

CLINICAL PLACEMENT SYLLABUS

FOR ASSOCIATE NURSING PROGRAM

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FOREWORD

The Ministry of Education, through the Rwanda Basic Education Board (REB) has initiated the Associate Nursing Program at the second cycle of secondary education. The underlying principle behind the introduction of this program is to ensure that the curriculum responds to the needs of the learners, the society, and the labour market.

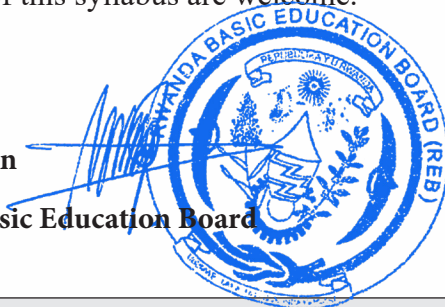
Clinical attachment is one of subjects of Associate Nursing Program that emphasizes on equipping the learners with required knowledge, skills, and attitudes and values required for high-quality basic nursing care. This aligns with Rwanda Vision 2050, which focuses on improving the country’s socio-economic status through quality health care delivery. It is only the healthy people who can significantly play a major role in this socio-economic transformation journey.

Clinical attachment subject helps the learners translate theoretical knowledge into practice through their exposure to real situations of nursing care provision in a clinical and community health care settings, thus prepares them for future associate nursing practice.

I extend my sincere appreciation to all those involved in developing this syllabus, especially the Ministry of Health in collaboration with REB, who coordinated the entire process from the beginning to the end. Feedback and suggestions for future revisions of this syllabus are welcome.

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1. GENERAL INTRODUCTION

1.1. Background on introduction of the associate Nursing Program in Secondary Schools

For a long time ago, nursing education around the World has taken different steps from the traditional apprenticeship, vocational, and hospital-based training models to a higher education academic model of teaching and learning (Gaberson & Oemann, 2010). This paradigm shift was driven by the increased demand of the professionalization of nursing, the changing illness patterns, and the expansion of the knowledge-based society requiring more improved and innovative education preparation of nursing professionals that is adapted to the context and specific health needs (Yam, 2004).

In Rwanda, the above-mentioned transformations in nursing education evolved overtime. Healthcare education in general started in 1933 with medical assistants “Assistants Médicaux” program, followed by the assistant midwives “Auxiliaires accoucheuses” in 1949 (Harelimana, et., 2015). From 1954 up to 1979, the A2 and A3 programs were established at secondary level. From the academic year 1979 to 2004, the program of nursing education was exclusively “A2” secondary level (Kabgayi School of Nursing and Midwifery, 2013). Nurses were mostly prepared for hospital and health center-based healthcare provision, leaving out the community. This gap was later addressed by introduction of the Community Health Workers (CHWs) in 1995 (MoH, 2012).

The Cabinet resolution of October 27th, 2004 phased out the A2 nursing program. A transition period was decided to move from nursing program A2 to Nursing Program A1 up to 2007. This was in the purpose to train nursing professionals at a tertiary level in order to produce highly-qualified professionals, thus improving the quality health care delivery. However, gaps in providing basic nursing care at different levels were continually observed.

Fourteen years later after the closure of secondary school level for nursing education program, the Government of Rwanda has decided to introduce in second cycle of secondary education level, the Associate Nursing Program as provided by the Article 58 of the Rwandan Law Determining Organisation of Education No 10/2021 of 16/02/2021 (MoE, 2021).

Therefore, the associate nursing program is being introduced to provide the support needed in basic nursing care provision, with capacity to progress in different advanced health care professions. This decision aims to meet the current and contextual health needs that present high demand to provide the basic nursing care at different levels of the Rwanda healthcare system, particularly in the community.

1.2. Associate nurse leaver's profile

Upon completion of the associate nursing program, learner should have acquired knowledge, skills and attitudes to:

1. Provide support to individuals, families, groups, and communities when faced with bad news and life changing diagnoses;
2. Provide health education within her/his scope of practice;
3. Demonstrate understanding of the determinants of health that affect individuals, families, groups, and communities;
4. Demonstrate understanding of basic common health conditions affecting individuals of all age groups and their basic nursing care;
5. Assess individuals, families, groups, and community health needs and provide basic nursing care using evidence-based practice;
6. Collaborate effectively with multidisciplinary team members, clients, and stakeholders in the provision of basic nursing care;
7. Demonstrate responsibility and accountability in daily activities;
8. Ensure the privacy, dignity, and safety of individuals is maintained at all times;
9. Provide support for woman during pregnancy, normal delivery, and post-natal care;
10. Explain scientific phenomena using correct scientific terminologies;
11. Demonstrate knowledge and skills required to progress to higher learning education;
12. Express themselves fluently, and with confidence, in speaking and writing using correct vocabulary and grammar appropriately;
13. Perform experiments using a range of scientific and medical tools and equipment and draw appropriate conclusions;
14. Demonstrate ability to manage data (collect, recording, processing, analysis, synthesis, and reporting).

1.3. Subjects of associate nursing program

The subjects to be studied at each level are set out below:

1. Fundamentals of Nursing
2. Biology
3. Chemistry
4. Mathematics
5. Physics
6. Ethics and Professional Code of Conduct
7. Medical Pathology
8. Surgical Pathology
9. Pharmacology
10. Maternal and Child Health
11. Individual Learning
12. Clinical Attachment
13. Kinyarwanda
14. English
15. French
16. Entrepreneurship
17. Citizenship
18. ICT
19. Sports/ Clubs

In order to achieve a competent level, the following subjects' syllabi are based on the following major components:

- The rationale or relevance of the subject
- Broad subject competencies
- Pedagogical and assessment approaches
- Specific objectives of the subject
- Learning outcomes per unit of learning
- Subject content
- Learning activities
- Learning material required.

2. TEACHING AND LEARNING IN CLINICAL PLACEMENT

2.1. Rationale of Clinical Placement

Clinical Placement subject constitutes an opportunity to the learners to translate theoretical knowledge into practice. It prepares the learners for future professional nursing practice. During clinical placement period learners are exposed to the real situations in the healthcare settings, they observe what the professional healthcare providers does in daily practice. Learners are allowed to perform the observed procedures under supervision by licensed healthcare providers and finally they are allowed to perform under minimum supervision. During the clinical placement period, students do not only learn technical procedures but also professional behavior. In addition to health care settings, including health centers and hospitals, the learners are allocated in the community, to gain experiences that will help them for future professional practice at different levels of health care provision.

