCE 🗆 O 🗆		
4.	Anatomy and physiology of the reproductive system	IL 🗆 SS 🗆	WE□ PS□ SL□		
	reproductive system	P CE C	OSCE 🗆 O 🗆	station is	a Baltin in the manufacture of
5.	Physical, emotional and social changes associated with pregnancy	IL 🗆 SS 🗆	WE□ PS□ SL□		
	associated with pregnancy	P CE	OSCE 🗆 O 🗆		PERFORMANCE FOR LESS.
6.	Physical, emotional and social factors likely to influence pregnancy outcome	IL 🗆 SS 🗆	WE□ PS□ SL□		
	to influence pregnancy outcome	P CE C	OSCE 🗆 O 🗆		Chief and the Paris deserted
7.	Clinical implications of genetics, embryology and fetal development for pregnancy	IL 🗆 SS 🗆	WE 🗆 PS 🗆 SL 🗀		
	outcome	P CE	OSCE 🗆 O 🗆		Street, and the street, in
8.	Nutritional requirements during pre- conception, pregnancy and lactation	IL 🗆 SS 🗆	WE□ PS□ SL□		
	conception, pregnancy and decision	P□ CE□	OSCE 🗆 O 🗆	aug days Mer	·斯尔特特·克克·斯特特·克克
9.	The physiology and management of common discomforts during pregnancy	IL 🗆 55 🗆	WE□ PS□ SL□		
	Common discommon to common p agricultary	P CE	OSCE □ O □		

	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	mmittee Use Only Comments
10.	Methods for diagnosing pregnancy and	IL 🗆 SS 🗆	and Eocation	WE D PS D SL D	IVIEL	
	establishing due date	P CE		OSCE O O		
11.	Assessing gestational age and assessing the	IL D SS D		WE D PS D SL D		
	progress of pregnancy	P CE		OSCE O O		
12.	Screening and diagnostic tests used during	IL 🗆 SS 🗆		WE D PS D SL D		
	pregnancy	P CE		OSCE O O		
13.	Uses and interactions of any drugs that may	IL □ SS □		WED PS SLD		
	be used during pregnancy	PD CED		OSCE O 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 D PS D SL D		
	biologic and pharmacologic hazards to the woman	PD CED		OSCE □ O □		
16.	Environmental, occupational, genetic,	IL 🗆 SS 🗆		WE D PS D SL D		
	biologic and pharmacologic hazards to the fetus	PD CED		OSCE O O		
17.	Causes, recognition and treatment of	IL D SS D		WE D PS D SL D		
	abnormalities which may occur during	PO CEO		OSCE O O		
18.	pregnancy Implications of sexually transmitted	ILD SS D		WE - PS - SL -		
	diseases and vaginal infections prior to and	P CE C		OSCE O O		
19.	during pregnancy Principles and procedure of external	IL 🗆 SS 🗆		WE D PS D SL D		
	cephalic version	P CE C		OSCE O O		
20.	Genetic screening	IL D SS D		WE D PS D SL D		
		P CE C		OSCE □ O □		
1.	Obtain a health, social and general family history	IL SS D		WE PS SL		
2.	Assess and promote the pregnant woman's			WE - PS - SL -	THE STATE OF STREET	The control of the second
78:	general health and well-being	IL C SS C		OSCE D O D		
3.	Perform a physical examination, including:	P CE C		0302 13 0 13		
	i. Maternal blood pressure, pulse,	IL 🗆 SS 🗀		WE D PS D SL D		
	respirations, temperature and weight 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	IL 🗆 SS 🗆		WE D PS D SL D		
	presentation, and estimation of fetal size and gestational age	P CE		OSCE 🗆 O 🗅		
	iv. A pelvic and speculum examination	IL 🗆 SS 🗀		WE□ PS□ SL□		
		P□ CE□		OSCE 🗆 O 🗆		
	v. Assessment of the soft and bony	IL 🗆 55 🗆		WE□ PS□ SL□	等之中的ETE	
	structures of the pelvis	P□ CE□		OSCE □ O □		
1.	Perform venipuncture and finger puncture	· IL 🗆 SS 🗆		WE□ PS□ SL□	情况。1975年12	
		P□ CE□	hannet paper II her fine from	OSCE □ O □		
i.	Confirm pregnancy	IL 🗆 SS 🗆		WE D PS D SL D	THE STATE OF	
		P CE		OSCE 🗆 O 🗆	Language Holde	
5.		IL 🗆 55 🗆		WE 🗆 PS 🗆 SL 🗆		
	provide or recommend appropriate counselling	P CE		OSCE 🗆 O 🗆		
7.	Manage common discomforts associated	IL 🗆 SS 🗆		WE□ PS□ SL□		or production of the last
