LESOTHO 2ND YEAR MONITORING THEIR NATIONAL CPD FRAMEWORK

In 2011, the Lesotho nursing and midwifery leadership developed a national CPD framework which linked a minimum CPD requirement to re-licensure. The CPD Framework was implemented in 2012. In 2013, a monitoring strategy was developed and data collection began in 2014 with renewal of practising licenses. Lesotho now has two years of data which is giving them important insights into the implementation of their national CPD framework. In 2015, 92% of licensed nurses, midwives and nursing assistants submitted their CPD logbooks for verification (up from 79% in 2014). A further 5.5% were granted exemptions. Of those submitting logbooks for verification, 97% were compliant with the CPD requirement compared with 89% in 2014. Lesotho is pleased with the general improvements in 2015 and comment that nurses and midwives are more informed about the CPD requirement and there is a corresponding improvement in compliance.

BOTSWANA FINALISES THEIR SCOPES OF PRACTICE FOR NURSES AND MIDWIVES

The Botswana nursing and midwifery leadership was funded through an ARC grant to develop a scopes of practice for nurses and midwives. The final draft of the scopes of practice was submitted to comment by nursing and midwifery leaders at a stakeholder meeting held in April. The document was endorsed by the stakeholders with very little change recommended. The scopes of practice will now be submitted to the Nursing and Midwifery Council of Botswana and the Botswana Ministry of Health for endorsement.

BECOME A CNMF MEMBER

Membership of the CNMF is open to national nursing associations; national midwifery associations; specialist nursing associations (such as mental health, critical care, paediatrics, operating theatre etc); regional and international nursing, midwifery and health associations; regulatory bodies, universities, and individuals. By becoming a member of the CNMF, you can support the work of the CNMF and become involved in that work. Members can promote their own work through the monthly e-News, the CNMF website or the extensive CNMF network. You can join online through the CNMF website: http://www.commonwealthnurses.org/membership.html

NEW FILM FROM MEDICAL AID FILMS

Obstructed Labour: An Introduction for Midwives

Filmed in Kenya, with funding from the Vitol Foundation, the film explains the main causes of obstructed labour, what happens during obstructed labour, how signs of obstructed labour can be identified, and steps to be taken for effective management. The film follows Kandie, a midwife, as she monitors a mother in early labour, and a mother with suspected obstructed labour. This film aims to provide valuable support for midwifery training.
AFRICAN REGIONAL COLLABORATIVE: West and Central

The African Regional Collaborative (ARC) for Nurses and Midwives is a partnership between CDC Atlanta, Emory University, ECSA-HC, and the CNMF.

ARC has been working with the nursing and midwifery leadership in 17 east, central and southern Africa countries for the past four years.

In July 2015, ARC started working with three countries in west and central Africa: Cameroon, Cote d’Ivoire, and DRC. These three countries have been awarded small grants to work on quality improvement projects in their countries which strengthen nursing and midwifery in the provision of HIV prevention, care and treatment.

In April 2016, ARC West and Central met in Cameroon to receive progress reports on the projects. For more information about ARC, go to: http://www.africanregionalcollaborative.com.

POOR PROGRESS FOR ‘LEAST DEVELOPED’ COUNTRIES

A mid-term review was recently conducted of the Istanbul Program of Action 2011-2020 which aimed to halve the number of ‘least developed’ countries by 2020. The target was for 24 countries to move out of that ranking by 2020 however with existing support mechanisms only 10 countries are predicted to change their ranking by 2020.

Every ten years since 1971, the United Nations has convened a special conference to consider global action programs and to support development in ‘least developed’ countries (currently numbering 48 countries). This group of countries is deemed to be the most disadvantaged in the development process and faces the greatest risk of failing to overcome poverty.

The Istanbul Program of Action (IPoA) is a global policy agenda for ‘least developed’ countries, including targets to help them progress from this ranking.

A consortium of seven development partners which includes the Commonwealth Secretariat (LDC IV Monitor http://ldc4monitor.org/) was established to provide independent and objective monitoring of the program. LDC IV Monitor conducted the mid-term review of the IPoA focusing on four themes: structural transformation; export diversification; prospects for countries’ graduation from ‘least developed’ classification; and implications for achieving the sustainable development goals (SDGs). The report found that many objectives set out in the IPoA are unlikely to be achieved.

During the forty years since the Least Developed Countries (LDC) category was created, international efforts to eliminate the conditions that make these countries ‘least developed’ have shown only meagre results. Only four countries have graduated from the LDC status in four decades (Botswana 1994, Cape Verde 2007, Maldives 2011 and Samoa 2014).

In the ‘least developed’ country list, 34 countries are located in Africa; 9 in Asia; 4 are Pacific Island countries; and 1 is located in Latin America. Thirteen countries with a ‘least developed’ ranking are Commonwealth countries.