



REPUBLIC OF MALAWI
MINISTRY OF HEALTH AND POPULATION

NURSING AND MIDWIFERY POLICY

JUNE 2018

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FOREWORD

As the Ministry of Health and Population (MOHP) pursues the ultimate goal of improving health status of all Malawians, alongside the Sustainable Development Goals, improvement of nursing and midwifery services surfaces as a key commitment in attainment of these goals. As such, the Ministry considers the development of this Nursing and Midwifery Policy for the period of 2018-2023 a step towards both the advancement of nursing and midwifery services in the country, as well as the well-being of the people of Malawi.

Nursing and midwifery service provision is one of the most important pillars in health care delivery. The current increase in the general burden of disease has resulted in increased numbers of patients to be cared for 24 hours a day by nurses and midwives. The current nurse - population ratio in the country is 1: 2300 a major gap that creates a risk to quality nursing and midwifery service delivery. This challenge for nurses and midwives in the country manifests itself in low staffing and large patient loads. Availability of medical equipment and supplies poses another challenge to nursing and midwifery service delivery. Considering the importance of quality in the delivery of health services, the MOHP is committed to facilitating the creation of an enabling environment for the delivery of quality nursing and midwifery services.

The development of the Malawi Nursing and Midwifery Policy 2018-2023 has been done with the intention of aligning nursing and midwifery services to the current “Health Sector Strategic Plan II 2017-2022”(HSSP II), and National Health Policy, the goal of which is to promote the quality of life of all Malawians through the delivery of an Essential Health Package.. The Nursing and Midwifery Directorate will contribute towards achievement of this goal by integrating guidance on Human Resources, Administration, Practice, Research, Education, and Quality Management, inclusive of principles of Quality Assurance and total Quality Improvement in all aspects of nursing and midwifery care. Nurses and Midwives are encouraged to continue discharging their duties with commitment, dedication and professionalism.

The Ministry of Health and Population; appeals to all Government, cooperating partners, and other key stakeholders in the health sector; to utilize the policy to guide and support the delivery of Nursing and Midwifery services in the country.

Honourable Atupele Muluzi, M.P.

MINISTER OF HEALTH AND POPULATION

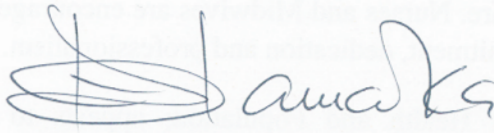
PREFACE

The Government of Malawi, through the Ministry of Health and Population, is working tirelessly to provide high quality promotive, preventive, curative and rehabilitative services at all tiers of the health system to address the prevalence of all disease conditions, with emphasis on achieving good outcomes for the highest burden conditions in Malawi. In order to address a critical element to realizing this goal, a nursing and midwifery policy has been developed to guide implementation of nursing and midwifery services.

A consultative and interactive process that involved various stakeholders engaged in work relevant to nursing and midwifery through community and hospital-based practice, nursing and midwifery education, management, and research, was used to gather relevant current information which informed the development of this nursing and midwifery policy.

This policy aims to provide guidance in the provision of comprehensive and quality nursing and midwifery services to all Malawians. This policy will provide direction to all practicing nurses and midwives, partners and stakeholders as they work together towards the health sector's vision of achieving a state of health for all the people of Malawi so that they are facilitated to lead productive lives.

The Ministry of Health and Population, invites all stakeholders to support the implementation, monitoring and evaluation of the Nursing and Midwifery Policy.

A handwritten signature in blue ink, appearing to read 'Dan Namarika', is centered on a light-colored background. The signature is fluid and cursive.

Dr. Dan Namarika

SECRETARY FOR HEALTH AND POPULATION

ACKNOWLEDGEMENT

The development of this policy is a milestone in the history of Nursing and Midwifery services in Malawi. The Ministry of Health and Population would like to thank all individuals and their organizations who contributed to the development of this policy and in particular, Clinton Health Access Initiative (CHAI) for the financial and technical support.

LIST OF ACROYNMS

AIDS:	Acquired Immune Deficiency Syndrome
CHBC:	Community Home Based Care
CHAI	Clinton Health Access Initiative
CHAM:	Christian Health Association of Malawi
CH TWG:	Community Health Technical Working Group
CIMCI:	Community Integrated Management of Childhood illness
CMA:	Community Midwifery Assistant
CPD:	Continuing Professional Development
DHIS2:	District Health Information System 2.0
ECD:	Early Childhood Development
ECSA:	East and Central Africa
ECSACON:	East and Central Africa College of Nursing
EHP:	Essential Health Package
HISP:	Health Information Systems Programme
HIV:	Human Immunodeficiency Virus
HTS:	HIV Testing Services
HRH:	Human Resources for Health
HRMIS:	Human Resource Management Information Systems
HSSP:	Health Sector Strategic Plan
HTSS:	Health Technical Support Services
ICM:	International Confederation of Midwives
ICN:	International Council of Nurses
LDF:	Local Development Fund
MGDS:	Malawi Growth and Development Strategy

MPDRC:	Maternal and Perinatal Death Review Committee
MPSR:	Malawi Public Service Regulations
MOHP:	Ministry of Health and Population
NMCM:	Nurses and Midwives Council of Malawi
NMT:	Nurse Midwife Technician
OPC:	Office of President and Cabinet
PMTCT:	Prevention of Mother to Child Transmission
QA:	Quality Assurance
QI:	Quality Improvement
QM:	Quality Management
QMD:	Quality Management Directorate
RMC:	Respectful Maternity Care
RNM:	Registered Nurse Midwife
SDGs:	Sustainable Development Goals
SRHR:	Sexual and Reproductive Health and Rights
SRMNH:	Sexual, Reproductive, Maternal and Neonatal Health
WHO:	World Health Organization

CHAPTER ONE: INTRODUCTION

1.1. Nursing and Midwifery Policy Purpose (Rationale)

The rationale for development of the nursing and midwifery policy is multi-faceted, with three main purposes. Firstly, the policy demonstrates the intention of government and its partners in regard to provision of quality nursing and midwifery care as part of the health sector response to Essential Health Package (EHP) and non-EHP conditions. This policy therefore aims at ensuring that nursing and midwifery care is provided to all those in need in a standardized and acceptable manner.

Secondly, it is envisioned that the policy will provide guidance to both public and non-governmental stakeholders in the implementation of nursing and midwifery services within the Health Sector Strategic Plan (HSSP) to all Malawians. This policy has come at an opportune time when a lot of changes are happening in the health sector; in particular, the decentralization process that has resulted in the devolution of health services to district councils. Despite this major shift, the Directorate of Nursing and Midwifery Services in the Ministry of Health and Population remains responsible for policy direction and technical advice on issues concerning nursing and midwifery services hence the need for this policy.