	with pregnancy	P CE C		OSCE 🗆 O 🗆		
3.	Assess fetal well-being	IL 🗆 SS 🗆		WE PS SL		
		20000000 DESCRIPTION		- March - March 15 - 16 (1975) 1980		

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	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
9.	Assess for signs and symptoms of abnormal conditions	IL 🗆 SS 🗆		WE PS SL		
10.	Obtain the necessary specimens to determine the presence of sexually transmitted diseases	IL 🗆 SS 🗆		WE D PS D SL D		
11.	Obtain the necessary specimens to determine the presence of vaginal infections	IL 🗆 SS 🗆 P 🗀 CE 🗆		WE PS SL OSCE O		
12.	Obtain the necessary specimens to determine the presence of cytological changes	IL 🗆 SS 🗆 P 🗀 CE 🗆		WE		
13.	Educate parents regarding newborn behaviour	IL □ SS □ P □ CE □		WE PS SL O		
14.	Educate parents regarding newborn nutrition, feeding and care	IL 🗆 SS 🗀 P 🗀 CE 🗀		WE PS SL OSCE O		
15.	Counsel the mother on the benefits and practice of breastfeeding	IL 🗆 SS 🗀 P 🗀 CE 🗀		WE PS SL D		

II.	Intrapartum Care:					
A.	[10] [20] [20] [20] ■ 10 [20] (20] (20] (20] (20] (20] (20] (20] (
1.	The process of labour	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P CE		OSCE 🗆 O 🗆	5.0	
2.	The mechanisms of labour and birth	IL 🗆 SS 🗆		WE DPS DSL D		
		P CE	70.70	OSCE □ O □	100000000	
3.	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 □		de la come
5.	Assessment of the onset and progress of	IL 🗆 SS 🗇		WE PS SL	evicalisation	
	labour and birth	P CE		OSCE □ O □	AST WAR	
6.	Comfort and support measures during labour and birth	IL 🗆 SS 🗆		WE□ PS□ SL□	A STATE OF THE STATE OF	
	labour and birth	P CE		OSCE O O	r Palata	
7.	Holistic approaches to facilitate labour	IL 🗆 SS 🗆		WE PS SL D		
		P CE		OSCE O O	mental death.	
8.	Anatomy of the fetal skull and its landmarks	IL 🗆 SS 🗆		WE - PS - SL -	1000	
		P CE		OSCE 🗆 O 🗆	will be proper	
9.	Fetal heart rate patterns including	IL 🗆 SS 🗆		WE D PS D SL D		
	electronic monitoring of these patterns	P CE		OSCE 🗆 O 🗆		
10.	Aseptic technique	IL 🗆 SS 🗆		WE D PS D SL D		
		P CE		OSCE 🗆 O 🗆		
11.	Significance of ruptured membranes and	IL 🗆 SS 🗆		WE PS SL	Commence of	医多子生物 经支援支票
	methods for reducing risk of infection	P CE		OSCE □ O □	Garage Mark	
12.	Abnormalities of labour	IL 🗆 SS 🗆		WE PS SL D		
		P CE C	and the same of th	OSCE □ O □		
13.	Prevention, assessment and management	IL 🗆 SS 🗆		WE PS SL		THE CONTRACTOR
	of exhaustion during labour	P CE		OSCE □ O □		
14.	Prevention, assessment and management	IL 🗆 SS 🗆		WE PS SL		
	of dehydration during labour	P CE		OSCE □ O □	I stay also	
15.	Prevention, assessment and management	IL 🗆 SS 🗆		WE PS SL		
	of ketonuria during labour	P CE		OSCE □ O □		
16.	Techniques to protect the perineum, avoid	IL 🗆 SS 🗆		WE D PS D SL D		Charle Children Con Communication
	episiotomy and minimize lacerations	P CE	*	OSCE 🗆 O 🗆		

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Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
17. Indications and procedure for episiotomy	IL 🗆 SS 🗆		WE□ PS□ SL□		
	P CE C		OSCE 🗆 O 🗆		
 Indications and procedure for repair of lacerations or episiotomy 	IL 🗆 55 🗆		WE PS SL D		
lacerations of episiotomy	P□ CE□		OSCE 🗆 O 🗆		
19. Prevention and treatment of hemorrhage	IL 🗆 SS 🗆	, mar 100 m	WE PS SL D		
4	P CE		OSCE □ O □		
20. Drugs which may be used during the	IL 🗆 SS 🗆		WE PS SL D		
intrapartum period	P CE		OSCE □ O □		
21. Obstetrical interventions used to assist in	IL 🗆 SS 🗀		WE PS SL D		
labour	P CE		OSCE □ O □		
22. Obstetrical interventions used in emergency	IL 🗆 SS 🗇		WE D PS D SL D		