2.1.1. Clinical placement and Society

Teaching and learning in clinical placement are critical for associate nurse to develop required competences for the provision of basic nursing care by looking at physical, psychological, social, and spiritual aspects of the client. Clinical placement is designed to give learners the opportunity to integrate the theoretical knowledge and the practice. It builds learners' confidence, knowledge and professional identity as well as consolidating or developing clinical skills. Successful nurse-client relationship requires both the knowledge and skills in providing basic nursing care, since both are strangers to each other at first meeting. This subject is necessary to provide basic nursing skills and provide care to clients effectively. The client in a healthcare setting appreciates healthcare providers who display welcoming, collaborative behavior, active listening and who keep confidentiality of the clients, in the main purpose to assess and attend to the client's health needs.

Additionally, clinical placement allows the associate nurse to enhance the quality of patient care. Understanding individual patients' needs provides a significant insight into how they experience the World, particularly their experience of health and care. It is of particular relevance to preventive, curative, rehabilitative and promotional health behaviors. This allows the associate nurse to reflect on their actions while attending to patients' needs from different perspectives, taking into consideration what is most important to them as far as the appropriate care is concerned.

2.1.2. Clinical placement and learners

Associate nurse learner needs to be well prepared in clinical attachment as a core subject of the Associate Nursing Program. The subject helps learners to become competent associate nurses who will be able to provide basic and quality nursing care and advance in different health care professions. Clinical placement enables Associate nurses to understand their responsibilities as agents of change in healing capacity or making patients feel better, by treating the patient, while striving to improving the quality of the clients' lives. Learners become aware that learning opportunities and the quality of their placement experience will be heavily influenced by their own will, in order to master expected skills in the subject and preceptor's motivation. Learners will feel comfortable during the learning process and be the future agents for promoting effective healthcare delivery at different levels of the health care system.

In maintaining effective and adaptable bedside manner, learners are required to constantly use critical thinking when assisting the clients and planning for nursing interventions. It's important to note that Associate nurses are communicating and caring for clients who are typically in distress about their well-being. Taking Clinical placement course as associate nurses in training can prepare them on how to effectively respond to clients' needs. Associate Nurses are also expected to effectively communicate with other health professionals, patients, families, and Community while assessing and responding to their health needs.

2.2. Competences

Competence is defined as the ability to use an appropriate combination of knowledge, skills, attitudes, values and behaviour to accomplish a particular task successfully.

Basic competences are addressed in the stated broad subject competences and in objectives highlighted year on year basis and in each of units of learning. The generic competencies, basic competences that must be emphasized and reflected in the learning process are briefly described below and teachers will ensure that learners are exposed to tasks that help the learners acquire the skills.

2.2.1. Generic competences

Critical and problem-solving skills: The acquisition of such skills will help learners to think critically, innovatively and broadly to evaluate and find solutions to problems encountered in the healthcare system.

Creativity and innovation: The acquisition of such skills will help learners to take initiatives and use clinical reasoning beyond knowledge provided in the classroom to generate new ideas and construct new solutions.

Research: This will help learners to find answers to questions based on existing information and concepts and use it to explain phenomena from gathered information.

Communication in official languages: Teachers, irrespective of being language teachers will ensure the proper use of the language of instruction by learners. The teachers should use therapeutic communication in the classroom to cultivate the health professional behaviors and communication skills in learners.

Cooperation, inter personal management and life skills: This will help the learners to cooperate as a team in whatever task assigned and to practice positive ethical moral values and while respecting rights, feelings and views of others. Perform practical activities related to environmental health conservation and protection. Advocate for personal, family and community health, hygiene and nutrition and responding creatively to a variety of challenges encountered in life.

Lifelong learning: The acquisition of such skills will help learners to update knowledge and skills with minimum external support. The learners will be able to cope with evolution of knowledge advances for personal fulfillment in areas that are relevant to their improvement and development

2.2.2. Broad Clinical placement competences

The teaching of Clinical placement should enable the learner to:

- Build an authentic experience of day-to-day clinical practice;
- Apply basic nursing skills while caring for individuals, families, groups of people and communities considering their fundamental needs;
- Apply knowledge of the determinants of health and family structure in health promotion, disease prevention and health- care provision; and
- Demonstrate professionalism while caring for individuals, families, groups and community.

2.2.3. Clinical placement and developing competencies

The national policy documents based on national aspirations identify some ‘basic Competencies’ alongside the ‘Generic Competencies’ that will develop higher order critical thinking skills and help learners learn behavior sciences for application in healthcare provision.

The nature of learning activities which are mainly clinical reasoning orient and contribute to the achievement of those competencies, through clinical scenario, cooperative learning, Inquiry-based instruction, differentiation, behaviour management, professional development in social behavior, simulation, visual and practical learning experiences. All those strategies help Learners to understand how their schooling applies in the real-world.

2.3. Pedagogical Approach

The constructivist approach of teaching will be at the heart of the implementation of the Clinical Placement syllabus to facilitate the active participation of learners, for them to develop clinical reasoning, and innovation in the learning process and health care provision as independent agents.

2.3.1. Role of the learner

In the Clinical placement syllabus, learners are in the driver’s seat which implies that they will construct their knowledge through their own clinical case scenario management, and critique current clinical case management. More specifically, when engaging in inquiry, learners will describe clinical cases, ask questions, construct explanations, compare those explanations with recommended clinical case management, and communicate their clinical summaries to others. By so doing, the learners will take ownership of the learning process. As for learners, their activities are indicated against each learning unit reflecting their appropriate engagement in the learning process. **Even though they do not necessarily take place simultaneously in each and every clinical placement period and for all levels, over time learners get involved in the following activities:**

- Observing different interventions for nursing management;
- Taking part in selecting appropriate clinical cases for learning objectives;
- Developing and using skills of gathering data by history taking and physical examination;

- Working collaboratively with others, communicating their own ideas and considering others' ideas;
- Expressing themselves using appropriate professional terms and representations in writing and talk;
- Engaging in lively public discussions in defense of their work and explanations; and
- Applying their learning in real-life contexts.

During this reciprocal interaction, what learners will acquire is not only content knowledge, but also and mainly a number of skills including how to assess client's needs, approach a problem, identify important resources, analyze and interpret data, and take clinical decisions.

2.3.2. Role of the teacher

The role of the teacher will remain critical. However, instead of being the “sage on the stage”, the teacher will rather be “the guide on the side” who acts as facilitator in a variety of ways which include:

- Encouraging and accepting Learner autonomy and initiative;
- Using nursing terminology in clinical teaching;
- Allowing Learner responses to drive lessons, shift instructional strategies, and alter content;
- Familiarizing her/himself with Learners' understandings of concepts before sharing their own understandings of those concepts;
- Encouraging learners to engage in dialogue, both with the teacher and one another;
- Encouraging learner inquiry by posing thoughtful, open-ended questions and asking learners to question each other;
- Engaging learners in experiences that pose contraindications to their initial hypotheses and then encouraging discussion; and
- Providing time for learners to construct relationships and create metaphors; and nurturing learners' natural curiosity.