Finally, the Policy is an advocacy tool for nursing and midwifery services in Malawi. This coincides favorably with the recently launched ‘Nursing Now’ campaign by WHO; a three year global campaign (2018 – 2020) aiming to improve health by raising the profile and status of nursing worldwide. The campaign will focus on five core areas which are also the main foci of this policy: ensuring that nurses and midwives have a more prominent voice in health policy-making; encouraging greater investment in the nursing workforce; recruiting more nurses into leadership positions; conducting research that helps to determine where nurses can have the greatest impact; and sharing the best nursing practices.

1.2. Background

In line with the Sustainable Development Goal number 3, National Health Policy (NHP) and the HSSP II, the Government of Malawi through the Ministry of Health and Population is committed to providing comprehensive, quality nursing and midwifery services to individuals, families and communities. Nurses and midwives are key frontline healthcare providers who are available 24 hours a day; 7 days a week to meet the diverse needs of patients, clients, families and communities.

Nursing and Midwifery services are multidimensional hence collaboration with other sectors is critical. The profession is affected by issues of human, material and equipment resource availability and distribution, which need to be addressed to improve the quality of nursing and midwifery services. The policy shall therefore provide guidance to Ministry of Health and Population (MoHP) and stakeholders; on implementation of Nursing and Midwifery programmes in response to the country’s needs, through strategies that are in line with the HSSP 2017-2022.

The achievements expected from this policy are as follows:

- Quality of pre-service preparation
- Increased recruitment and retention of highly skilled nurses and midwives
- Improved nursing and midwifery management and advocacy
- Improved quality of care
- Increased generation and use of nursing and midwifery-focused research
- Effective and efficient utilization of resources that contribute to nursing and midwifery services

1.3. Situational Analysis

The country is currently affected by the burden of diseases such as HIV and AIDS, Malaria, Tuberculosis and other communicable and non communicable diseases, the main causes of morbidity and mortality in the country. Furthermore, maternal and neonatal complications still remain a challenge and concern to the Malawi government. Currently, the country has a maternal mortality ratio of 439 per 100, 000 live births, a neonatal mortality of 27 per 1000 live births and an under-five mortality rate of 64 per 1000 (NSO, 2016). The maternal mortality ratio of 439 deaths per 100,000 live births will need to be reduced by 84% to meet the SDG target of 70 per 100,000 live births by 2030.

According to the HSSP II (2017 – 2022), the Nursing and Midwifery personnel vacancy rate for Malawi stands at 63%. This high vacancy rate places a heavy burden on the available personnel in the country. According to Human Resources Information System (HRMIS) data of 2015, Malawi currently has a nurse/midwife population ratio of 1:2300 and nurse patient ratio of 1:80 against a 1:6 nurse patient ratio recommended by the International Council of Nurses (ICN). Consequently, most health facilities in this country do not have adequate nursing and midwifery personnel.

The provision of nursing and midwifery services is affected by a number of challenges facing the entire health sector, which can be grouped as institutional, financial, human and material resources, among others, as evident in the March, 2017 national supervision.

1.3.1. Institutional Challenges:

- Communication and transport challenges
- Inadequate essential drugs, equipment and medical supplies
- Inadequate preparedness to handle emergencies

- Lack of reinforcement of systems to ensure continuity of patient care
- Lack of prioritization of community health nursing and midwifery programs
- Lack of maintenance of infrastructure and equipment

1.3.2. Financial Challenges:

- Inadequate budgetary allocation to central, district hospitals, and the health sector in general

1.3.3. Human Resource challenges:

- Critical shortage of nursing and midwifery personnel
- Staff establishments not matching institutional requirements
- Irrational deployment of staff within facilities and districts
- Non adherence to professionalism
- Inadequate focused supervision and lack of nursing rounds
- Lack of advanced technology and innovations in nursing and midwifery practice

CHAPTER TWO: LINKAGES WITH OTHER POLICIES, LEGISLATION, GUIDING PRINCIPLES

2.1. Linkage to Other Policies and Legislations

The Nursing and midwifery policy shall be implemented in conjunction with the following policies and guiding documents:

The WHO Global Strategic Directions for strengthening Nursing and Midwifery (2016 – 2020)

This document provides a framework for various stakeholders to develop, implement and evaluate nursing and midwifery accomplishments at global, regional and country levels. It is aligned to the Global Strategy of Human Resources for Health: Workforce 2030.

International Confederation of Midwives (ICM) Strategy (2017 – 2020)

The ICM strategy is an advocacy tool for strengthening midwifery globally. It supports capacity building for midwives and health systems around Sexual Reproductive, Maternal & Neonatal Health services to ensure that all women have access to competent, professional midwives who are appropriately educated, skilled, regulated and supported in order to provide quality midwifery care across all settings.

The International Council of Nurses (ICN) Code of Ethics (2012)

This document is a guide for action, based on social values and needs. It serves as a standard for all nurses worldwide. The code makes it clear that inherent in nursing is respect for human rights including the right to life, to dignity and to be treated with respect. It therefore guides nurses in their everyday choices and supports their refusal to participate in activities that conflict with caring and healing.

The East and Central Africa College of Nursing (ECSACON) Strategic Plan (2008 – 2012)

ECSACON, a college without walls, is an implementing arm of the ECSA health community on Nursing and Midwifery issues. Its overall objective is to improve the standards of nursing and midwifery in the region.

Constitution of the Republic of Malawi (1994)

The Republic of Malawi created a constitutional order based on the need for an open, democratic and accountable government, and driven by recognition of the sanctity of human life and the unity of all mankind; guided by their private consciences and collective wisdom; seeking to guarantee the welfare and development of all the people of Malawi, national harmony and peaceful international relations.

Nurses and Midwives Act (1995)

An Act providing for the establishment of the Nurses and Midwives Council of Malawi with the purpose of administering the certification, registration and licensing and of Nurses and Midwives, and the regulation of their practice and conduct, and for matters connected therewith.

National Health Policy (2018-2030)

This policy calls for universal access to appropriate, affordable and quality health care services throughout the life cycles on the basis of equity to all Malawians.

Malawi Growth and Development Strategy (MGDS) III (2018)

The strategy exists to contribute to the attainment country's long-term development aspirations as enshrined in the Vision 2020.

Health Sector Strategic Plan II (2017 – 2022)

The document is an overall guiding document for implementation of all health services in Malawi.