care	P CE		OSCE □ O □		
23. Neonatal resuscitation	IL 🗆 SS 🗆		WE D PS D SL D		
	P CE		OSCE □ O □		
B. Midwives have the ability to:					
 Provide emotional and physical support to 	IL 🗆 SS 🗆		WE□ PS□ SL□		
the labouring woman and her support people	PD CED		OSCE □ O □		a '
Conduct a spontaneous labour and birth	IL 🗆 SS 🗆		WE D PS D SL D		
	P CE		OSCE □ O □	-	
3. Assess the onset and progress of labour and	IL 🗆 SS 🗆		WE PS SL		TENERAL MEDICAL MEDICA
take appropriate action according to the i. Frequency, duration and intensity of uterine contractions	P CE C		OSCE □ O □		
ii. Station of the fetal presenting part,	IL 🗆 SS 🗆		WE D PS D SL D		
and position, presentation, attitude,	P CE		OSCE O O		
and degree of moulding iii. Condition of the cervix	ILO SS O		WE DPS DSL D		
	PD CED		OSCE O O		
4. Recognize abnormal labour patterns and	ILD SS D		WE PS SL	100	
identify the probable causes	PD CED		OSCE D O D		
5. Assess fetal heart tones with a fetoscope,	IL D SS D		WE D PS D SL D	in the complete	
doppler and electronic fetal monitor	P CE		OSCE O O		
6. Determine the status of fetal membranes	IL D SS D	-	WE D PS D SL D	The original test	
and perform amniotomy as necessary	P CE		OSCE D O D		
7. Assess amniotic fluid	IL D SS D		WE D PS D SL D	THE PROPERTY.	e e a se a casa e e e e e e e e
	P CE C		OSCE D O D		
8. Recognize a full bladder and catheterize if	IL D SS D		WE D PS D SL D	Carry Tables	
necessary	P CE C		OSCE D O D		
9. Protect the perineum, avoid unnecessary		1000	WE D PS D SL D		
episiotomy and minimize lacerations	IL D SS D		1000 0000 0000		
10. Perform and repair episiotomy as	P CE		OSCE O O		
necessary, in accordance with the	IL SS D	•	WE D PS D SL D		
Midwifery Regulation 11. Inspect the perineal and vulval areas for	P CE C		OSCE D O D	THE PROPERTY	
lacerations, hematomas, and abrasions and	IL D SS D		WE D PS D SL D		
take action in accordance with the	P CE		OSCE 🗆 O 🗅		
Midwifery Regulation 12. Collect cord blood	IL 🗆 SS 🗆		WE□ PS□ SL□	The same of the sa	
			OSCE O O		
13. Recognize signs and separation of the	PD CED		-	THE STATE OF STREET	
placenta; receive and inspect the placenta	IL C SS C		WE PS SL D		
14. Recognize and manage postpartum	P CE		OSCE O O O	Charles of the material	English of MARKET may be that the The the control of the second of the second
hemorrhage	IL 🗆 SS 🗆		WE PS SL D		
2002	P CE C		OSCE □ O □		Partie Partie Partie Data Intel Market and

			# 1 mil 5 - 5990 5 - 1000 - 10		Com	mittee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
15.	Recognize the early signs of maternal shock, initiate treatment, and perform ongoing	IL SS D		WE PS SL		
16.	assessment Perform immediate newborn assessment		-	WE D PS D SL D		
	and care	IL 🗆 SS 🗆		***************************************		
17	Perform neonatal resuscitation including	P CE C		OSCE O O		
17.	intubation	IL 🗆 55 🗆		WE D PS D SL D		
	to the state of the state and	P CE C		OSCE D O D		
18.	Assess the need for relief of pain and intervene using non-pharmacological and	IL 🗆 SS 🗆		WE C PS SL C		
	pharmacological measures as required in accordance with the Midwifery Regulation and established guidelines	P CE C		OSCE □ O □		
19.	Give injections, insert an intravenous catheter and administer intravenous fluids	IL 🗆 SS 🗆		WE□ PS□ SL□		
	and medications in accordance with the Midwifery Regulation and established guidelines	P □ CE□		OSCE □ O □		
20.		IL 🗆 SS 🗆		WE□ PS□ SL□		
	Midwifery Regulation and established guidelines	P CE		OSCE □ O □		
