Terms of Reference

Consultancy to Review the Uganda Nurses and Midwives Act, 1996

May 2011
Background

The regulation of Nursing and Midwifery practice in Uganda started way back in 1922 when the first Nurses and Midwives regulatory body was established. This was replaced after independence by the Nurses, Midwives and Nursing Assistants Act of 1964. The current legislation, the Uganda Nurses and Midwives Act was enacted in 1996 repealing the Nurses, Midwives and Nursing Assistants Act of 1964. The purpose of the current Act is stated as “to provide for the regulation of training, registration, enrollment and discipline of Nurses and Midwives of all categories and for other matters connected to the professions.”¹ The Act also established the Nurses and Midwives Council (UNMC) as a body corporate with a mandate to protect the public from unsafe nursing and midwifery practices through regulation of the education and practices of nurses and midwives in Uganda.

However recent changes in the socio-economic, technological, and health service delivery environment including globalization have revealed important gaps in the 1996 Act that warrant its review. The International Council of Nurses and the International Confederation of Midwives have separately issued documents to guide countries in developing nursing and midwifery regulations in 1996 and 2011 respectively after the promulgation of the current legislation.²,³ These guidelines recognize that while the primary aim of regulation of the nursing and midwifery professions is to protect the public against harmful nursing and midwifery practices, regulation should also be geared towards developing and mobilizing the fullest potential of the professionals to respond to the needs and priorities of the societies.

Problem Statement

There have been new developments in nursing and midwifery education, practices and policies both locally and internationally. These have come about partly as a result of the changing demands on the health system coupled with challenges in human resources for health and advancement in health knowledge and technologies. New approaches to service delivery, including task shifting/sharing and multi-skilling that have implications on the scope of practice for nurses and midwives, have emerged and need to be taken into account in regulation of the professions. Advances in nursing and midwifery education in Uganda has resulted into the development of other cadres of nurses and midwives such as the Enrolled and Registered Comprehensive nurses on the one hand and others with higher level of specializations and qualifications at Masters and more advanced degrees on the other. Both of these call for redefinition and/or expansion of the scope of practice for nurses and midwives in Uganda. Further more, the representativeness of the current Council in terms of ensuring that the interest of external and internal stakeholders is addressed has come to be questioned in some circles. For example, with increasing adoption of Human Rights Based programming that requires that right holders are empowered to demand for their rights and duty bearers obligated to ensure that these rights are protected and enjoyed, regulatory bodies (whose primary function is to serve the public interest) must adopt processes that effectively involve the public and ensure their needs are adequately addressed. Internally nurses and midwives and the different specialties need to be adequately represented within the Council. Finally, there is need to align the current legislation with international standards as guided by the International Council of Nurses and the International Confederation of Midwives so as to ensure that Uganda’s nurses and midwives measure favorably to their peers in the region and beyond.

Purpose of the Consultancy

The Uganda Nurses and Midwives Council with support from the UNFPA/ICM Investing in Midwives Program is seeking the services of a team of two consultants to review the Uganda Nurses and Midwives Act of 1996 with

a view of identifying gaps and proposing changes that will align it with current health service demands of Uganda, taking cognizance of current practices, new knowledge, and international standards. The goal is to have a Nursing and Midwifery bill that provides for a modern, efficient, transparent and accountable system for the regulation of nurses and midwives in Uganda that is well aligned with the needs of the country.

Objectives of the Consultancy

- To review the Uganda Nurses and Midwives Act 1996 and align it with current knowledge, practice, policies and international standards.
- To develop a draft amendment bill for the Uganda Nurses and Midwives Act, 1996 ready for submission by UNMC to the Minister of Health for Parliamentary approval.