2.3.3. Special needs education and inclusive approach

All Rwandans have the right to access education regardless of their different needs. The underpinnings of this provision would naturally hold that all citizens benefit from the same menu of educational programs. The possibility of this assumption is the focus of special needs education. The critical issue is that we have persons/ learners who are totally different in their ways of living and learning as opposed to the majority. The difference can either be emotional, physical, sensory and intellectual learning challenged.

2.4. Assessment Approach

Assessment is the process of evaluating the teaching and learning processes through collecting and interpreting evidence of individual learner's progress in learning and to make a judgment about a learner's achievements measured against defined standards. Assessment is an integral part of the teaching learning processes. The competence-based curriculum assessment must also be competence-based; whereby a learner is given a complex situation related to his/her daily living life and asked to overcome the situation by applying what he/she learned. Assessment will be organized at the following levels: School-based assessment, District Level assessment ,and National level assessment.

2.4.1. Types of assessment

a) Formative and continuous assessment (assessment for learning)

Continuous assessment involves formal and informal methods used by schools to check whether learning is taking place. When a clinical supervisor is allocating the students in the services/units of clinical settings at the beginning of the clinical placement should also inform the students of the assessment criteria and share with them the tools to be used during assessment if applicable. At the end of each clinical rotation, the clinical supervisors should ensure that all the learners have mastered the stated key competencies of the clinical rotation. The clinical supervisors will assess how well each learner masters both the clinical competences (Nursing skills) and the professional competencies (professional behaviours) described in the syllabus and from this, the clinical supervisor will gain a picture of the all-round progress of the learner. The clinical supervisor will use one or a combination of the following: (a) observation (b) pen and paper, (c) oral questions (d) hands on

b) Summative assessment (assessment of learning)

When assessment is used to record a judgment of a competence or performance of the learner, it serves a summative purpose. Summative assessment gives a picture of a learner's competence or progress at any specific moment. The main purpose of summative assessment is to evaluate whether learning objectives have been achieved and to use the results for the ranking or grading of learners, for deciding on progression, for selection into the next level of education and for certification. This assessment should have an integrative aspect whereby a student must be able to show mastery of all competencies.

Summative assessment can be internally school based assessment or external assessment in the form of national examinations. School based summative assessment should take place once at the end of each term and once at the end of the year. School summative assessment average scores for each subject will be weighted and included in the final national examinations grade. School based assessment average grade will contribute a certain percentage as teachers gain more experience and confidence in assessment techniques. In the third year of the implementation of the new curriculum it will contribute 10% of the final grade, but will be progressively increased. Districts will be supported to continue their initiatives to organize a common test per class for all the schools to evaluate the performance and the achievement level of learners in each individual school. This is the comprehensive assessment that takes place at all levels of studies. This subject will be part of the External National Examination. External summative assessment will be done at the end of S6 and this will be for both theory and practical examination.

2.4.2. Record Keeping

This is gathering facts and evidence from assessment instruments and using them to judge the student's performance by assigning an indicator against the set criteria or standard. Whatever assessment procedures used shall generate data in the form of scores which will be carefully recorded and stored in a portfolio because they will contribute for remedial actions, for alternative instructional strategy and feed back to the learner and to the Teachers to check the learning progress and to advice

accordingly or to the final assessment of the students. This portfolio is a folder (or binder or even a digital collection) containing the student's work as well as the student's evaluation of the strengths and weaknesses of the work. Portfolios reflect not only work produced (such as papers and assignments), but also it is a record of the activities undertaken over time as part of student learning. Besides, it will serve as a verification tool for each learner that he/she attended the whole learning before he/she undergoes the summative assessment for the subject.

2.4.3. Item writing in summative assessment

Before developing a question paper, a plan or specification of what is to be tested or examined must be elaborated to show the units or topics to be tested on, the number of questions in each level of Bloom's taxonomy and the marks allocation for each question. In a Competence-based curriculum, questions from higher levels of Bloom's taxonomy should be given more weight than those from knowledge and comprehension level.

Before developing a question paper, the item writer must ensure that the test or examination questions are tailored towards Competence based assessment by doing the following:

- Identify topic areas to be tested on from the subject syllabus;
- Outline subject-matter content to be considered as the basis for the test;
- Identify learning outcomes to be measured by the test;
- Prepare a table of specifications; and
- Ensure that the verbs used in the formulation of questions do not require memorization or recall answers only but testing broad competencies as stated in the syllabus.

2.4.4. Structure and format of the examination

There will be one final clinical examination in a trimester. The learners will be given different learning activities during clinical placement period and the activities will be related to the clinical objectives. The Nursing skills checklist, Clinical logbook and clinical evaluation form will be used for clinical evaluation. Time allocated for the examination will depend on its respective weight.

The examination will be structured as follows:

Component Weighting

COMPONENT	WEIGHTING
Part 1 composed of clinical evaluation during clinical placement period (level of working under supervision). Clinical case studies will be given and nursing procedures will be done under supervision.	Formative clinical evaluation will have 40% of the totals core of the learner
Part 2 composed of final clinical evaluation which is composed of professionalism, hands on practice and theoretical aspects (interview)	Final clinical will have 60 % of the final marks of the learner

2.5. Reporting to parents

The wider range of learning, it is necessary to think about how to share the progress with students. A single mark is not sufficient to convey the different expectations of learning which are in the learning objectives. The most helpful reporting is to share with students what they are doing well and where they need to improve. The clinical setting staff will closely work with the clinical

supervisors of the school to develop professionalism in the students. The clinical staff will report issues related to professionalism to the clinical supervisor and work together to improve professionalism of students and students do not improve their professionalism, they will be reported to the school managers. However, the clinical supervisors and clinical staff should also react in professional ways to prevent any harm or any kind of misconduct that may occur.

2.6. Resources

2.6.1. Material resources

For successful implementation of this syllabus the material resource is required. Thus, the following minimum requirement should be met:

The school infrastructures with its surrounding;

- Nursing skills checklists;
- Clinical Logbooks;
- Clinical materials like materials for assessment and personal protective equipment;
- Clinical uniforms;
- Health facility ready to teach the students;
- Clinical notebook or clinical portfolio to record the daily learned skills;
- Transport facilitation; and
- Living facilitation.