21.	Encourage and assist with the initiation of	IL 🗆 SS 🗆		WE D PS D SL D		
	breast-feeding	P□ CE□		OSCE □ O □		100 S
III A.	. Postpartum Care of the Newborn: Midwives have <u>knowledge of:</u>	· a				
1.	Anatomy and physiology of the newborn	IL 🗆 SS 🗆		WE□ PS□ SL□		
		P CE C		OSCE □ O □		E CALLED TO THE STATE OF THE ST
2.	Growth and development of the newborn	IL 🗆 SS 🗆		WE 🗆 PS 🗀 SL 🗀		
		P CE		OSCE □ O □	st Planter	
3.	Newborn assessment	IL 🗆 SS 🗆		WE D PS D SL D		
		P CE		OSCE 🗆 O 🗆	seed exercis	
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 □	41	
6.	Nutritional needs of the newborn,	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 C		OSCE □ O □		
8.	Prophylactic medications commonly given	IL 🗆 SS 🗆		WE PS SL		TO EXTENS THE ENT
	to the newborn	P CE		OSCE □ O □		
9.	Effects of drugs on the newborn, including	IL 🗆 SS 🗆		WE PS SL		in the second of the second of the
	prescriptive and non-prescriptive substances excreted through the breast milk	P □ CE □		OSCE O O		
10.	Environmental, biological and	IL 🗆 SS 🗆		WE PS SL D		
	pharmacologic hazards to the newborn	P CE C		OSCE 🗆 O 🗆		naka Jawa Baran at Libera
11.	Circumcision	IL 🗀 SS 🗆		WE□ PS□ SL□	阿尔克里	
		P CE C		OSCE □ O □	September 1	
В.	Midwives have the <u>ability to:</u>					
1.	Provide initial newborn assessment and	IL 🗆 SS 🗆	A STATE OF THE STA	WE□ PS□ SL□		
	care	P□ CE□		OSCE 🗆 O 🗆		I can the first of the second
	Administer eye prophylaxis and vitamin K	IL 🗆 SS 🗀		WE PS SL D	DESCRIPTION OF	
2.						

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	Competency	Education	Document Verification and Location	Evaluation Method	Competency Met	Comments
3.	Perform newborn physical and behavioral assessment and provide basic newborn care	IL 🗆 55 🗆		WE PS SL O		
4.	Assess newborn jaundice	IL C SS C		WE D PS D SL D		AND THE RESERVE OF THE PARTY OF
	*	P□ CE□		OSCE 🗆 O 🗆		
5.	Perform a heel puncture to obtain samples	IL 🗆 SS 🗆		WE PS SL		
SOME	*	P□ CE□		OSCE 🗆 O 🗖		
6.	Assess the ongoing well-being and development of the newborn in the first six	IL 🗆 SS 🗆		WE PS SL		
	weeks of life and make appropriate referrals as necessary	P CE C		OSCE O O		
7.	Continue to educate parents regarding newborn growth, development, behaviour,	IL 🗆 SS 🗆		WE - PS - SL -		
	nutrition, feed and care	P CE C		OSCE □ O □		
8.	Provide information to parents on the benefits and risks of immunization	IL 🗆 55 🗆		WE PS SL		
		P CE		OSCE 🗆 O 🗆		وروا والمالون

IV	Postpartum Care of the		The second secon						
	Mother								
Α.	Midwives have knowledge of:								
1.	Anatomy and physiology of the postpartum period, including lactation	IL 🗆 SS 🗆	77.0	WE PS SL					
2.	Postpartum assessment of the woman	P CE CE	en de san a l e n e	OSCE O O O					
		PD CED		OSCE □ O □					
3.	Emotional and psychological aspects of the postpartum period, including	IL 🗆 SS 🗆		WE PS SL D					
	breastfeeding and early parenting	P CE C		OSCE O O					
4.	Nutritional requirements for women during the postpartum period	IL 🗆 SS 🗆		WE D PS D SL D					
5.	Self-help strategies, including exercise,	P D CE D		OSCE D O D	- Treffit Constant	THE RESIDENCE OF THE RE			
J.	that will aid the mother in postpartum recovery	IL □ SS □ P □ CE □		WE PS SL O	A Secretary Secretary				
6.	Principles of breastfeeding and management of common breastfeeding	IL 🗆 SS 🗆		WE PS SL D					
	problems	P CE		OSCE 🗆 O 🗅	all and come				
7.	Stimulation and suppression of lactation	IL 🗆 SS 🗆	. A.C M	WE 🗆 PS 🗆 SL 🗆	7 1. 1. 4. 4. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.				