Scope of work:

1. Conduct desk review of relevant documents including laws, statutes, policies etc on nursing and midwifery regulation to inform the work.
2. Conduct one on one and group interviews with key stakeholders including but not limited to the following:
   a. Professional nurses and midwives at various levels (practicing/ non-practicing, at policy making positions, administrative positions, and education).
   b. Officials from Ministry of Health (Nursing Department, Human Resources Management and Human Resources Development, RH & CH Divisions, Department of Curative and Clinical Services); Ministry of Education and Sports; and Ministry of Public Service.
   c. Representatives of other health professional regulatory bodies – Uganda Medical and Dental Practitioners Council, the Allied Health Professionals Council, the Pharmacy Council.
   d. Health Professional Associations – Uganda Medical Association, Uganda Nurses and Midwives Union, Uganda Private Midwives Association, Association of Obstetricians and Gynecologists of Uganda, etc.
   e. Health Training Institutions, both Public and Private.
   f. Health Service and Health Facility Managers and Administrators (both Public and Private) – District Health Officers, Medical Superintendents and Directors, Hospital Administrators.
   g. Relevant CSOs, Women Groups, Parliamentarians.
   h. Development partners, WHO, UNFPA, SIDA, UNFPA, UNICEF, ILO, EU, ICM, ICN HDP etc.
3. Review the gaps identified by stakeholders based on needs assessment reports, evaluations and relevant local and international literature (protocols, guidelines and policy directions) as well as information from the UNMC Board.
4. Facilitate a workshop involving key players to clarify on the key policy issues and identify and discuss those to be addressed in legislation.
5. Work closely with the review committee to revise the Act based on gaps identified, expectations from Government, CSOs, Private Sector Providers/Employers, PNFP, other health professionals, the nursing and midwifery professions and development partners (WHO, ICM, UNFPA, UNICEF, ILO and EU)
6. Draft a proposed amendment bill based on the information gathered and present to the review committee for their in put.
7. Organize and facilitate a validation meeting with stakeholders as enumerated above to review the proposed draft amendment bill to clarify on any issues arising including any new information for discussion and build consensus
8. Finalize the draft amendment bill for UNMC review and approval.
Outputs/ deliverables:

- Inception report detailing the proposed approach to the work, time-lines and budget
- Two Workshop reports (1) summarizing agreed issues to be taken up in the process and 2) consensus building workshop
- Submit a final draft bill ready for presentation to Parliament to Ministry of Health (UNMC)

Period of Work

The period of consultancy is expected to last not more than 30 working days from the time the funds are released as follows:

- Preparation for work: 2 days
- Consultation Meeting (s) and review of literature: 10 days
- Workshop on Policy Clarifications and Legislation required: 2 days
- Ongoing consultation with UNMC, MOH and Parliament: 10 days
- Workshop on validation and consensus building: 1 day
- Finalization based on comments from stakeholders and Parliament: 5 days
- TOTAL: 30 days

Reporting Arrangement

1. The consultant(s) will work directly with UNFPA for administrative and management of the contract
2. For substantive and technical issues the consultant will report to the Chair of the Review committee that will be established for the purpose of the review.
3. The committee will comprise of representatives from MOH, MOE, UNMC, Health Training Institutions, Uganda Medical and Dental Practitioners Council, Nursing and Midwifery Professional Associations.
4. The consultant will submit a 1st draft document by end of July 2011 for review and to finalize the report based on comments received by September. Upon completion of assignment, the consultant will submit the final report (electronic and hard copy) to the office of the UNMC for approval.

Consultants’ qualification

The Team of the two Consultants should between them have the following qualifications and experience

- Minimum Masters Degree in Law
- Minimum Masters Degree in Public Health, Nursing or Midwifery
- Proven experience in policy development, policy analysis and legislative drafting
- Understanding of health related laws, policies, guidelines, codes of conduct and professional ethics
- Demonstrated competences on working on issues of health and human rights
- Knowledge of functioning of health regulatory bodies
- Proven up-to-date knowledge about Ugandan situation or similar African country in terms of pre-service nursing and midwifery education and regulatory procedures
- Understanding of the Uganda health systems particularly Human Resources for Health issues
- Experience of clinical care standards of nursing and midwifery practice

Application

Qualified persons should apply as a team of two consultants who together demonstrate the above combined qualifications and experiences.