National Community Health Strategy (2017-2022)

The strategy redefines community health system in Malawi; it describes a vision in which community health services help to improve the livelihoods of all people, through provision of a package of basic preventive, educational, curative, rehabilitative, and surveillance health services.

Human Resources for Health Strategic Plan (2012-2016)

The strategic plan provides practical analysis and guidance for the workforce of the national health system, with the aim of adapting to the rapidly growing and changing health systems needs of Malawi.

National HIV and AIDS Policy (2016)

The policy is an overarching guiding document for implementation of HIV and AIDS activities in Malawi which will guide nurses and midwives in the provision of nursing and midwifery care to patients with HIV and AIDS.

National Strategic Plan for Early Childhood and Development (2009 – 2014)

The aim of this strategic plan is to promote provision of adequate care, support and protection to Malawian children.

National Medicines Policy (2015)

This policy provides a strategic framework through which provision of equitable access and rational use of quality, safe, efficacious, affordable medicines and supplies shall be offered to the people of Malawi.

Malawi National Plan for the Elimination of Mother to Child Transmission of HIV (2012)

The document provides direction on implementation of eMTCT interventions. Midwives dealing with pregnant and postnatal mothers will be guided by this document.

Infection Prevention and Control policy and guidelines (2006)

The document provides standard guidelines on infection prevention and control measures while managing the patients/clients in any setting.

Quality Management Policy (2017 - 2022)

The policy provides guidance on provision of quality nursing and midwifery services while managing the patients/clients in any setting.

National Sexual Reproductive Health and Rights (SRHR) Policy (2009)

The policy describes the goals of the National SRHR service, to promote safer reproductive health practices by men, women, and young people through informed choice and use of quality and accessible reproductive health services.

National Multi -Sector Nutrition Policy (2018)

The policy applies to health practitioners as they manage patients with nutrition related diseases.

National Palliative Care Policy (2014)

The policy directs the actions of health practitioners as they manage patients requiring palliative care services.

National Community Home Based Care Policy and Guidelines (2011)

The policy and guidelines apply to health practitioners as they manage patients requiring community Home based care services.

Roadmap for Community Health Nursing and Midwifery Services (2011)

The roadmap applies to health practitioners as they manage patients requiring community health nursing and midwifery services.

National Gender Policy (2015)

The policy reaffirms the government's commitment to gender parity, women's empowerment and upholding of women's rights as a prerequisite to poverty reduction and sustainable development. The policy and guidelines provide direction on gender issues while managing the patient in any setting.

National Standards for Youth Friendly Health Services (2007)

The standards provide guidance in delivery of youth friendly health service (YFHS).

National Health Research Agenda (2012-2016)

The National Health Research Agenda represented nationally set and agreed priorities in which research efforts for Malawi were concentrated, including detailed priorities for evidence generation.

Infection Control and Waste Management Plan for Malawi (2016)

The national plan provides guidance to infection control and waste management practices across the Health, Mining and Labor sectors.

Physical Assets Management Policy (2014)

This policy describes the major mandate of Physical Assets Management regarding infrastructure and equipment, in all the government health institutions.

Respectful Maternity Care Charter: The Universal Rights of Childbearing Women (2012)

An international consensus document that guides Nurses and Midwives in provision of respectful maternity care as conceptualized in the seven rights of childbearing women.

National Health Promotion Policy (2013)

The Policy addresses social determinants of health including promoting the achievement of sustainable socio-economic development as envisaged in the SGDs.

2.2. Guiding Principles

The guiding principles for this policy are:

- **Accountability and responsibility:** All nurses and midwives shall discharge their duties in a manner that takes full responsibility for their actions at all times.
- **Appropriate technology:** All nurses and midwives shall use health care technologies that are appropriate, relevant, and cost-effective.
- **Caring:** Nurses and Midwives shall provide the best possible nursing and midwifery care to patients/clients. This involves being humane in their provision of care (feeling and exhibiting concern and empathy for others).
- **Collaboration:** Nurses and midwives shall work respectfully together on common objectives, acting collaboratively with other professionals and supporting each other's efforts.
- **Commitment:** Nurses and midwives shall be obliged to discharge their duties ethically, as per pledge of service.
- **Community participation:** Communities shall be empowered with adequate information to participate in identifying health problems, planning, implementing, and monitoring nursing and midwifery services.
- **Confidentiality:** Every individual (patient, client, and family) shall have the details regarding his/her diagnosis, treatment, prognosis, and other aspects of his/her care kept in privacy.
- **Continued Education:** Nurses and midwives shall continuously undergo the process of acquiring knowledge, skills and appropriate attitudes in developing powers of reasoning and judgment in order to prepare themselves or others professionally.
- **Ethical action:** Nurses and midwives shall plan, provide and advocate for safe, accountable high-quality health care services based on equity, integrity, fairness, and respectful practice, in the context of gender and human rights.
- **Evidence based practice:** Nursing and midwifery interventions shall be based on proven and cost-effective national and international best practices.
- **Holistic approach:** Nurses and midwives shall incorporate the patient and family as the unit of care with impeccable assessment, paying attention to detail, applying communication skills and individualized care.

- **Integrity:** nurses and midwives shall avoid entangling themselves in financial and other obligations that may interfere with their performance or cause them to have unfair advantage over others. Nurses and midwives shall not be enticed to act contrary to work procedures and regulations for private gains.
- **Quality:** Adopting mechanisms and standards based on evidence for best practice in all aspects of nursing and midwifery.
- **Respectful maternity care (RMC):** nursing and midwifery champions safe motherhood, and recognizes that beyond prevention of morbidity or mortality, ethics and respecting women’s basic human rights, including autonomy, dignity, feelings, personal choices, and preferences is essential to quality maternity care
- **Safe nursing and midwifery practice:** actual provision of high-quality nursing and midwifery care, where nurses and midwives shall implement care based on nursing and midwifery process.
- **Shared decision-making:** The patient, client and the family shall be involved in deciding the best option of nursing and midwifery care that would facilitate the achievement of state of wellbeing.
- **Umunthu:** Nursing and midwifery service delivery shall be based on the values of ‘*umunthu*’ that emphasize compassion, empathy and humane treatment to all patients or clients under their care.

2.3. Theories and Models of Care

Nurses and midwives shall apply theories and models of care depending on their situation. Acceptable theories and models shall include but are not limited to:

- i. Dorothea Orem – Self-care theory of Nursing
- ii. Florence Nightingale – Environment
- iii. Virginia Henderson – Needs Theory
- iv. Nancy Roper – Activities of Daily Living
- v. Madelene Leininger – Trans-Cultural Nursing
- vi. Betty Neuman – Systems theory
- vii. Godfrey M. Hochmaun et al – Health Belief Model

CHAPTER THREE: BROAD POLICY DIRECTIONS

3.1. Vision

The vision of Nursing and Midwifery is to realize quality promotive, preventive, curative and rehabilitative nursing and midwifery care to individuals, families and communities, in order to achieve a state of health for all the people of Malawi that would enable them to lead a quality and productive life.