		P CE C		OSCE 🗆 O 🗆					
8.	Effects of drugs on lactating women	IL 🗆 SS 🗆		WE D PS D SL D					
		P CE		OSCE O O	Santana na Ak	alientelli, eskuulei ja ja ja ja kantaa ja sil			
9.	Postpartum discomforts and management	IL O SS O		WE PS SL					
10.	Environmental, occupational, biological			WE D PS D SL D					
	and pharmacologic hazards to lactating women	IL O SS O		OSCE O O					
11.		IL 🗆 SS 🗀		WE□ PS□ SL□					
	postpartum complications, including postpartum depression	P CE C		OSCE O O		Contact Contact Production Contact and Con-			
12.		"IL□ SS□		WE 🗆 PS 🗆 SL 🗀					
	including the implications of sexually transmitted diseases	P CE		OSCE □ O □					
13.		IL 🗆 SS 🗆		WE PS SL D					
	The mindle Brooms	P□ CE□		OSCE O O					

						Committee Use Only
	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
В.	Midwives have the ability to:	*************************************	21-1990 United			
1.	Assess the health and monitor the progress	IL 🗆 SS 🗆	301000	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 C		OSCE 🗆 O 🗆		
4.	Facilitate the introduction of the new	IL 🗆 SS 🗆		WE□ PS□ SL□	7// 2020	
	member of the family	P CE	5100 (0) (0)	OSCE □ O □	Legal II	person of the second
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 D PS D SL D		
	examination	PO CEO		OSCE □ O □		
7.	Assess the uterine size, shape, consistency	IL 🗆 SS 🗆		WE D PS D SL D		
	and mobility, and cervical and vaginal health	P CE C		OSCE □ O □		lance or Market
8.	Counsel clients in decision-making	IL 🗆 SS 🗆		WE D PS D SL D	Aleman III	
	regarding contraceptive methods	P CE C		OSCE □ O □	January Labor.	
