

*January 1994*

**CORE COMPETENCIES: A FOUNDATION FOR MIDWIFERY  
EDUCATION  
RECOMMENDATIONS OF THE  
MIDWIFERY INTEGRATION PLANNING PROJECT  
TO THE INTERIM REGULATORY COUNCIL ON MIDWIFERY**

**INTRODUCTION**

Core competencies provide a foundation for midwifery education programs. They reflect the fundamental knowledge and skills expected of a new graduate of a midwifery school. Effective midwifery education requires a balance of theoretical and clinical experience. After educational preparation, the entry level midwife should be capable of providing midwifery care as defined in the International Definition of a Midwife:

"[The midwife] must be able to give the necessary supervision, care and advice to women during pregnancy, labour and the postpartum period, to conduct deliveries on her own responsibility, and to care for the newborn infant. This care includes preventative measures, the detection of abnormal conditions in mother and child, the procurement of medical assistance and the execution of emergency measures in the absence of medical help. She has an important task in counselling and education, not only for [women] but also within the family and the community. The work should involve antenatal education and preparation for parenthood, and extends to certain areas of gynecology, family planning and child care. She may practice in hospitals, clinics, health units, domiciliary conditions or in any other service."

This definition is endorsed by the

Association of Ontario Midwives  
Curriculum Design Committee  
Midwifery Task Force-Ontario  
Interim Regulatory Council on Midwifery  
Task Force on the Implementation of Midwifery in Ontario  
International Confederation of Midwives  
International Federation of Gynaecologists and Obstetricians  
Midwives Alliance of North America  
World Health Organization

Core competencies are guidelines for midwifery education and evaluation. Core

competencies should be interpreted in the context of the scope of practice of midwifery. They do not indicate standards for midwifery practice. Midwifery practice is defined by the Transitional Council of the College of Midwives of Ontario Standards of Practice and Guidelines to the Scope of Practice.

This document may need review and revision as midwifery practice evolves in response to the needs of communities throughout Ontario.

## **COMPONENTS OF MIDWIFERY CARE <sup>1</sup>**

### **General**

- A. The entry level midwife should have the knowledge and skills to:
- 1) Provide the necessary care and advice to women during pregnancy, labour and the postpartum period
  - 2) Provide care focussed on the woman and her family
  - 3) Promote normal birth and use technology appropriately
  - 4) Conduct deliveries on her own responsibility and to care for the newborn
  - 5) Provide care in a variety of settings, including the home, birth centre and hospital
  - 6) Provide care consistent with the Philosophy of Midwifery Care in Ontario<sup>2</sup>
  - 7) Provide continuity of care over the childbearing cycle
  - 8) Facilitate informed choice
  - 9) Provide education and counselling for childbearing to the woman, her family and the community
  - 10) Utilize preventative measures, health education and promotion
  - 11) Apply research findings to midwifery practice

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<sup>1</sup> It is difficult to find appropriate terms to describe "the clients" of midwives. We use the terms client(s), woman, and woman and her family, and support people. We see the woman as the primary client of the midwife and the primary decision-maker during childbearing. We wish to be inclusive of family members and support people as defined by the woman. We hope our choice of terms reflects this approach.

<sup>2</sup> Philosophy of Midwifery Care in Ontario, Interim Regulatory Council on Midwifery, August 1990.

- 12) Document relevant physical, emotional and social information about clients throughout the childbearing cycle respecting the confidentiality of information given
- 13) Recognize abnormal conditions and suggest appropriate treatment and/or make appropriate referrals
- 14) Administer pharmacologic agents as specified by regulation
- 15) Assist the woman and her family in planning for an appropriate place of birth
- 16) Evaluate risk factors during pregnancy, labour and the postpartum period
- 17) Use emergency measures in the absence of medical help

### **Education and Counselling**

- A. The entry level midwife should have knowledge of:
  - 1) The principles of informed choice
  - 2) Adult education, communication and counselling
  - 3) Theoretical approaches to prenatal and parent education
  - 4) Issues related to grief and loss in childbearing
  - 5) Community resources available
- B. The entry level midwife should have the ability to:
  - 1) Communicate effectively with clients and their support people
  - 2) Assess the emotional status of the woman in her social context

