## HEALTH INDICATORS

<table>
<thead>
<tr>
<th>HEALTH INDICATOR</th>
<th>RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL POPULATION</td>
<td>1,876,633</td>
</tr>
<tr>
<td>AVERAGE LIFE EXPECTANCY</td>
<td>49.5</td>
</tr>
<tr>
<td>TOTAL FERTILITY</td>
<td>4.2</td>
</tr>
<tr>
<td>MATERNAL MORTALITY RATIO</td>
<td>1,155/100,000 LIVE BIRTHS</td>
</tr>
<tr>
<td>INFANT MORTALITY</td>
<td>91/1,000 LIVE BIRTHS</td>
</tr>
<tr>
<td>THREE COMMON ILLNESS</td>
<td></td>
</tr>
<tr>
<td>1. HIV AND AIDS 23%</td>
<td></td>
</tr>
<tr>
<td>2. TUBERCULOSIS 454,100,000 (INCIDENCE)</td>
<td></td>
</tr>
<tr>
<td>3. ACUTE RESPIRATORY INFECTIONS 19%</td>
<td></td>
</tr>
</tbody>
</table>
INTRODUCTION

• The framework of this nursing and midwifery strategic plan draws heavily from the Ministry of Health and Social Welfare Human Resources Development and Strategic Plan (HRDSP 2005-2025). The HRDSP has clearly demonstrated critical shortages in the nursing and midwifery workforce impacting on the quality of the health care services. Recognising this challenge, the MoHSW has mandated the nursing department to develop a strategy that will help to ensure not only that nursing has longer term direction but also that its services, programmes and day to day decisions contribute to reduced disease burden and increased survival and quality of life.
MISSION

• Nursing and midwifery mission in Lesotho is to provide equitable, accessible, competency and evidence-based nursing and midwifery care to all the people of Lesotho, in line with the policies of the Ministry of Health and Social Welfare and the decentralization reforms.
Lesotho Nurses and Midwives vision is to be a visible, professional, viable and responsive to the needs of the people of Lesotho.
PHILOSOPHY

• Lesotho Nurses and Midwives belief in;
  1. Nursing and midwifery education that is of quality and based on developing relevant competencies
  2. community need driven services that are evidence based
  3. Health is a human right issue; safeguarding women lives is and investment
  4. Nursing and midwifery contributes to the economy of the country by impacting on the health outcomes positively
  5. PHC model is tantamount to involvement and participation of communities in health decisions that effect them
CORE VALUES

• Equity and fairness

• Quality nursing and midwifery services—well managed, culturally sensitive, integrated, available, accessible, accountable, sustainable

• Professional integrity
STRATEGIC OBJECTIVES

• Develop sustainable approach for nursing and midwifery community driven and competency-based pre-service and service education systems.
• Strengthen nursing and midwifery practice and services
• Strengthen nursing and midwifery professional regulatory bodies (LNA & LNC) systems
• Promote research and evidence-based practice
• Establish communication, collaboration and networking systems with key stakeholders and reporting systems
• Develop capacity of nurses and midwives in monitoring, evaluation and reporting systems
NURSING AND MIDWIFERY WORKFORCE AND EDUCATION

- Nurses and Midwives are the largest health care providers in Lesotho accounting for approximately 33 percent of the labour supply and 90 percent of all health professionals directly engaged in health service production in the country (Human Resources Development & Strategic Plan [HRDSP, 2004]. Nurses and Midwives employed throughout the health sector vary in distribution.
The nurses and midwives in Lesotho work within the Primary Health Care (PHC) principles of providing universally accessible, cost effective, and affordable health care services.

Training institutions produce nurses and midwives annually but are unable to meet the national demand for this cadre without expanding and strengthening their efforts.
STRATEGIC PLAN DIRECTION AND SCOPE

- For the first time Nurses and Midwives have articulated a strategic frame of action, based on their own vision, mission statement, philosophy, core values and working principles that emerged from the consultative discussions with the relevant stakeholders.
PRIORITY AREAS

• Professionalism
• Nurse and Midwife patient/client relationship
• Leadership and management
• Specialization for nursing and midwifery
• Nursing and midwifery education
• Nursing and midwifery research and evidence-based practice
• Quality management and quality assurance
• Lobbying and advocacy
PRIORITY AREAS