3.2. Mission

To provide strategic leadership for the delivery of a comprehensive range of quality, accessible and efficient nursing and midwifery services in health facilities and communities.

3.3. Policy Goal

To provide a framework for the provision of comprehensive, quality and equitable nursing and midwifery services that will contribute towards attainment of health-related goals including SDGs.

3.4. Policy Objectives

The Nursing and Midwifery policy objectives are as follows:

1. To reduce nursing and midwifery vacancy rates from current 63% to 50% by 2022.
2. To provide direction to decision makers, stakeholders and partners for effective planning and implementation of nursing and midwifery services.
3. To facilitate delivery of quality nursing and midwifery services.
4. To facilitate quality clinical mentorship and supervision of students; and timely placement of new nursing and midwifery graduates.
5. To promote utilization of research evidence in nursing and midwifery Leadership, Management, Education and Practice.

CHAPTER FOUR: POLICY THEMES, POLICY STATEMENTS AND STRATEGIES

4.1. Policy Themes

The policy themes are:

1. Human resource for Nursing and Midwifery Services
2. Nursing and Midwifery Leadership and Management
3. Nursing and Midwifery Practice: Hospital based and Community based
4. Nursing and Midwifery Education
5. Nursing and Midwifery Research

4.1.1. Policy Area 1: Human Resources for Nursing and Midwifery Services

Adequate numbers of human resources for nursing and midwifery services are crucial for the provision of health services. By June 2014; the vacancy rate for nursing and midwifery personnel was at sixty-three percent. There is need, therefore, to address the existing vacancy rates through various strategies in order to have adequate numbers of nursing and midwifery staff in the healthcare system. Furthermore, good human resource management practices need to be strengthened in order to utilize and retain the available qualified nursing and midwifery personnel in the system.

Policy Statements:

a. The Policy shall ensure that Nursing and Midwifery vacancy rates are reduced

Strategies:

- i. Advocate for special consideration for recruitment, replacement and appointment procedures for nurses and midwives.
- ii. Develop nursing and midwifery programmes that address the needs of the country.
- iii. Lobby for incentive packages for nurses and midwives posted to “hard-to-staff areas,” rural areas or otherwise hardship positions.

b. The Policy shall ensure that career pathways for nurses and midwives are refined

Strategies:

- i. Define career pathways and designations for various professional cadres and create positions for specialized nursing and midwifery staff as well as those who majored in a particular field of the profession.
- ii. Support efforts to upgrade junior nursing and midwifery staff.

c. The Policy shall ensure that deployment standards are followed

Strategies:

- i. Ensure that nurses and midwives are deployed where their expertise, services or specialties are needed.
- ii. Enforce administrative arrangements for secondments unless stated otherwise.

4.1.2. Policy Area 2: Nursing and Midwifery Leadership & Management

The Nursing and midwifery profession requires strong management and leadership to direct all nurses, midwives, stakeholders and partners to adhere to professionalism and promote quality improvement in the delivery of nursing and midwifery services.

Policy Statement

a. The policy shall enforce adherence to professionalism among nursing and midwifery personnel.

Strategies:

- i. Ensure that all nurses and midwives are licensed to practice by the Nurses and Midwives Council of Malawi and renewed annually.
- ii. Enforce adherence to the prescribed nurses' and midwives' dress codes according to professional cadre.
- iii. Reinforce ethical conduct among nurses and midwives in accordance with their Code of Ethics.

b. The Policy shall strengthen capacity of nursing and midwifery leaders to effectively perform in a decentralized healthcare system

Strategies:

- i. Advocate for higher leadership positions at District level, from the current grade G, with the intention of supporting the quality of nursing and midwifery services in a decentralized healthcare system
- ii. Establish a comprehensive leadership and management training programme; and create an enabling environment for growth and development for nursing and midwifery leaders
- iii. Formalize appointments procedures for ward/departmental nurse/midwives in-charge
- iv. Ensure availability and accessibility of relevant national policies, strategic plans, protocols, standards and guidelines at all levels of healthcare
- v. Institutionalize performance based management methods as prescribed
- vi. Empower nursing and midwifery leaders to execute rewards and discipline according to Malawi Public Service Regulations (MPSR)

c. The Policy shall promote the creation of a conducive practice environment for nursing and midwifery staff

Strategies:

- i. Prioritize workplace safety and provide occupational health services for nursing and midwifery staff.
- ii. Promote Public Private Partnerships and support quality improvement initiatives in the provision of nursing and midwifery services.
- iii. Develop management tools for nursing and midwifery service delivery.
- iv. Establish appropriate nurse - patient ratios for various service delivery settings.
- v. Prioritize the welfare of nursing and midwifery staff.
- vi. Ensure the availability of a disaster management plan in the workplace.

d. *The Policy shall ensure availability of basic equipment and medical supplies for provision of nursing and midwifery services.*

Strategies:

- i. Budget for equipment and supplies for basic nursing and midwifery care.
- ii. Mobilize resources and ensure appropriate distribution of equipment and supplies to all wards/departments providing nursing and midwifery care.
- iii. Create a system to ensure accountability for available equipment and supplies.

4.1.3. Policy Area 3: Nursing and Midwifery Practice

Nursing and midwifery practice aims at improving the quality of life of clients, patients, families and communities. Comprehensive care involves caring for the whole person incorporating physical, psychological, social and spiritual aspects on the basis of promotive, preventive, curative and rehabilitative care. Nursing and midwifery practice shall include provision of care across the lifespan in the following areas: medical-surgical nursing (adults and children); mental health/psychiatric nursing; sexual, reproductive, maternal and neonatal health services (SRMNH) and adolescent-friendly services, in both hospital and community settings.

4.1.3.1. Hospital Based Nursing and Midwifery Practice

Hospital based nursing and midwifery practice aims to provide comprehensive quality nursing and midwifery care to individuals, families and communities in the hospital setting. Nursing and midwifery practice in the hospital setting is distinct in that caters for the sick in hospital who require close observation.

Policy Statements:

a. *The Policy shall ensure that nurses and midwives provide comprehensive individualized care utilizing the nursing and midwifery process.*

Strategies:

- i. Enforce provision of comprehensive, quality, evidence-based nursing and midwifery care to patients 24 hours a day, 7 days a week.
- ii. Ensure that nurses and midwives practice within their scope as expected of their various cadres.