2.6.2. Human resource

The effective implementation of this syllabus needs a joint collaboration of educators at all levels. Given the material requirements, teachers are expected to accomplish their noble role as stated above. However, teachers should be equipped with a strong pedagogical content knowledge (PCK) and enough teaching experience. Furthermore, Clinical supervisors should have clinical experience and trained in clinical teaching to facilitate the translation of theoretical knowledge into practice taking into consideration the clinical objectives of the students and quality of care and patient safety. The students will first observe the nursing skills as they are done in clinical settings, then the supervisors allow students to work under close supervision and gradually allow students to perform such observed nursing skills under limited supervision.

Skills and attitude required for the teacher of clinical placement:

- Engage students in variety of learning activities;
- Apply appropriate teaching and assessment methods;
- Adjust instructions to the level of the learner;
- Search the opportunity for students for hands on practice in clinical settings;
- Creativity and innovation, makes connections/relations with other subjects;
- Show a high level of clinical experience in services under his/her supervision;
- Develop effective discipline skills to manage adequately the clinical placement site;

- Good communicator, Guide and counselor, and
- Passion for student teaching and learning.

3. SYLLABUS UNITS' DEVELOPMENT

3.1. Presentation of the Structure of the syllabus units

Clinical placement subject is taught and learned in upper secondary school education.

At every grade, the syllabus is structured in Topic Areas, and then further broken down into Units. The units have the following elements:

1. Unit is aligned with the Number of Lessons;
2. Each Unit has a Key Unit Competence whose achievement is pursued by all teaching and learning activities undertaken by both the teacher and the learners;
3. Each Unit Key Competence is broken into three types of Learning Objectives as follows:

Type I: Learning Objectives relating to Knowledge and Understanding (*Type I* Learning Objectives are also known as Lower Order Thinking Skills or LOTS)

Type II and Type III: These Learning Objectives relate to acquisition of skills, Attitudes and Values (*Type II* and *Type III* Learning Objectives are also known as Higher Order Thinking Skills or HOTS)

1. Each Unit has a Content which indicates the scope of coverage of what a teacher should teach and learner should be in line with stated learning objectives; Each Unit suggests Learning Activities that are expected to engage learners in an interactive learning process as much as possible (learner-centered and participatory approach); and

2. Finally, each Unit is linked to Other Subjects, its Assessment Criteria and the Materials (or Resources) that are expected to be used in the teaching and learning process.

In all, the syllabus of Clinical placement for upper secondary is taught in 3 levels (S4, S5, and S6) and has 8 units (2 units in S4, 3 units in S5 and 3 units in S6). However, this clinical placement subject depends on other subjects, this implies that clinical objectives may be adjusted after analyzing the competences gained in other theoretical subjects that may be implemented or translated in practice in clinical placement.

Notes:

- Clinical attachment subject consists of 1440 periods or 6 weeks (each week having 40 hours or 5 days where each day has 8 hours). The total 1440 periods are allocated as follows:
 - In Senior 4: The total duration of clinical placement is 480 periods or 8 weeks where 180 periods (or 3 weeks) will be implemented at School and 300 periods (or 5 weeks) will be done during holidays.
 - In Senior 5: the clinical attachment carries 480 periods (or 8 weeks) including 180 periods (or 3 weeks) during school teaching time and 300 periods (or 5 weeks) during vacation (holidays).
 - In Senior 6: 480 periods (or 8 weeks) allocated as follows: 360 periods should be covered at School during teaching time. The remaining 120 periods should be covered during vacation (holidays) of first and second Trimesters.

3.2. Clinical Placement S4

3.2.1. Key Competences at the end of S4

At the end of S4, the learner will have achieved the following main competences:

- Provide basic nursing care with respect of professional ethics and code of conducts;
- Provide maternal and newborn care;

3.2.2. Table of Units for S4

TOPIC AREA: CLINICAL PLACEMENT		SUBTOPIC: FUNDAMENTAL OF NURSING CLINICAL 1		
S4	UNIT 1: FUNDAMENTAL OF NURSING CLINICAL 1		NUMBER OF PERIODS: 300:	
Key Unity Competency: Learner will be able to provide basic nursing care with respect of professional ethics and code of conducts in hospital and health center.				
Learning Objectives to be achieved			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul style="list-style-type: none"> Explain the components of nursing professionalism Describe the different components of history taking Explain different vital parameters Describe different techniques of physical examination 	<ul style="list-style-type: none"> Advocate for patient Communicate effectively with client and team Collaborate effectively with clients and team Take patient full history from different sources Interpret information collected Take vital parameters of the clients Perform inspection, percussion, palpation and auscultation on the client 	<ul style="list-style-type: none"> Keep positive attitude towards clients, colleagues and healthcare professionals Keep confidentiality of the clients/patients, colleagues and healthcare providers Demonstrate ethical behaviour during clinical placement 	<ul style="list-style-type: none"> Professionalism in nursing Nursing code of conduct Ethical issues in nursing profession History taking Physical examination technique Vital parameters: Temperature, respiration, oxygen saturation, pulse, blood pressure, weight, height, 	<ul style="list-style-type: none"> Using case studies, perform a nursing assessment and document appropriately the findings Using a checklist, take vital parameters correctly Using a checklist, perform techniques of manual handling while performing bed making and bed bath.

<ul style="list-style-type: none"> • Discuss the techniques of bed making in clinical settings according to the medical-surgical conditions • Explain techniques of bed bath • Identify the techniques of manual handling in clinical setting • Discuss the techniques of infection control in the hospital • Discuss the advantages and disadvantages of routes of drug administration. 	<ul style="list-style-type: none"> • Document health assessment findings • Make an unoccupied bed for medical and surgical patients • Make occupied bed for patient who can sit and who cannot sit • Change position of clients according to the medication condition of the patients • Perform bed bath for critically ill patients taking into consideration his/her medical conditions • Wash hand with respect of all steps of hand washing • wear appropriately sterile and non-sterile gloves during provision of nursing care • Use appropriately the safety box during provision of nursing care 	<ul style="list-style-type: none"> • Exhibit trustworthiness in daily activities • Maintain integrity during clinical placement • Respect patient's privacy during nursing care provision • Demonstrate responsibility and accountability • Demonstrate self-control while caring for patients • Demonstrate initiative for conducting health assessment of the client • Advocate for patient according to the health assessment findings • Keep the patient in clean and well-made bed 	<ul style="list-style-type: none"> • pain scale, head circumference, Mild upper arm circumference • Techniques of physical examination: Inspection, palpation, percussion and auscultation • Bed making techniques • Bed bath techniques 	<ul style="list-style-type: none"> • Using a checklist, perform techniques of manual handling while performing bed making and bed bath.
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	<ul style="list-style-type: none"> • Use appropriately personal protective equipment in clinical settings • Clean and disinfect the clinical materials and equipment including tray and trolley • Clean and disinfect the used materials according to the healthcare setting policy • Dispose the medical wastes according to the healthcare setting policy • Administer medication by oral,sublingual, suppositories,vaginal, ear, eye, nose, topical application route. 	<ul style="list-style-type: none"> • Appreciate the importance of bed bath and hygiene of the patient in clinical settings • Appreciate the appropriate position of the patient in the bed • Demonstrate safety precautions to prevent injuries. 		
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Links to other subjects: Fundamentals of Nursing, Pharmacology, and Ethics and Professional Code of Conduct