- 3) Assist the woman and her family in planning and preparing for the birth experience and early parenting
- 4) Support the woman and her family in responding to loss during childbearing
- 5) Evaluate and respond to clients' educational needs
- 6) Assess the effectiveness of her own counselling skills
- 7) Provide information about care alternatives, including options, risks and benefits, and assist client decision-making
- 8) Provide prenatal education

### **Collaboration with Other Caregivers**

- A. The entry level midwife should have knowledge of:
  - 1) Community standards of care, including midwifery and medical standards
  - 2) Medical terminology relevant to the reproductive cycle
- B. The entry level midwife should have the ability to:
  - 1) Communicate effectively with other caregivers facilitating referral, consultation and collaboration when appropriate
  - 2) Act as an advocate for the client in all aspects of her care

### **Antepartum Care**

- A. The entry level midwife should have the knowledge of:
  - 1) The importance and functions of antepartum care
  - 2) Female anatomy and physiology with emphasis on the menstrual cycle, conception and pregnancy
  - 3) Physical, emotional and social change of pregnancy
  - 4) Physical, emotional and social factors likely to influence pregnancy outcome
  - 5) Clinical applications of genetics, embryology and fetal development

- 6) Nutritional requirements for pregnancy
- 7) The physiology and treatment of common discomforts during pregnancy
- 8) Methods for diagnosing pregnancy, establishing due date, and assessing current gestational age and the progress of pregnancy
- 9) Screening and diagnostic tests used during pregnancy
- 10) Pharmacologic agents used during pregnancy
- 11) Environmental and biological hazards to pregnancy women
- 12) Causes, recognition and treatment of abnormalities of pregnancy
- 13) Implications of STDs and vaginal infections during pregnancy
- 14) Principles and procedure of external cephalic version

B. The entry level midwife should have the ability to:

- 1) Assess the pregnant woman's general health and well-being
- 2) Assess nutritional status and provide appropriate counselling
- 3) Obtain a family, medical and social history
- 4) Confirm pregnancy
- 5) Perform a pelvic and speculum examination and assess the soft and bony structures of the pelvis
- 6) Obtain maternal blood pressure, pulse, respirations, temperature and weight measurements, and recognize abnormal findings

- 7) Perform abdominal palpation and fundal height measurement to assess uterine size, fetal position, presentation and number and estimate fetal size and gestational age
- 8) Auscultate fetal heart
- 9) Evaluate fetal movement
- 10) Assess presence and degree of edema
- 11) Check for costal vertebral angle tenderness
- 12) Check for clonus and deep tendon reflexes
- 13) Perform venipuncture and finger puncture
- 14) Perform a screening physical assessment including examination of the head, neck, thyroid, ear, nose and throat, teeth, chest, breasts, heart and vascular system, extremities, abdomen and neurological system
- 15) Obtain cervical and vaginal specimens
- 16) Interpret results of routine screening and diagnostic tests

### **Intrapartum Care**

- A. The entry level midwife should have knowledge of:
  - 1) The normal process of labour including the mechanisms of labour and birth
  - 2) Assessment of maternal and fetal well-being
  - 3) Assessment of the onset and progress of labour and birth
  - 4) Comfort and support measures during labour and birth
  - 5) Use of physiologic methods to facilitate labour
  - 6) Anatomy of the fetal skull and its landmarks
  - 7) Fetal heart rate patterns
  - 8) Aseptic technique and its application during labour
  - 9) Significance of ruptured membranes and methods for reducing risks of infection

- 10) Abnormalities of labour
- 11) Assessment and treatment of dehydration and ketonuria during labour
- 12) Techniques to protect the perineum, avoid episiotomy and minimize lacerations
- 13) Indications and procedure for episiotomy
- 14) Indications and procedure for repair of lacerations or episiotomy
- 15) The action and appropriate administration of anti-hemorrhagic agents
- 16) Pharmacologic agents used during the intrapartum period
- 17) Emergency measures, obstetrical procedures and interventions

B. The entry level midwife should have the ability to:

- 1) Provide appropriate emotional and physical support to the labouring woman and her support people
- 2) Conduct a spontaneous labour and delivery
- 3) Assess the onset and progress of labour
- 4) Assess frequency, duration and intensity of uterine contractions
- 5) Assess effacement and dilation of the cervix
- 6) Identify and determine station of the fetal presenting part, and assess position, presentation, attitude, and the presence of moulding or caput
- 7) Assess fetal heart tones with a fetoscope, doppler and electronic fetal monitor
- 8) Recognize abnormal fetal heart patterns, identify probable causes and potential interventions
- 9) Recognize abnormal labour patterns and identify probable causes and potential interventions
- 10) Determine status of the membranes and perform amniotomy if appropriate
- 11) Recognize a full bladder and catheterize when indicated