- iii. Promote the utilization of appropriate nursing and midwifery theories or models during care provision.
- iv. Ensure continuity of patient care through proper handovers in between shifts.
- v. Strengthen supervision, monitoring and evaluation of nursing and midwifery care.
- vi. Ensure that nurses and midwives observe rights and responsibilities of patients/clients and guardians, and understand their own rights.
- vii. Promote collaboration with other multidisciplinary team members during care provision.

b. The Policy shall facilitate availability of adequate resources for delivery of hospital-based nursing and midwifery services.

Strategies:

- i. Advocate for prioritization of resources for hospital based nursing, midwifery and palliative care services.
- ii. Advocate for increased availability and access to nursing and midwifery services as well as palliative care services in all health facilities.
- iii. Ensure availability of resources for hospital based nursing; midwifery and palliative care services

4.1.3.2. Community Health Nursing and Midwifery Practice

Community health nursing and midwifery is a practice of nursing and midwifery services in the community, where it aims to provide comprehensive nursing and midwifery care to individuals, families, special groups and communities. It is an essential service in the national health system, as a majority of the population lives in rural areas, where distance to health facilities is the main barrier in accessing health services. A robust community health nursing and midwifery service has the potential to improve health outcomes, as well as decrease cost of care.

Policy Statements:

a. The policy shall ensure that all individuals, families, special groups and communities access community health nursing and midwifery services.

Strategies:

- i. Provide leadership for community health nursing and midwifery services.
- ii. Strengthen community health nursing and midwifery services by integrating community health nursing interventions in all nursing and midwifery services.
- iii. Promote Public Private Partnerships and stakeholder collaboration for implementation of community health nursing and midwifery services.
- iv. Utilize appropriate culturally acceptable theories or models in service provision.
- v. Promote rights-based approach during provision of care with reference to various international agreements and declarations.
- vi. Promote implementation of EHP for comprehensive nursing and midwifery services in the community.

- vii. Strengthen mentorship, supervision, monitoring and evaluation, including reporting systems for community health nursing and midwifery services
- viii. Empower communities to define and solve their problems / needs.

b. The Policy shall guide availability of adequate resources for delivery of quality community health nursing and midwifery services.

Strategies:

- i. Advocate for equipment and supplies for community health nursing and midwifery services.
- ii. Advocate for financial support from relevant stakeholders.
- iii. Advocate for increased availability and access to palliative care services at community level.
- iv. Strengthen multidisciplinary and multisectoral collaboration and partnership in the provision of community health nursing and midwifery services.

4.1.3.3. Policy Area 4: Nursing and Midwifery Education

The training of nurses and midwives is coordinated by the Directorate of Nursing and Midwifery, in the Ministry of Health. Training institutions are responsible for the theoretical teaching whilst health facilities provide the clinical teaching. As such, the Nursing and Midwifery Policy aims to promote quality nursing and midwifery education through strengthening the link between colleges and health facilities with the ultimate aim of improving the quality of patient care.

Policy Statements:

a. The policy shall promote quality nursing and midwifery pre-service education

Strategies:

- i. Sensitize potential candidates to join the profession
- ii. Standardize recruitment guidelines for nursing and midwifery students.
- iii. Institutionalize student - tutor ratio for various nursing and midwifery training programmes.
- iv. Lobby for positions for nursing and midwifery tutors and instructors.
- v. Institutionalize periodic curriculum review for all training institutions.
- vi. Advocate for conducive environment for students learning.
- vii. Strengthen monitoring and evaluation of nursing and midwifery training institutions.
- viii. Strengthen mentorship for new graduates.

b. The policy shall reinforce standards for promotion of adequate clinical experience for nursing and midwifery students

Strategies:

- i. Ensure availability of clinical preceptors and role models in the clinical and community setting.
- ii. Promote continued collaboration between teaching and clinical/community staff.
- iii. Create a conducive clinical environment for student teaching and learning

c. The policy shall encourage prioritization of Continuing Professional Development (CPD) for all nurses and midwives

Strategies:

- i. Advocate for resources for conducting Continuing Professional Development (CPD) activities in health facilities.
- ii. Institutionalize continued professional development (CPD) for all nurses and midwives.
- iii. Support nurse and midwives undergoing upgrading courses and in service training.

4.1.4. Policy Area 5: Nursing and Midwifery Research

Nursing and Midwifery research is essential to build a body of evidence based knowledge and practice. There is need for a deliberate policy to encourage nurses and midwives to conduct research and apply the findings in practice.

Policy Statement:

a. The policy shall encourage integration of operational research in nursing and midwifery practice.

Strategies:

- i. Advocate for resources to conduct nursing and midwifery research
- ii. Build institutional capacity for conducting nursing and midwifery research
- iii. Strengthen the capacity among nursing and midwifery personnel in conducting operational research
- iv. Advocate for a designated nursing and midwifery officer in the Research Directorate
- v. Advocate for involvement of nurses and midwives in research bodies
- vi. Promote use of evidence based interventions in nursing and midwifery practice
- vii. Determine research priorities in nursing and midwifery

b. The policy shall facilitate the development of a platform for sharing Nursing and Midwifery research findings.

Strategies:

- i. Create a forum for dissemination of nursing and midwifery research
- ii. Support nurses and midwives to participate in research dissemination meetings at national and international levels

CHAPTER FIVE: IMPLEMENTATION ARRANGEMENTS

5.1. Institutional Arrangements

The key stakeholders that will be involved in implementing the policy include: Government Ministries, Departments and Agencies, private sector organizations, development partners, civil society organizations, and non-governmental organizations. The role of key stakeholders in the implementation, monitoring and evaluation of the policy is therefore as follows:

Ministry of Health and Population

Through the Directorate of Nursing and Midwifery Services, the MOHP shall:

- Plan, develop, disseminate and review policies, standards, guidelines and protocols for nursing and midwifery services
- Provide overall guidance for provision of quality nursing and midwifery services.
- Mobilize and leverage human and material resources for the implementation of the nursing and midwifery policy
- Monitor and evaluate adherence to implementation of the nursing and midwifery policy.
- Coordinate with Development Partners, International Organizations, Non-governmental organizations, Private and Public Sectors for cooperation and collaboration to promote and accelerate implementation of nursing and midwifery policy
- Represent nurses and midwives in International and national forums

Health Facilities

- Implement policies, guidelines and protocols in delivery of nursing and midwifery services to clients
- Provide conducive clinical practice environment for nursing and midwifery students

Ministry of Local Government and Rural Development

- Mobilize resources for training of nurses and midwives
- Collaborate with Ministry of Health and Population on the deployment of nurses and midwives
- Create conducive environment for provision of Nursing and midwifery services in local health facilities
- Reinforce disciplinary measures among nurses and midwives

Ministry of Finance, Economic Planning and Development

- Provide adequate budgetary allocation for implementation of nursing and midwifery services

Ministry of Education, Science and Technology

- Support nursing and midwifery training institutions.
- Partner with nurses and midwives in carrying out school health programs
- Motivate pupils to join nursing and midwifery profession

Ministry of Information and Civic Education

- Sensitize communities on nursing and midwifery services.
- Facilitate public education through multimedia approach on nursing and midwifery services.
- Coordinate publicity and media coverage among stakeholders on nursing and midwifery services.