Assessment criteria: Learners can perform step by step the basic nursing care with respect of professional ethics and code of conducts

Materials: Client assessment tool, computer and video CD, Client file, health assessment materials (thermometer, stethoscope, sphygmomanometers, blood pressure machine, weighing scale, pulse oximeter machine, watch, pain scale, tape measure, MUAC tape), tray, trolley, disinfectant, swabs, white coat (clinical uniform), gloves, linens, beds, safety boxes, drugs, mannequins, basins, cold and warm water, chairs, soaps, towels, tooth brushes, body lotions, combs, toothpaste, toilet papers , clean clothes,to name.

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: MATERNAL AND CHILD HEALTH CLINICAL 1	
S4	UNIT 2: MATERNAL AND CHILD HEALTH CLINICAL 1		NUMBER OF PERIODS:180	
Key Unity Competency: Learner will be able to provide maternal and newborn care in a Health Centre				
Learning Objectives to be Achieved				
Knowledge And Understanding	Skills	Attitudes And Values	Content	Learning Activities
<ul style="list-style-type: none"> • Explain danger signs of pregnancy. • Identify complications of pregnancy • Explain signs of labour • Discuss the immediate newborn care 	<ul style="list-style-type: none"> • Admit pregnant woman in antenatal care services • Provide health education focusing on antenatal care • Perform focused antenatal care • Screen for the risks in pregnant woman and Provide appropriate interventions to pregnant woman • Perform Leopold maneuver • Measures fundal height for pregnant woman • Perform vaginal examination 	<ul style="list-style-type: none"> • Respect the national guidelines for antenatal care in provision of care • Appreciate the importance of antenatal care in reduction of maternal and child mortality • Use appropriate language while providing Focused Antenatal care • Respect clients' rights, and privacy • Demonstrate professionalism during the provision of focused antenatal care • Demonstrate the understanding of the immediate postnatal complications 	<ul style="list-style-type: none"> • Antenatal care • care of newborn during postpartum period 	<ul style="list-style-type: none"> • Using a real case, step by step provide focused antenatal case to pregnant woman • Using a real clinical case, provide appropriate newborn care during postpartum period

	<ul style="list-style-type: none"> • Take foetal heart rate • Put on clothes for newborn 	<ul style="list-style-type: none"> • Value the importance of newborn care in postpartum period 		
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Links to other subjects: Maternal and Child Health, Fundamental of Nursing, and Ethics and professional code of conduct

Assessment criteria: Learners provide appropriate nursing care to mother and child during antenatal and post - natal period

Materials: Client assessment tool, computer and video CD, Client file

Physical examination materials (thermometer, medical stethoscope, blood pressure machine, weighing scale, pulse oximeter machine, watch, tape measure, MUAC tape), fetoscope, EDD wheel, tetracycline ointment, trolley, drapes, disinfectant, swabs, safety boxes, dustbins, warmer for babies, weighing scale for babies to name.

3.3. Clinical Placement for S5

3.3.1. Key Competences at the end of S5

At the end of S5, the learner will have achieved the following main competences:

- Provide basic nursing care related to integumentary, musculoskeletal, respiratory, cardiovascular, digestive, and urogenital body systems;
- Provide first aid care in emergency situations;
- Provide maternal and newborn care during postnatal period;

3.3.2. Table units for S5

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: FUNDAMENTAL OF NURSING CLINICAL 2	
S5	UNIT 1: FUNDAMENTAL OF NURSING CLINICAL 2			NUMBER OF PERIODS: 120
Key Unity Competency: Learner will be able to provide basic nursing care related to integumentary, musculoskeletal, respiratory, cardiovascular, digestive, and urogenital systems in a hospital. .				
Learning Objectives to be achieved			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul style="list-style-type: none"> • Explain the principal components of assessment of respiratory, cardiovascular, digestive, urogenital systems • Discuss the mechanism of wounds • Classify wounds • Discuss aseptic wound care • Explain the mechanism of bedsores 	<ul style="list-style-type: none"> • Perform health assessment of respiratory system • Perform health assessment of cardiovascular system • Perform health assessment of digestive system • Perform health assessment of urogenital system • Perform wound cleaning and dressing 	<ul style="list-style-type: none"> • Demonstrate the importance of health assessment before any nursing intervention • Respect the rights of patient during administration drugs to Clients with respiratory, cardiovascular, digestive, urogenital medical conditions • Show empathy towards patients with wound and other medical surgical conditions 	<ul style="list-style-type: none"> • Health assessment of respiratory, cardiovascular, digestive, urogenital systems • Drug administration: antibiotics, NSAIDs, antihypertensive, and drugs acting on digestive system • Wound care (wound cleaning and dressing, bed sore care) • Elimination (enema, placement of bed pan and urinal) 	<ul style="list-style-type: none"> • Using real case study, perform a nursing assessment of respiratory, cardiovascular, digestive and urogenital systems and document appropriately the findings. • Using a case study, discuss on the appropriateness of prescribed antibiotics, NSAIDs, antihypertensive and drugs affecting digestive system

<ul style="list-style-type: none"> • Explain the elimination methods of patients who is critically ill • Identify the causes of stomy creation • Differentiate the different bandaging techniques • Explain the stages of counselling process • Discuss the implications of professional and bad nursing practice • Administer medication by oral, subcutaneous, intramuscular , Intradermal (ID) intravenous(IV)route. 	<ul style="list-style-type: none"> • Apply guidance and counselling techniques to assist individuals, group, 	<ul style="list-style-type: none"> • Demonstrate the importance of assisting critically ill patients in elimination • Appreciate the importance of proper bandaging techniques for patient care • Demonstrate counselling skills for patient,with different medical surgical conditions • Demonstrate therapeutic communication skills during client-nurse relationship • Respect clients 'rights, privacy and confidentiality during clinical practice • Recognize the legal responsibilities in nursing profession 	<ul style="list-style-type: none"> • Care of stomies (gastrostomy, ileostomy, colostomy) • Bandaging techniques • Counselling • Ethical principles in nursing. 	<ul style="list-style-type: none"> • On real patient, perform wound cleaning, and aseptic wound dressing • On real client, perform bandaging technique correctly.
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Links to other subjects: Fundamentals of Nursing, Pharmacology, and Ethics and professional code of conduct, surgical pathology, medical Pathology

Assessment criteria: Learners provide appropriate basic nursing care related to integumentary, musculoskeletal, respiratory, cardiovascular, digestive, and urogenital body systems

Materials: Client assessment tool, computer and video CD, Client file, health assessment materials (thermometer, stethoscope, sphygmomanometers, blood pressure machine, weighing scale, pulse oximeter machine, watch, pain scale, tape measure, MUAC tape), tray, trolley, disinfectant, white coat (clinical uniform), gloves, linens, beds, safety boxes, drugs, mannequins, kits for wound care, sterile drapes, to name.