9.	Instruct clients in the use of contraception	IL 🗆 SS 🗆		WE D PS D SL D		
		P CE		OSCE □ O □	or road	
10.	Fit diaphragms and cervical caps	IL 🗆 SS 🗀		WE D PS D SL D		
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.,	Education and Connecting	P CE C		OSCE □ O □		
A.	Education and Counseling: Midwives have knowledge of: The principles and processes of informed	ı				
A.	Midwives have knowledge of:	IL 🗆 SS 🗆		WE - PS - SL -		
A. 1.	Midwives have knowledge of: The principles and processes of informed	IL □ 55 □ P □ CE □		WE		
A. 1.	Midwives have knowledge of: The principles and processes of informed decision making	IL SS P CE		WE PS SL OSCE O O OSCE SL O O O OSCE O O OSCE OSC		
A. 1. 2.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling			WE PS SL OSCE O D OSCE O D		
A. 1. 2.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling			WE PS SL OSCE O OSCE O O O OSCE OS		
A. 1. 2.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling Theoretical approaches to prenatal and	IL		WE PS SL OSCE O OSCE O O OSCE O O OSCE O OSCE O O OSCE O O OSCE O O O OSCE O O O OSCE O O O O O O O O O		
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A. 1. 2. 3. 4. 5.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling Theoretical approaches to prenatal and parenting education Issues related to grief and loss in childbearing Available community resources Cultural influences on childbearing and child rearing Issues related to abuse and discrimination Midwives have the ability to: Provide objective information about care alternatives, including options, risks and benefits to facilitate informed decision	IL		WE PS SL OSCE O O O O O OSCE O O O O OSCE O O O O O O O O O		
A. 1. 2. 3. 4. 5. 6. 7.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling Theoretical approaches to prenatal and parenting education Issues related to grief and loss in childbearing Available community resources Cultural influences on childbearing and child rearing Issues related to abuse and discrimination Midwives have the ability to: Provide objective information about care alternatives, including options, risks and	IL SS SS P CE CE SS P CE CE P CE CE CE CE		WE PS SL OSCE O O WE PS SL O OSCE O O OSCE O O WE PS SL O OSCE O O OSCE O O OSCE O O WE PS SL O OSCE O O O O OSCE O O O O OSCE O O O O OSCE O O O OSCE O O O OSCE O O O O O O O O O		
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V. A. 1. 2. 3. 6. 7. B. 1. 3.	Midwives have knowledge of: The principles and processes of informed decision making Principles and adult education, communication and counseling Theoretical approaches to prenatal and parenting education Issues related to grief and loss in childbearing Available community resources Cultural influences on childbearing and child rearing Issues related to abuse and discrimination Midwives have the ability to: Provide objective information about care alternatives, including options, risks and benefits to facilitate informed decision making Identify and respond to clients' educational	IL SS SS P CE CE SS P CE CE P CE CE CE CE		WE PS SL OSCE O O WE PS SL O OSCE O O OSCE O O WE PS SL O OSCE O O OSCE O O OSCE O O WE PS SL O OSCE O O O O OSCE O O O O OSCE O O O O OSCE O O O OSCE O O O OSCE O O O O O O O O O		

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	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
4.	Assist the woman and her family in planning and preparing for the birth experience and	IL□ SS□		WE PS SL		
	early parenting	P CE		OSCE O O		
5.	Assess the emotional status of the woman	IL 🗆 SS 🗆		WE D PS D SL D		
		P CE		OSCE □ O □		
6.	Assess the effectiveness of their own counselling skills	IL □ SS □		WE D PS D SL D		*
	Courseling skins	P CE C		OSCE □ O □		
7.	Counsel and support the woman and her	IL 🗆 SS 🗆		WE PS SL D		
	family in responding to grief and loss in childbearing	P CE		OSCE □ O □		
8.	Provide prenatal and parenting education	IL 🗆 SS 🗆		WE D PS D SL D		
İ		P CE C		OSCE □ O □		
9.	Respond sensitively to cultural differences in	IL 🗆 SS 🗆		WE PS SL D		
	providing care to clients	P CE		OSCE O O		
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VI.					1	
1.	Physiological and psychosocial components and common issues of human sexuality	IL 🗆 SS 🗆		WE□ PS□ SL□		
	and common issues of numeri sexuality	P CE		OSCE 🗆 O 🗆		
2.	Physiological and psychosocial components	IL 🗆 SS 🗀		WE D PS D SL D		
	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 □		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4.	Fertility during the childbearing cycle	IL 🗆 SS 🗆		WE PS SL D		And the state of t