Ministry of Gender, Children and Social Welfare

- Empower women and children to make informed choices regarding nursing and midwifery services
- Advocate for male involvement in health care
- Advocate against harmful cultural practices that affect nursing and midwifery services
- Partner with nurses and midwives in managing clients with psychosocial issues.

Ministry of Agriculture Irrigation and Water Development

- Promote utilization of nutritious foods to ensure proper nutritional status for all Malawians.
- Promote awareness on good nutrition, food diversification, and food production at household level
- Provide safe water to health facilities and communities

Ministry of Youth and Sports

- Promote behavioral change interventions among the youth.

Parliamentary Committee on Health

- Lobby for increased budgetary allocation to the health sector.

- Advocate for use of Local Development and Constituency development fund to support nursing and midwifery services.
- Advocate for incentive packages for nurses and midwives

Development Partners

- Provide resources for implementation of the nursing and midwifery policy
- Support monitoring and evaluation of Nursing and midwifery services
- Provide technical assistance for nursing and midwifery services

Associations and Unions

- Reinforce policy implementation
- Promote community awareness on issues of nursing and midwifery services.
- Support human resource development for nursing and midwifery services
- Lobby for conducive work environments for nurses and midwives
- Participate in decision making on issues affecting the two professions

Regulatory Bodies

- Provide guidance for certification for the attainment of minimum standards, competence and skills required for the provision of nursing and midwifery services
- Promote inclusion of current trends in nursing and midwifery pre-service and in service programs.
- Monitor adherence to acceptable standards of practice.
- Develop nursing and midwifery education and practice standards.
- Reinforce professional conduct among nurses and midwives

Training institutions

- Incorporate new trends in nursing and midwifery care into pre-service training
- Increase production of professional nurses and midwives
- Design relevant training programmes in response to national priorities.

CHAM

- Collaborate with Ministry of Health and Population on the training of nurses and midwives

- Provide technical and financial support for provision of nursing and midwifery services

Civil Society Organizations

- Community awareness of nursing and midwifery care
- Community awareness of the right so patients & healthcare workers
- Advocate for the strengthening of nursing and midwifery care at all levels
- Advocate for incentives package and provision of conducive environment for nurses and midwives

Patients, Families & Communities

- Advocate for access to services as required
- Collaborate with nurses and midwives
- Actively involved in decision making with regard to their needs
- Participate in evaluating care provision

5.2. Implementation Plan

To ensure effective implementation of the policy, a detailed implementation plan has been developed (see Annex 1). The implementation plan will provide a linkage between the policy goal and objectives on one hand, and strategies and institutions responsible for implementing those strategies on the other hand. It will also include a timeframe for the implementation of each strategy

5.3. 5.3 Monitoring and Evaluation Plan

The implementation of the policy requires an effective and efficient monitoring and evaluation (M&E) system. The system shall provide the feedback information needed to identify implementation challenges and gaps. A detailed monitoring and evaluation plan for this policy, with appropriate performance indicators, outputs and targets, has been developed (see Annex 2).

Annex 1: Implementation Plan

<i>Policy Area 1: Human Resources for Nursing and Midwifery Services</i>			
<i>Policy Statement: The Policy shall ensure that Nursing and midwifery vacancy rates are reduced</i>			
Objective	Strategy	Responsibility/Stakeholders	Time-frame
To reduce nursing and midwifery vacancy rates	Advocate for special consideration for recruitment, replacement and appointment procedures for nurses and midwives.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, private for profit health organizations, Development Partners	2018-2022
	Develop nursing and midwifery programmes that address the needs of the country.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Training institutions, Professional associations, Development partners	2018-2022
	Lobby for incentive packages for nurses and midwives posted to “hard-to-staff areas,” rural areas or otherwise hardship positions.	MoH&P, MoLGRD, MoFEPD, DHRM&D DHOs, Central Hospitals, CHAM, Parliamentary Committee on Health	2018-2022
<i>The Policy shall ensure that career pathways for nurses and midwives are refined</i>			
	Define career pathways and designations for various professional cadres and create positions for specialized nursing and midwifery staff.	MoH&P, MoLGRD, DHRM&D, DHOs, Central Hospitals, NMCM, CHAM, Professional Associations, Development Partners	2018-2022
	Support efforts to upgrade junior nursing and midwifery staff.	MoH&P, MoLGRD, DHRM&D, MoFEPD DHOs, Central Hospitals,	2018-2022

		NMCM, Professional associations, CHAM, Development Partner	
<i>The Policy shall ensure that deployment standards are followed</i>			
	Ensure that nurses and midwives are deployed where their expertise, services or specialties are needed.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM,	2018-2022
	Enforce administrative arrangements for secondments unless stated otherwise.	MoH&P, DHRM&D, MoLGRD, DHOs, Central Hospitals, CHAM,	2018-2022
<i>Policy Area 2: Nursing and Midwifery Leadership & Management</i>			
<i>The policy shall enforce adherence to professionalism among nursing and midwifery personnel.</i>			
To provide direction to decision makers, stakeholders and partners for effective planning and implementation of nursing and midwifery services	Ensure that all nurses and midwives are licensed to practice by the Nurses and Midwives Council of Malawi and renewed annually.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Professional Associations	2018-2022
	Enforce adherence to prescribed nurses and midwives dress codes according to professional cadre.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Professional Associations	2018-2022
	Reinforce ethical conduct among nurses and midwives in accordance with their Code of Ethics.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Professional Associations	2018 -2022