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: FUNDAMENTAL OF NURSING CLINICAL	
S5	UNIT 2: FUNDAMENTAL OF NURSING CLINICAL 3		NUMBER OF PERIODS: 300	
Key Unity Competency: Learner will be able to provide first aid care in emergency situations				
Learning Objectives to be achieved in a health centre				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul style="list-style-type: none"> • Explain ABCD approach used in first aid • Discuss the proper techniques of victim evacuation 	<ul style="list-style-type: none"> • Apply correctly and appropriately ABCDE approach in emergency situations 	<ul style="list-style-type: none"> • Timely initiate first aid interventions 	<ul style="list-style-type: none"> • First aid techniques • Basic rescue Victim's evacuation techniques: <ul style="list-style-type: none"> – Ankle pulls 	<ul style="list-style-type: none"> • On real patient who is in emergency situation, perform health assessment using ABCDE approach

<ul style="list-style-type: none"> • Describe the technique of rapid tests for common conditions 	<ul style="list-style-type: none"> • Perform victim's evacuation techniques • Carryout rapid laboratory investigations. • Apply first aid techniques in case of burns, drowning, Chocking, Cardio respiratory distress, Fractures, Hemorrhages, Loss of consciousness, Snake bites and Epilepsy 	<ul style="list-style-type: none"> • Collaborate with other stakeholders including healthcare providers, ambulance personnel and police personnel for providing early first aid interventions • Demonstrate understanding of first aid concepts during emergency situation • Advocate for laboratory investigations for medical diagnosis. 	<ul style="list-style-type: none"> - Shoulder pull - One-person lift - Pack-strap carry - Two-person arm carry - Two-person carry by arms and legs - Chair carry - Improvised stretcher - Fireman's carry - Blanket drag <p>Laboratory investigations</p> <ul style="list-style-type: none"> - Rapid Test Diagnosis for Malaria (RTDs) - Glycemia test - Urine test (Glucose, Albumine). 	<ul style="list-style-type: none"> • During clinical placement, discuss a technique of shoulder pull • On real clients, carry out and interpret rapid test diagnosis for malaria, glycaemia, and urine tests.
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Links to other subjects: Fundamentals of Nursing, Pharmacology, Ethics d and professional code of conduct, surgical pathology and Medical Pathology

Assessment criteria: Learners can provide correctly and timely first aid care in emergency situations

Materials: Client assessment tool, computer and video CD, Client file, health assessment materials (thermometer, stethoscope, sphygmomanometers, blood pressure machine, weighing scale, pulse oximeter machine, watch, pain scale, tape measure, MUAC tape), tray, trolley, disinfectant, white coat (clinical uniform), rapid diagnostic tests, to name.

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: MATERNAL AND CHILD HEALTH CLINICAL 2	
S5	UNIT 4: MATERNAL AND CHILD HEALTH CLINICAL 2			NUMBER OF PERIODS: 60
Key Unity Competency: Learner will be able to provide maternal and newborn care during postnatal period in a health centre and hospital.				
Learning Objectives to be achieved				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul style="list-style-type: none"> Describe the routine postpartum assessment Identify the main danger signs for the mother during the postnatal period Explain danger signs of a newborn Identify newborn at high risk. 	<ul style="list-style-type: none"> Perform the rapid Initial Assessment of a mother during postnatal period Perform postpartum breast assessment Perform postpartum uterus assessment Perform postpartum bladder and bowel assessment Assess the characteristics of lochia Assess the mother with episiotomy in post partum period Assess the mother for emotional status Provide care to the mother during postnatal period Perform newborn assessment. during post -partum period 	<ul style="list-style-type: none"> Value the postpartum assessment in client care Respect the postnatal follow up national guidelines Collaboration with other healthcare professional for preventing maternal and newborn morbidity and mortality Recognize the main danger signs for the mother during the postnatal period Recognize neonatal danger signs. 	<ul style="list-style-type: none"> Care of the newborn during the post partum period Postnatal care for both mother and child 	<ul style="list-style-type: none"> Using a real clinical case, provide appropriate newborn care in post -partum period On real client, perform postnatal assessment and intervene accordingly.

Links to other subjects: Maternal and Child Health, Fundamentals of Nursing, and Ethics and professional code of conduct.

Assessment criteria: Learners can provide appropriate maternal and newborn postnatal care for promoting maternal and child health.

Materials: Client assessment tool, computer and video CD, Client file; Physical examination materials (thermometer, medical stethoscope, blood pressure machine, weighing scale, pulse oximeter machine, watch, tape measure, MUAC tape), fetoscope, EDD wheel, tetracycline ointment, oxytocin, syringes, trolley, drapes, disinfectant, swabs, safety boxes, dust bins, weighing scale for babies, to name.