• Communication, networking, collaboration/partnership
• Information technology
• Information management
• Resource mobilization and sustainability
• Monitoring, evaluation and reporting
• Enabling working environment for nurses and midwives
• PHC approach
• Task shifting and sharing
RISKS

- Limited supply of resources in MoH due to poor macro economic growth reducing government allocation to the health
- High attrition rate among nurses and midwives
- Limited improvement in leadership and management of nursing and midwifery services with negative impact on standard of practice
- Interruption of support from partners/development agencies as a result of change of focus, priorities and or policies
- Difficulties in the recruitment and retention of nurses and midwives to curb the high attrition rate
- Poor working conditions (salaries, accommodation, rural incentives etc)
ASSUMPTIONS

• Continued support from the government through the MoH and development agencies

• Strengthened linkages and collaboration between the Nursing Council, Nursing Association, Nursing and Midwifery training institutions, Christian Health Association of Lesotho and the Nursing Directorate

• Strengthened and scaling up of pre and service nursing and midwifery education programmes

• Political commitment to health sector reforms
FUTURE DIRECTION OF NURSING AND MIDWIFERY

- **Education:** Based on discussions held with relevant nurse educators, the aspect of community needs driven and competency-based curricula for quality nursing and midwifery care is not clearly definable.

- **Research:** Nurses and midwives have a vital role to play in ensuring that research is not only conducted but shared and used to improve nursing and midwifery practice. But the situational analysis identified a gap in research capacity and its utilization.
FUTURE DIRECTION OF NURSING AND MIDWIFERY

- **Policy frame work and regulatory systems;** The WHO (2001) conceptual framework for nursing workforces describes three important dimensions for competent and motivated nursing and midwifery personnel (policy and planning; education, training and development; and deployment as well as utilization).

- **Nursing leadership in partnerships with other health care providers will strengthen policy development and regulatory systems.** The policy will focus on Lobbying and advocacy for an enabling work environment for nurses and midwives and other health care workers.
FUTURE DIRECTION OF NURSING AND MIDWIFERY

- **Nursing and Midwifery practice and service;** Within the PHC model, nurses and midwives are the pillar for the multidisciplinary health team which provides health care and services to individuals, families and communities.

- All midwives in Lesotho are nurses and significantly their preparedness for service places them in best position to be deployed to work in all settings within the national health services.
FUTURE DIRECTION OF NURSING AND MIDWIFERY

• **Communication, collaboration, networking and advocacy;** Good communication skills among nurses and midwives are the core for respect of human rights and to enhance strengthened partnerships among national and international nurses and midwives associations, government, development agencies, CHAL, institutions for nursing and midwifery education, communities and other stakeholders.

• To raise their profile and improve their image, nurses and midwives will have to establish strong sustainable linkages and diversity through networking and advocacy with relevant stakeholders including politicians and the public therefore work towards improving their communication skills.
IMPLEMENTATION, MONITORING, ADVOCACY AND EVALUATION

- change management during implementation process and beyond is crucial
- To successfully implement this strategic plan, it means assigning responsibilities for the strategies within the key areas of work
PROGRESS POST SP DEVELOPMENT

• National Nursing & Midwifery Education Committee (NNMEC) establishment
• Competency Based Curriculum (CBC) development
• Strengthened collaboration between regulation, professional body, nursing directorate, Nurses Training Institutions (NTI) and Human Resources department
• Funding to build capacity of nurses and midwives (nurse anesthetist and advanced midwives)
• Development of Nursing and midwifery retention package for hard to reach health facilities
• Regulatory and Professional bodies developing their strategic plans
• Regulatory and professional bodies managed to solicit funding to strengthen nursing regulation, by drafting standards, Continuous Professional Development (CPD), scope of practice, review of the Act and other legal frameworks.
Though since its drafting in 2010 NNMSP has not been costed; it is being used to direct nursing and midwifery practice and has attracted support from different interested parties, and significant developments have been achieved such as establishment of National Nursing and Midwifery Education Committee (NNMEC) and development of Competency Based Curriculum (CBC) as well as the training of the nurse specializing in advanced midwifery and anaesthesia so that health outcomes can be improved.
Thank you for your attention

Khotso! Pula! Nala!

Peace! Rain! Prosperity!