<i>The Policy shall strengthen capacity of nursing and midwifery leaders to effectively perform in a decentralized healthcare system.</i>			
	Advocate for higher leadership positions at District level, from the current grade G.	MoH&P, MoLGRD, DHRM&D, MoFED, DHOs, Professional Associations	2018-2022
	Establish a comprehensive leadership and management training programme; and create an enabling environment for growth and development for nursing and midwifery leaders.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Professional Associations, Implementing partners,	2018-2022
<i>The Policy shall promote the creation of a conducive practice environment for nursing and midwifery staff</i>			
	Prioritize workplace safety and provide occupational health services for nursing and midwifery staff.	MoH&P, MoLGRD, MoFED, DHOs, Central Hospitals, CHAM, NMCM, Professional Associations	2018-2022
	Promote Public Private Partnerships and support quality improvement initiatives in the provision of nursing and midwifery services.	MoH&P, MoLGRD, MoFED, DHOs, Central Hospitals, CHAM, NMCM, Professional associations,	2018-2022
	Develop management tools for nursing and midwifery service delivery.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Professional associations	2018-2022
<i>The Policy shall ensure availability of basic equipment and medical supplies for provision of nursing and midwifery services</i>			

	Mobilize resources and ensure appropriate distribution of equipment and supplies to all wards/departments providing nursing and midwifery care.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, private for profit health organizations, Development partners, Professional associations, CSOs	2018-2022
	Create a system to ensure accountability for available equipment and supplies.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM,	2018-2022
<i>Policy Area 3: Nursing and Midwifery Practice</i>			
<i>The Policy shall ensure that nurses and midwives provide comprehensive individualized care utilizing the nursing and midwifery process</i>			
To facilitate delivery of quality nursing and midwifery services	Enforce provision of comprehensive, quality, evidence-based nursing and midwifery care to patients 24 hours a day; 7 days a week.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Private for profit health organizations, Professional associations	2018-2022
	Strengthen supervision, monitoring and evaluation of nursing and midwifery care.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Development Partners	2018-2022
	Promote collaboration with other multidisciplinary team members during care provision.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Regulatory bodies, Private for profit health organizations, Professional associations	2018-2022
<i>The Policy shall facilitate availability of adequate resources for delivery of hospital-based nursing and midwifery services</i>			

	Advocate for prioritization of resources for hospital based nursing, midwifery and palliative care services.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Regulatory bodies, private for profit health organizations, Professional association , Development partners	2018-2022
	Ensure availability of resources for hospital based nursing; midwifery and palliative care services.	MoH&P, MoLGRD, MoFED, DHOs, Central Hospitals, CHAM, Regulatory bodies, private for profit health organizations, Professional associations, Development partners	2018-2022
<i>The policy shall ensure that all individuals, families, special groups and communities access community health nursing and midwifery services</i>			
	Provide leadership for community health nursing and midwifery services.	MoH&P, MoLGRD, DHOs, CHAM, NMCM, CSOs	2018-2022
	Strengthen community health nursing and midwifery services by integrating community health nursing interventions in all nursing and midwifery services.	MoH&P, MoLGRD, DHOs, CHAM, NMCM, private for profit health organizations, Communities	2018-2022
	Promote Public Private Partnerships and stakeholder collaboration for implementation of community health nursing and midwifery services.	MoH&P, MoLGRD, DHOs, CHAM, Regulatory bodies, private for profit health organizations, Professional associations, Communities	2018-2022
	Strengthen mentorship; support monitoring and evaluation, including reporting systems for community health nursing and	MoH&P, MoLGRD, DHOs, CHAM, NMCM, Development partners	2018-2022

	midwifery services.		
<i>Policy Area 4: Nursing and Midwifery Education</i>			
<i>The policy shall promote quality nursing and midwifery pre-service education.</i>			
To facilitate quality clinical mentorship and supervision of students; and timely placement of new nursing and midwifery graduates.	Sensitize potential candidates to join the profession.	MoH&P, MoEST, DHOs, Professional associations, Development partners	2018-2022
	Standardize recruitment guidelines for nursing and midwifery students.	MoH&P, MoEST, CHAM, NMCM, Professional association ,	2018-2022
	Institutionalize student - tutor ratio for various nursing and midwifery training programmes.	MoH&P, MoEST, CHAM, NMCM,	2018-2022
	Lobby for positions for nursing and midwifery tutors and instructors.	MoH&P, MoEST, MoFED, DHRM&D, Professional Association ,	2018-2022
<i>The policy shall reinforce standards for promotion of adequate clinical experience for nursing and midwifery students</i>			
	Ensure availability of clinical preceptors and role models in the clinical and community setting.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Regulatory bodies, Professional Associations.	2018-2022
	Promote continued collaboration between teaching and clinical/community staff.	MoH&P, MoEST, DHOs, Central Hospitals, CHAM, NMCM, Professional	2018-2022

		Associations, Development partner	
	Create a conducive clinical environment for student teaching and learning.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Development partners	2018-2022
<i>The policy shall encourage prioritization of Continuing Professional Development (CPD) for all nurses and midwives</i>			
	Advocate for resources for conducting Continuing Professional Development (CPD) activities in health facilities.	MoH&P, MoEST, MoLGRD, DHOs, Central Hospitals, CHAM, Development partners	2018-2022
	Institutionalize continued professional development (CPD) for all nurses and midwives.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NMCM, Development partners, Professional Associations	2018-2022
	Support Nurses Midwife Technicians, Community Midwifery Assistants, to undergo upgrading courses.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Development partners	2018-2022
<i>Policy Area 5: Nursing and Midwifery Research</i>			
<i>The policy shall encourage integration of operational research in nursing and midwifery practice.</i>			
To promote utilization of research evidence in nursing and midwifery Leadership, Management, Education and Practice	Advocate for resources to conduct nursing and midwifery research.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Development partners	2018-2022
	Build institutional capacity for conducting nursing and midwifery research.	MoH&P, MoLGRD, MoEST, DHOs, Central Hospitals, CHAM, Development partners, Training institutions	2018-2022

	Strengthen the capacity among nursing and midwifery personnel in conducting operational research.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Training institutions, Development partners	2018-2022
	Advocate for a designated nursing and midwifery officer in the Research Directorate.	MoH&P, Central Hospitals, Development partners	2018-2022
<i>The policy shall facilitate the development of a platform for sharing Nursing and Midwifery research findings</i>			
	Create a forum for dissemination of nursing and midwifery research.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, NGOs, NMCM, Development partners, Professional associations	2018-2022
	Support nurses and midwives to participate in research dissemination meetings at national and international levels.	MoH&P, MoLGRD, DHOs, Central Hospitals, CHAM, Development partners	2018-2022