3.4. Clinical placement S6

3.4.1. Key Competences at the end of S6

At the end of S6, the learner will have achieved the following main competences:

- Provide basic nursing care related to endocrine, neurology systems, sensory organs, and infectious diseases;
- Manage under five childhood illnesses, and provide family planning methods; and
- Participate in community health assessment
- Participate in promotion of human and Child health
- Participate in health promotion
- Participate in diseases prevention

3.4.2. Table units for S6

TOPIC AREA: CLINICAL PLACEMENT			SUB-TOPIC: FUNDAMENTAL OF NURSING CLINICAL 4	
S6	UNIT 1: FUNDAMENTAL OF NURSING CLINICAL 4			NUMBER OF PERIODS:144
Key Unity Competency: Learner will be able to provide basic nursing care related to endocrine,neurology systems, sensory organs, and infectious diseases.				
Learning Objectives to be achieved in a hospital			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul style="list-style-type: none"> • Explain different components of health assessment • Describe different techniques of physical examination • Explain the specific diets for management of the sick patient. 	<ul style="list-style-type: none"> • Collect relevant information of client from different sources • Interpret information collected • Use different techniques to conduct client physical examination • Determine correctly an individual's daily dietary requirements • Develop individualized nutrition plans for clients of all ages and those with special needs, such as children, adolescents, the elderly and pregnant women 	<ul style="list-style-type: none"> • Appreciate the relevant collected information • Promotes healthy diets through ensuring balance of food groups inpatients' diet • Demonstrate effective communication with patients living with HIV/AIDS • Demonstrate empathy and respect of client during the palliative care practice. 	<ul style="list-style-type: none"> • Health assessment of endocrine systems, nervous systems and sensory organs. • Patient feeding • Management of infectious diseases including HIV/AIDS, Malaria, intestinal worms, and fungal infection • Palliative care 	<ul style="list-style-type: none"> • On real patient, perform health assessment and document correctly the findings • On real patient, feed the patient orally or using already inserted nasogastric tube • In clinical placement, discuss how HIV/AIDS is diagnosed and the line of treatment based on national HIV/AIDS treatment guidelines

	<ul style="list-style-type: none"> • Practice oral feeding for patients • Practice feeding for patients with nasogastric tubes • Provide appropriate anti- infective drug for an infectious disease treatment • Utilize National treatment guidelines to manage infectious diseases • Provide basic palliative care in a healthcare setting. 	<ul style="list-style-type: none"> • Educate the individuals and family members about nutritional needs 		<ul style="list-style-type: none"> • In clinical rotation, discuss how malaria is managed according to national malaria treatment guidelines • On real patient with cancer, discuss palliative care of patient with cancer.
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Links to other subjects: Fundamentals of Nursing, Medical Pathology and Surgical Pathology

Assessment criteria: Learner can provide basic nursing care related to endocrine, neurology systems, sensory organs, and infectious diseases.

Materials: equipped hospital

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: COMMUNITY HEALTH PLACEMENT	
S6	UNIT 2: COMMUNITY HEALTH PLACEMENT		NUMBER PERIOD:120	
<p>Key Unity Competency: At the end of Community Health placement the learner will be able to:</p> <ul style="list-style-type: none"> - Participate in community health assessment - Participate in promotion of human and Child health - Participate in health promotion - Participate in diseases prevention 				
Learning Objectives to be achieved				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul style="list-style-type: none"> • Discuss the approach of data collection in the community • Identify the objectives of health education • Describe the process of health education • Identify strategies to be used for behaviour changes for individuals, families, groups and community. 	<ul style="list-style-type: none"> • Perform community assessment • Perform community diagnosis • Plan community interventions • Prepare health education • Provide health education to individual, family, groups and community • Apply psychosocial concepts in interpersonal collaboration and community intervention. 	<ul style="list-style-type: none"> • Collaborate with stakeholders for intervening in the community • Demonstrate understanding of healthcare systems in Rwanda • Demonstrate preparedness and mastery of the topic of health education • Educate individuals, families, groups and community according to their needs • Initiate the behaviour change interventions for individuals, families, groups and communities. 	<ul style="list-style-type: none"> • Community assessment • Health education • Behaviour and communication change • Health promotion. 	<ul style="list-style-type: none"> • By visiting a community, diagnose, and make plan of community intervention accordingly • By visiting community, identify health education need, then prepare an appropriate health education session.

<ul style="list-style-type: none"> • Explain different types of gender-based violence • Describe the main danger signs of the mother during the postnatal period • Describe the main danger signs of the infant during the postnatal period. 	<ul style="list-style-type: none"> • Participate in gender-based violence prevention interventions in community • Provide the gender-based violence prevention health education to community • Utilize the national gender-based violence prevention guidelines in managing the cases of gender-based violence in community • Provide counseling related to reproductive health issues in community. • Follow up both mother and child during postnatal period • Perform the rapid Initial Assessment of a mother during postnatal period • Provide care to the mother during postnatal period • Diagnose for postnatal complications for both mother and child. 	<ul style="list-style-type: none"> • Value the role of gender in health promotion and diseases prevention • Demonstrate the appropriate attitude toward caring the people involved in gender-based violence • Demonstrate professional behavior in managing gender-based violence cases • Recognize the importance of the rapid Initial Assessment of a mother during postnatal period • Recognize neonatal danger signs • Recognize the main danger signs for the mother during the postnatal period. 	<ul style="list-style-type: none"> • Gender based violence • prevention interventions • Community midwifery. 	<ul style="list-style-type: none"> • By visiting a family, identify family with gender based violence and provide counselling to the family • By visiting family with mother in post-natal period, provide health education related to neonatal and postpartum danger signs
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<ul style="list-style-type: none"> • Describe nutritional needs of clients in all lifespan stages. • Discuss the factors that influence eating habits to promote a healthy lifestyle • Discuss the different nutritional disorders and their management. • Explain the specific diets for management of the sick patient. • Explain the principles of palliative care. 	<ul style="list-style-type: none"> • Apply acquired knowledge in promotion of proper nutritional practices in all age groups • Conducts comprehensive assessment of the nutritional status of a client in a culturally sensitive manner • Determine correctly an individual's daily dietary requirements • Develop individualized nutrition plans for clients of all ages and those with special needs, such as children, adolescents, the elderly and pregnant women • Educate the individuals, families and community members about nutritional needs • Practice oral feeding for patients 	<ul style="list-style-type: none"> • Appreciate the importance of different food groups and their role in normal and abnormal functioning of the body • Recognize the nutritional needs for different life stages such as infancy, childhood and pregnancy • Value clients' inputs in conducting a nutritional assessment • Demonstrates sensitivity to clients' diversity, taking into consideration clients' culture, race, age, sexual orientation, gender, beliefs and values 	<ul style="list-style-type: none"> • Human nutrition and dietetics • Environmental sanitation • Palliative care 	<ul style="list-style-type: none"> • In community setting, provide a well-prepared health education about balanced diet • Visit a family with mother in postnatal period and teach her about breastfeeding and infant feeding • By visiting community, identify the problems related to the environment sanitation and propose the solutions of identified problems
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	<ul style="list-style-type: none"> • Practice feeding for patients with nasogastric tubes • Educate individuals, families and communities about how to improve house hygiene and environmental hygiene • Offer psycho spiritual support to the individuals families and community with pain • Use none pharmacological pain management methods to allevate pain • Provide appropriate anti- infective drug for an infectious disease treatment • Utilize National treatment guidelines to manage infectious diseases • Provide basic palliative care in the community.. 	<ul style="list-style-type: none"> • Promote healthy diet through insuring balance of food groups in patients diet. 		<ul style="list-style-type: none"> • By visiting a family with a palliative patient discuss the quality of palliative care the patient recieves in the community,
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Links to other subjects: Fundamentals of Nursing, Ethics and professional code of conduct , maternal and child healthcare

