



Certificate Course in
Professional Midwifery Practice Series
Series 2 Promoting Normal Birth
(Series 1 to be announced soon)

*(which is equivalent to Part 2 of OBSC5008 in
MSc in Obstetric and Midwifery Care)*

Date: 20 Nov – 23 Nov 2018

Allan Chang Seminar Room, 1/F, Blk E, Prince of Wales Hospital, Shatin &
Rm303, 3/F, Li Ka Shing Institute of Health Sciences,
Prince of Wales Hospital, Shatin

Organiser

Department of Obstetrics and Gynaecology, CUHK

Objectives

- ✓ To analyse current evidence and support midwives to develop and enhance practice
- ✓ To empower midwives to promote normal birth

Our Overseas Teaching Panel



Prof. Caroline Homer
RM, PhD
Professor of Midwifery
Centre for Midwifery
Child and Family Health
Faculty of Health
University of Technology Sydney



Prof. Soo Downe
BA(hons), RM, MSc, PhD
Professor in Midwifery Studies
School of Community Health and Midwifery
University of Central Lancashire

After completing of this course, students are expected to

- ✓ Explore validity of a new way of seeing birth, based on theories of salutogenesis and complexity
- ✓ Have an overview in delivering midwifery care in a low technology setting
- ✓ Analyse of the barriers and promoters of normality in local setting and practice
- ✓ Understand the WHO recommendations on Intrapartum Care for a positive childbirth experience

The course OBSC5008 of MSc in Obstetric and Midwifery Care can be exempted with the Certificate of Completion of Series 1 AND Series 2.

Entry Requirement

Applicants should possess a BSc degree or relevant diploma.

Target Participants

Midwives or nurses, who are caring pregnant women and infants in both out-patient and in-patient setting.

Course Design

The course is delivered through lectures and interactive case discussion with 24 teaching hours (for Series 2).

Language English

Application Deadline **20 Oct 2018**

Registration and Enquiry

Ms Clara Lau

Tel: 852-3505 1535 / Fax: 852-2636 0008

Email: clarayyl@cuhk.edu.hk

Series 2a: Course on Promoting Normal Birth – Normal Birth Workshop (NO assessment)

Objectives:

1. Explore validity of a new way of seeing birth, based on theories of salutogenesis and complexity
2. Have an overview in delivering midwifery care in a low technology setting
3. Analyse of the barriers and promoters of normality in local setting and practice

Course Schedule

Date	Time	Venue
20-Nov-2018	Tue	09:00-16:30 LiHS

LiHS: Room 303, 3/F, Li Ka Shing Medical Sciences Building (LiHS), PWH

Duration: Total 6 hours

Tuition Fee: HK\$2,310

Certificate Granted: Certificate of Attendance

Accreditation: 6 PEM and 6 CNE points accredited by Dept of O&G, CUHK

Series 2b: Course on Normal Birth Physiological Process and Psychological Impact in Women (WITH assessment)

Course Schedule

Date	Time	Venue
20-Nov-2018	Tue	09:00-16:30 LiHS
21-Nov-2018	Wed	09:00-16:30 LiHS
22-Nov-2018	Thu	09:00-16:30 LiHS
23-Nov-2018	Fri	09:00-16:30 LiHS

LiHS: Room 301, 3/F, Li Ka Shing Medical Sciences Building (LiHS), PWH

Duration: Total 24 hours

Tuition Fee: HK\$9,240

Assessment: 3000 words assignment with deadline in Dec 2018

Graduation Requirement

Students must fulfill all of the following criteria to be granted a

Certificate of Completion

- ✓ An overall attendance rate of 80% of lectures
- ✓ A pass on the assignment

Certificate of Attendance

- ✓ An overall attendance rate of 80% of lectures but not pass the assignment

Accreditation: 24 PEM and 24 CNE points accredited by Dept of O&G, CUHK

Reply Slip

Please indicate your option below and return the reply slip with your particular to us.

Series	Tuition Fee (HK\$)	Your Choice (please <input checked="" type="checkbox"/>)
Series 2a	2,310	
Series 2b	9,240	

Personal information

Title:	Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/>
Name:	(Eng) (Chinese)
Sex:	M <input type="checkbox"/> F <input type="checkbox"/>
Hospital / Organization:	
Department:	
Address:	
Tel:	
Fax:	
Email:	

Payment Method

Tuition fee _____

By Cheque (Payable to **The Chinese University of Hong Kong**)

Cheque no.: _____ Bank Name: _____

By Credit Card (in Hong Kong Dollars only)

Visa MasterCard

Card holder's name (Block letter): _____

Signature: _____ Date: _____

Credit Card Number _____ Expiry Date(mm/yy)

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**Please return this reply slip to Ms Clara Lau via email (clarayyl@cuhk.edu.hk), fax (2636 0008) or by post (Department of Obstetrics and Gynaecology, Block 1E, Prince of Wales Hospital, 32 Ngan Shing Street, Shatin, (Attn: Ms Clara Lau).