Annex 2: Monitoring and Evaluation Plan

POLICY PRIORITY AREA 1: <i>Human Resources for Nursing and Midwifery Services</i>						
Outcome: Reduced nursing and midwifery vacancy rates						
Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/Risks
Improve service delivery by ensuring Universal Health Coverage of essential health care services, paying particular attention to vulnerable populations	Recruitment, replacement and appointment procedures for nurses and midwife in place	Percentage of approved recruitment, replacement and appointment procedures in place	60%	100%	HRH and institutional report	Availability of financial resources and authority
	Nursing and midwifery programmes that address the needs of the country in place	Percentage of specialized Programs developed	55%	100%	Training reports and Staff returns	Availability of financial resources and specific program expertise
	Incentive packages for nurses and midwives posted to “hard-to-staff areas,” rural areas introduced	Incentive package introduced	50%	70%	Institutional reports	Availability of appropriate policies, financial resources and reinforcement

	Defined career pathways and designations for various professional cadres	Career pathways and designations defined	35%	100%	HRH reports	Availability of appropriate policies and reinforcement of functional review
	Junior nursing and midwifery staff upgraded	% of junior nursing and midwifery staff upgraded	25%	60%	Training, HRH and institutional reports	Financial resources and policy reinforcement
	Nurses and midwives are deployed where their expertise, services or specialties are needed.	% Nurses and midwives deployed to areas of their expertise or service needs	33%	100%	Institutional reports	Availability of adequate human resources
	Administrative arrangements for secondment enforced	% of administrative arrangement for secondment enforced	40%	50%	HRH, facility and training college reports	Appropriate policies

POLICY PRIORITY AREA 2: Nursing and Midwifery Leadership & Management

Outcome: Enhanced nursing and midwifery professionalism

Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/ Risks
To provide direction to	Nurses and Midwives are licensed to practice by	Percentage of nurses and	70%	100%	Regulatory body	Deduction at source, penalty and

decision makers, stakeholders and partners for effective planning and implementation of nursing and midwifery services	the Nurses and Midwives Council of Malawi and renewed annually	midwives having renewed their license to practice				regulatory disciplinary measures
	Adherence to the prescribed Nurses' and Midwives' dress codes according to the cadres enforced	Percentage of Nurses and Midwives adhering to the prescribed nurses' and midwives' dress co	60%	100%	Institutional and Nurses and Midwives Council reports	Adherence, reinforcement and regulatory disciplinary measures
	Ethical conduct among nurses and midwives enforced	Percentage of nurses and midwives adhering to ethical conduct	50%	100%	Institutional reports	Adherence to ethics and professionalism, reinforcement and regulatory disciplinary measures

Outcome: Enhanced effective planning and implementation of nursing and midwifery services

Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/Risks
To provide direction to decision makers, stakeholders and partners for effective planning and	Establishment of higher leadership positions at District level created	Percentage of established higher leadership positions at District level created	0	100%	HRH records and staff returns	Process of functional review finalized and approved
	Comprehensive leadership and management training	Number of leadership and management	0	60%	HRH records and training reports	Availability of resources

implementation of nursing and midwifery services	programs established	training programs established				
	Workplace safety and occupational health services for nursing and midwifery staff provided	Percentage of health facilities providing workplace safety and occupational health services for nursing and midwifery staff	50%	80%	Institutional records	Availability of adequate financial resources
	Public Private Partnerships and quality nursing and midwifery improvement initiatives supported	Percentage of health facilities with partners supporting quality nursing and midwifery improvement initiatives	65%	100%	Institutional records	Availability of partners supporting nursing and midwifery services
	Management tools for nursing and midwifery service delivery developed	Percentage of nursing and midwifery management tools developed	60%	90%	Institutional records	Availability of resources
	Appropriate nurse - patient ratios for various service delivery settings established	Percentage of nurse- patient ratios for various service delivery settings established	50%	70%	Institutional records and duty rosters	Availability of adequate of human resource

POLICY PRIORITY AREA 3: Nursing and Midwifery Practice

Outcome: Improved delivery of quality nursing and midwifery services

Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/ Risks
To facilitate delivery of quality nursing and midwifery services	Provision of comprehensive, quality, evidence-based nursing and midwifery care to patients 24 hours a day; 7 days a week enforced	Percentage of health facilities providing comprehensive, quality, evidence-based nursing and midwifery care in 24 hours	50%	80%	Institutional records	Availability of resources and commitment to reinforce policies
	Supervision/monitoring and evaluation of nursing and midwifery care strengthened	Percentage of health facilities supervised , monitored and evaluated	70%	100%	Supervision reports	Availability of financial resources
	Supervision / evaluation and national reporting of community based services including palliative care strengthened	Percentage of community based services including palliative care supervised, evaluated and reported according to standards	80%	100%	Supervision reports	Availability of financial resources

POLICY PRIORITY AREA 4: Nursing and Midwifery Education

Outcome: Improved quality clinical mentorship and supervision of students; and timely placement of new nursing and midwifery graduates

Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/Risks
To facilitate quality clinical mentorship and supervision of students; and timely placement of new nursing and midwifery graduates.	Quality nursing and midwifery pre-service education promoted	Percentage of graduates recruited and deployed	63%	100%	Annual deployment reports	Availability of approved budgets
	Availability of clinical preceptors and role models in the clinical and community setting ensured	Percentage of preceptors and role models identified and trained	42%	80%	Annual training and institutional reports	Availability of financial resources and reinforcement of appropriate policies
	Institutionalized continued professional development (CPD) for	Continuous Professional Development Program	25%	90%	Institutional report	Availability of financial resources and commitment

	all nurses and midwives	institutionalized				for reinforcement
POLICY PRIORITY AREA 5: Nursing and Midwifery Research						
Outcome: Improved utilization of research evidence in nursing and midwifery, Leadership, Management, Education and Practice						
Objective(s)	Output(s)	Performance Indicator(s)	Baseline	Target	Source(s) of Verification	Assumptions/ Risks
To promote utilization of research evidence in nursing and midwifery Leadership, Management, Education and Practice	Resources to conduct nursing and midwifery research improved	Percentage of resources allocated to conduct nursing and midwifery research	0	50%	Reports	Availability of resources
	Capacity among nursing and midwifery personnel in conducting operational research strengthened	Number of nursing and midwifery personnel conducting operational research	30%	60%	Thesis Report	Availability of resources and capacity to conduct operational research
	Designated nursing and midwifery officer in the Research Directorate.	Nursing and midwifery officer designated	0%	100%	Directorate report	Authority and approval granted to designate the research officer

	Forum for dissemination of nursing and midwifery research created	Number of forums created for dissemination of nursing and midwifery research	25%	60%	Research dissemination Reports	Recognition of the need to create the forum
	Nurses and midwives participation in research dissemination meetings at national and international levels supported	Number of research dissemination meetings participated by Nurses and Midwives	60%	90%	Research attendance reports	Availability of financial resources

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