Assessment criteria:

The learner plan for appropriate community interventions after conduct community health assessment

The learner provides appropriate community health interventions for promoting women and child health

The learner can participate in community health interventions for health promotions and diseas prevention

Materials: Books., internet connection, computer, pens, notebooks,papers,vital signs tool, etc

TOPIC AREA: CLINICAL PLACEMENT			SUBTOPIC: MATERNAL AND CHILD HEALTH CLINICAL 3	
S6	UNIT 3: MATERNAL AND CHILD HEALTH CLINICAL 3		NUMBER OF PERIODS: 216	
Key Unity Competency: Learner will be able to manage under five childhood illnesses and provide family planning methods in a health centre				
Learning objectives to be achieved i				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul style="list-style-type: none"> • Define key concepts of family planning • Describe principles of family planning. • Explain the mode of action of natural family planning methods • Describe indications and contraindications of natural family planning methods • Explain the effects of natural family planning methods. 	<ul style="list-style-type: none"> • Provide effectively natural family planning methods • Teach and encourage effectively modern family planning methods uptake • Provide effectively barrier family planning methods • Use appropriate language while providing family planning methods 	<ul style="list-style-type: none"> • Adhere to the principles of family planning • Demonstrate professionalism • Respect rights, privacy and confidentiality when providing family planning methods • Demonstrate professionalism • Appraise the effects of family planning methods. 	<ul style="list-style-type: none"> • Family planning methods • Immunization • Integrated Management of Childhood Illnesses (IMCI) • Child health assessment. 	<ul style="list-style-type: none"> • On real client, administer appropriately the injectable family planning methods • On children, administer all vaccines appropriately according to national expanded program of immunization • In paediatric consultation, manage under five childhood illnesses using IMCI strategy.

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| <ul style="list-style-type: none"> • Demonstrate understanding of IMCI strategy. • Describe the vaccination calendar of expanded program of Immunization. • Discuss the growth development of a child • Explain indications and contraindications of natural family planning methods to individuals • Explain common symptoms of pediatric illnesses | <ul style="list-style-type: none"> • Screen the child growth and development • Administer vaccines according to Expanded Program of Immunization • Identify danger signs of pediatric illnesses • Detect possible danger signs from sick children • Detect possible common symptoms from sick children • Provide an appropriate classification of conditions found on sick children • Provide care to children with common childhood illnesses using IMCI strategy. | | | |
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Links to other subjects: Maternal and Child Health

Assessment criteria: a learner can manage under five childhood illnesses and provide family planning methods

Materials: Equipped health center.

REFERENCES

Gaberson, K. B., & Oermann, M. (2010). Clinical teaching strategies in nursing. Springer publishing company.

Harerimana, A., Mtshali, N. G., Mukamana, D., Kimonyo, J., Kayihura, C. N., & Mugarura, J. (2015). Historical overview of nursing and midwifery education and nursing workforce in Rwanda.

HAMELINE, D., 1983, Les objectifs pédagogiques (4ème édition), Editions ESF, Paris.

Kabgayi School of Nursing and Midwifery. Historic Background Muhanga: Kabgayi School of Nursing; 2013 [cited 2015 28th August]. Available from: <http://www.kasnm.ac.rw/?Historic-Background>

MoE (2021). Rwanda Ministry of Education: Law N° 010/2021 OF 16/02/2021 determining the organisation of education
Rwanda Ministry of Health. National Community Health Strategic Plan July 2013–June 2018.

RWANDA EDUCATION BOARD (REB) 2015, Competence based curriculum, Curriculum framework, pre-primary to upper secondary, Kigali

RWANDA EDUCATION BOARD (REB) 2015, Subject syllabi, Kigali

WHO. 2016. Health workforce requirements for universal health coverage and the Sustainable Development Goals.
Available at <https://apps.who.int/iris/bitstream/handle/10665/250330/9789241511407-?sequence=1>

Yam, B. M. (2004). From vocation to profession: the quest for professionalization of nursing. British Journal of Nursing, 13(16), 978-982.

APPENDICES

Appendix A: WEEKLY TIME ALLOCATION FOR ASSOCIATE NURSING PROGRAM

No	Subjects	Weight	WEEKLY TIME ALLOCATION		
			S4	S5	S6
1	Fundamentals of Nursing *	11	7	7	7
2	Biology*	11	7	7	7
3	Chemistry*	11	7	7	7
4	Mathematics*	5	3	3	3
5	Physics*	10	6	6	6
6	Ethics and professional code of conduct	1	1	1	0
7	Medical Pathology *	2	0	3	1
8	Surgical Pathology *	1	0	1	1
9	Pharmacology *	4	3	2	2
10	Maternal and Child health *	7	4	4	4
11	Individual learning	5	3	1	5
12	Clinical attachment*	13	6	7	10
13	Kinyarwanda	3	2	2	0
14	English*	6	4	4	4
15	French	2	1	1	1
16	Entrepreneurship	2	2	1	0
17	Citizenship	2	2	1	0
18	ICT	2	1	1	1

19	Sports/ Clubs	2	1	1	1
Total periods / week		100	60	60	60
Total number of contact/years			2340	2340	2340
Total number of contact hours/year (39 weeks)			1560	1560	1560

Appendix B: CLINICAL PLACEMENT OVERVIEW

TOPIC AREA	SUBTOPIC	COMPETENCES		
		S4	S5	S6
Clinical Placement	Fundamentals of nursing clinical	<ul style="list-style-type: none"> • Provide basic nursing care with respect of professional ethics and code of conducts. 	<ul style="list-style-type: none"> • Provide basic nursing care related to integumentary, musculoskeletal, respiratory, cardiovascular, digestive and urogenital body systems • Provide first aid care in emergency situations. 	<ul style="list-style-type: none"> • Provide basic nursing care related to endocrine, neurology systems, sensory organs, and infectious diseases.
	Maternal and Child Health ,Clinical Community Health Placement	<ul style="list-style-type: none"> • Provide maternal and newborn care 	<ul style="list-style-type: none"> • Provide maternal and newborn care during postnatal periods. 	<ul style="list-style-type: none"> • Manage under five childhood illnesses, and provide family planning methods. • Participate in community health assessment • Participate in promotion of human and Child health

				<ul style="list-style-type: none">• Participate in health promotion• Participate in diseases prevention
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