- 12) Protect the perineum, avoid episiotomy and minimize lacerations
- 13) Perform and repair episiotomy when indicated
- 14) Recognize signs of separation of the placenta, conduct the delivery of and inspect the placenta
- 15) Recognize and manage postpartum hemorrhage appropriately
- 16) Inspect the perineal and vulval areas for lacerations, hematomas, and abrasions and repair appropriately
- 17) Perform immediate newborn assessment and care
- 18) Perform neonatal resuscitation\*
- 19) Collect cord blood
- 20) Recognize the signs of maternal shock and initiate treatment
- 21) Perform injections, insert an intravenous catheter and administer IV fluids when appropriate
- 22) Administer inhalants as specified by regulation

\* intubation is not a core competency for entry level midwives

## **Postpartum Care of the Newborn**

- A. The entry level midwife should have knowledge of:
- 1) Anatomy and physiology of the newborn
  - 2) Newborn assessment and gestational age assessment
  - 3) Signs and symptoms of newborn abnormalities
  - 4) Newborn screening and diagnostic testing
  - 5) Prophylactic medications commonly used for the newborn
  - 6) Nutritional needs of the newborn, properties of breast milk and infant formula, and methods of infant feeding
- B. The entry level midwife should have the ability to:
- 1) Provide newborn care and assessment including assessment of respiratory and cardiac status and maintaining temperature in the immediate postpartum
  - 2) Perform a newborn assessment
  - 3) Assess the well-being of the newborn in the first six weeks of life
  - 4) Administer eye prophylaxis and vitamin K
  - 5) Assess newborn jaundice and initiate appropriate management
  - 6) Perform a heel puncture to obtain samples for PKU and other screening tests
  - 7) Educate parents regarding newborn behaviour and care

## **Postpartum Care of the Mother**

- A. The entry level midwife should have knowledge of:
- 1) Anatomy and physiology of the postpartum period including lactation
  - 2) Postpartum assessment of the woman
  - 3) Emotional and psychological aspects of postpartum, breastfeeding and early parenting

- 4) Postpartum discomforts and appropriate treatments
  - 5) Nutritional requirements for women during the postpartum period
  - 6) Principles of breastfeeding and management of common breastfeeding problems
  - 7) Stimulation and suppression of lactation
  - 8) Assessment and management of postpartum complications
- B. The entry level midwife should have the ability to:
- 1) Assess the health and monitor the progress of the woman postpartum
  - 2) Educate clients regarding self-care, normal postpartum progress, and signs and symptoms of common postpartum complications

### **Sexuality and Gynecology**

- A. The entry level midwife should have knowledge of:
- 1) Sexuality during the childbearing year
  - 2) Anatomy and physiology of the reproductive systems through the life cycle
  - 3) Anatomy and physiology of the female breast
  - 4) Physiology and psychosocial components of human sexuality
  - 5) Common issues of sexuality and methods for counselling or referral
  - 6) Methods of birth control and family planning and their risks and benefits
  - 7) Factors involved in decision-making about unplanned or unwanted pregnancies and resources for counselling and referral
  - 8) Variations of normal reproductive health and signs and symptoms of pathology
  - 9) Screening and diagnostic tests for well-woman care including appropriate intervention or referral
- B. The entry level midwife should have the ability to:

- 1) Perform a bimanual and speculum exam to assess uterine size, shape, consistency and mobility, and cervical and vaginal health
- 2) Obtain the necessary specimens to evaluate the presence of STDs, vaginal infections and cytological changes
- 3) Counsel clients in decision-making regarding contraceptive methods
- 4) Instruct clients in the use of contraception
- 5) Fit diaphragms and cervical caps

### **Professional, Legal and Other Aspects**

- A. The entry level midwife should have knowledge of:
  - 1) The history and philosophy of midwifery in Ontario
  - 2) The history, role and function of the governing body
  - 3) The history, role and function of the professional association
  - 4) The Standards of Practice for Midwifery
  - 5) The Code of Ethics for the practice of Midwifery
  - 6) All legislation pertaining to the practice of midwifery
  - 7) The medical-legal context for midwifery practice in Ontario