		P CE		OSCE □ O □		
5.	Infertility and its treatment	IL 🗆 SS 🗀		WE D PS D SL D		E. S.
		P CE C		OSCE □ O □		
6.	Factors involved in decision-making about	IL 🗆 SS 🗆		WE D PS D SL D	Jaganiji sanii	
	unplanned or unwanted pregnancies	P CE		OSCE □ O □	Total Control	
7.	Resources for counselling and referral for	IL 🗆 SS 🗆		WE D PS D SL D		Company of the Company of the Company
	unplanned or unwanted pregnancies	P CE		OSCE O O		
		1.0 00		1 0000 12 0 12		1
В.	Midwives have the ability to:					
1.	Inform and advise clients on issues of human	IL 🗆 SS 🗆		WE PS SL D		
	sexuality, fertility and unplanned pregnancies, and make referrals where appropriate	P CE C		OSCE □ O □		
100	- Property					=
VII.	Collaboration with Other					
	Caregivers					
	Midwives have knowledge of:					
1.	The roles and responsibilities of other health care providers and their standards of	IL 🗆 SS 🗆		WE□ PS□ SL□		
	practice	P CE		OSCE □ O □	Augustian.	Asset which the research and the first
2.	Terminology relevant to childbearing	IL 🗆 SS 🗆	And the second s	WE□ PS□ SL□		
		P CE C		OSCE 🗆 O 🗆	Age of the	
В.	Midwives have the ability to:					
1.	Communicate effectively with other caregivers, facilitating referral, consultation,	IL 🗆 SS 🗆		WE DPS DSL D		
	and collaboration when appropriate	P CE		OSCE □ O □		

				Committee Use Only		
	Competency	Education	Document Verification and Location	Evaluation Method	Compete ncy Met	Comments
VII	.Professional, Legal and					
	Other Aspects					
	Midwives have knowledge of:					
1.	The history and philosophy of midwifery	IL 🗆 SS 🗆		WE PS SL D		
		P CE		OSCE □ O □		
2.	The standards of practice for midwifery	IL 🗆 SS 🗀		WE PS SL D		
		P 🗆 CE 🗆		OSCE □ O □		
	The code of ethics for the practice of	IL 🗆 SS 🗆		WE D PS D SL D	_	
	midwifery	P CE C		OSCE □ O □		
	Legislation and health agency policies and procedures pertaining to midwifery	IL 🗆 SS 🗆		WE D PS D SL D		
		P CE		OSCE □ O □		
	Legal responsibilities and obligations to clients and other health care providers	IL 🗆 SS 🗀		WE PS SL D		
		P CE C		OSCE □ O □		a Transaction Company
	The health care system in Alberta as it	IL 🗆 SS 🗆		WE D PS D SL D		100
	pertains to the practice of midwifery, including existing health services, protocols	P CE		OSCE □ O □		
	and regulations regarding communicable			- AND THE PROPERTY OF THE PROP		
	diseases, infection control and immunization				 	
	Provincial documentation and reporting standards and requirements	IL 🗆 SS 🗆		WE PS SL		
	Standards and requirements	P CE		OSCE □ O □		

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		and Location	ivietnoa	ncy Met			
X. Advanced Competencies							
As defined in the Canadian Competencies for Midwives							
. Epidural Monitoring	IL 🗆 SS 🗆		WE PS SL				
	P CE C	Sec. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	OSCE □ O □				
. Application of scalp electrodes	IL 🗆 SS 🗆		WE PS SL D				
	P CE		OSCE □ O □				
. Pharmacologic augmentation of labour	IL 🗆 SS 🗆		WE - PS - SL -				
	P CE		OSCE □ O □				
. Induction of Labour for post-dates pregnancy	IL 🗆 SS 🗆		WE 🗆 PS 🗆 SL 🗆		12 17 17 17 17		
	P CE C		OSCE □ O □				
. Performing vacuum extraction	IL 🗆 SS 🗆		WE D PS D SL D				
	PD CED		OSCE □ O □				
. First surgical assist at cesarean sections	IL 🗆 SS 🗀		WE D PS D SL D	10011111111			
	P CE C		OSCE □ O □				
. Suturing of 3 rd degree tears	IL 🗆 SS 🗆		WE D PS D SL D				
	P CE C		OSCE D O D				
. Evacuation of the uterus	IL D SS D		WED PS DSLD	-			
	PD CED		OSCE D O D	-			
. Fitting barrier methods of contraception	IL 🗆 SS 🗆	The second secon	WE DPS DSL D	12/11/22	the said the said of		
	P CE C		OSCE D O D				
O. Prescribing contraceptives	IL 🗆 SS 🗆		WE D PS D SL D	1			
	PD CED		OSCE O O				
Inserting umbilical vein catheters in the	IL D SS D		WE D PS D SL D				
newborn	P CE C		OSCE O O				
2. Providing well-baby care after six weeks	IL 🗆 SS 🗇		WE D PS D SL D				
postpartum and to health newborns in	P CE		OSCE O O				
general 3. Providing well-woman care after six weeks	IL D SS D		WE DPS DSL D				
postpartum and to healthy women in general	P CE C		OSCE O O				
			1000000				
Note: Advanced Co	mpetenci	es are not in the Al registration	10.70	id are not	required for		
I certify that the information pro							
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