MEDICAL BOARD OF CALIFORNIA
Licensing Program

Midwifery Advisory Council
Lake Tahoe Room
2005 Evergreen Street, Suite 1200
Sacramento, CA 95815

April 2, 2009

MINUTES

Agenda Item 1  Call to Order/Roll Call

The Midwifery Advisory Council (MAC) of the Medical Board of California was called to
order by Chair Faith Gibson at 1:17 p.m. A quorum was present and due notice was mailed to
all interested parties.

Members Present:
Faith Gibson, L.M., Chair
Ruth Haskins, M.D., Vice Chair
Barbara Yaroslavsky
Karen Ehrlich, L.M.

Members Absent:
Carrie Sparrevoehn, L.M.
Guillermo Valenzuela, M.D.

Staff Present:
Anita Scuri, Supervising Senior Counsel, Department of Consumer Affairs (DCA)
Billie Baldo, Management Services Technician, Licensing Operations
Deborah Pellegrini, Chief, Licensing Program
Frank Valine, Staff Services Manager I, Licensing Operations
Kimberly Kirchmeyer, Deputy Director, Medical Board of California
Kurt Heppler, Legal Counsel, DCA
Ramona Carrasco, Staff Services Analyst, Central Complaint Unit
Robin Jones, Associate Analyst, Licensing Operations
Ross Locke, Business Services Analyst, Business Services Office
Susan Cady, Staff Services Manager II, Enforcement Program
Teena Arneson, Staff Services Manager I, Central Complaint Unit
Members of the Audience:
Alison Price, L.M.
Amir Refah
Andrea Ferroni, L.M.
Mitra Hatefi
Tonya Brooks, L.M.
Tosi Manceline, L.M.

Agenda Item 2 Approval of Minutes of the January 15, 2009 Meeting

It was M/S/C (Ehrlich/Yaroslavsky) to approve the minutes from the January 15, 2009 meeting.

Agenda Item 3 Licensed Midwife Annual Report

A. 2009 Report – Recommendations for Change

Dr. Haskins reviewed the changes on the Midwife Annual Report Survey by section and edits and revisions were noted and discussed by those in attendance. Further comments and changes were discussed and approved at the meeting. The final document will be distributed at the next meeting.

It was M/S/C (Yaroslavsky/Ehrlich) to make the suggested changes to 2009 Survey.

B. Timeframe to Implement Changes

Ms. Pellegrini advised the members that changes may be made to the survey and instructions until the next meeting in June. She suggested having midwives not involved in developing the survey test the forms to determine if the survey and instructions are user friendly. The Medical Board will send notification to the licensed midwives advising them the survey and instructions were modified for clarity and add a disclaimer informing the midwives the survey questions are based on legislative requirements.

It was M/S/C (Yaroslavsky/Ehrlich) to approve the implemented timeline of the Annual Midwife Survey with amendments.

Agenda Item 4 Parameters for an Educational Program that Would Provide Remedial Training as a Term and Condition of Probation in Quality of Care Case

Ms. Gibson, Chair, referred the members to the Physician Assessment and Clinical Evaluation (PACE) Program insert in the packet. Tonya Brooks, L.M., stated she did not think the PACE Program was appropriate. She suggested contacting midwifery schools, with a challenge process, and have midwives pay for remedial training. If the offenses or mishandling of the patient were significant enough where the midwife needed to be supervised by another licensed midwife, define
requirements for the experience level of the supervising midwife. Karen Ehrlich, L.M., suggested having two midwifery schools involved in the program.

Ms. Gibson reported that the Board contacted the National College in New Mexico and currently has their curriculum. Rather than the midwife going through the entire curriculum the specific category of quality of care would be identified, the midwife would complete that portion of the curriculum. The midwife would then take a skills exam similar to the expert review process.

Robin Jones spoke with staff at the Board of Registered Nurses (BRN) who administers the disciplinary process for certified nurse midwives (CNM). There are four programs that they refer their CNMs to if there is an educational component required as part of the discipline. The BRN website identifies their criteria.

The programs are at: California State University, San Diego; California State University, Fullerton; and University of California, San Francisco (UCSF). UCSF has two programs, one at the University and the other at the hospital.

Anita Scuti, DCA, referred the Council to the current terms of conditions of probation that are used for physicians when there is a quality of care issue. For matters that are not as serious, there is an education course identified in the area of the persons deficiency. Ms. Scuti suggested the Council look at what would be appropriate for a clinical training program and see if any of the institutions can provide the necessary training.

Ms. Gibson suggested developing a task force or a round table discussion to develop a remedial training plan. Ms. Yaroslavsky suggested that the task force develop a format with clearly defined outcomes targeted at licensed midwives in need of remediation. In addition, the task force would specify where the midwives can receive educational assistance that will meet the terms and conditions, as outlined by the Medical Board’s enforcement program, and also verify that they have successfully been remediated. Members of the task force will contact staff to provide a list of materials needed for the meeting. New York, Washington, New Mexico, Florida, Utah, Texas, and Maine Boards have remediation and retraining programs equivalent to CNM’s. Robin Jones will obtain ideas from the individual schools, other states, and other Boards on their remediation programs. The task force will consist of Dr. Haskins, Ms. Gibson, and Ms. Ehrlich.

It was M/S/C (Ehrlich/Yaroslavsky) to have the task force evaluate the CNM programs that provide training in California discipline cases and similar programs for direct entry midwives in other states, including the terms of probation and the programs used by those other states in a quality of care midwifery case.

**Agenda Item 5  Discussion of SB 1950 and Physician Supervision of Licensed Midwives**

Ms. Pellegrini presented a chart to the Council on the history of SB 1950 and physician supervision of licensed midwives reviewed. The Office of Administrative Law in September 1997 rejected the
submitted language because the Board did not have the proper authority to enforce it. In 2002 with the passage of SB 1950 and Business and Professions Code 2507(f) regulations were needed for standards of care and level of supervision for midwives. In November 2004, the physician supervision portion of the legislation was bifurcated from the standards of care.

The physician supervision regulations were tabled. Ms. Ehrlich has not been successful in trying to find a legislative sponsor because midwives are functioning well and most women have access to midwives. Once the 2009 midwifery survey is completed, regulations concerning physician supervision should follow.

The Council asked MBC enforcement staff to compile a list of disciplinary cases wherein physician supervision was considered as part of the Board’s decision to take disciplinary action.

It was M/S/C (Ehrlich/Yaroslavsky) to ask the enforcement program to provide a report as to what the terms have been on any disciplinary actions taken against a midwife’s license since implementation.

**Agenda Item 6  Future Council Meeting Dates for 2009**

June 17, 2009 1:00-4:00 – due to potential meeting conflicts, the meeting may be rescheduled October 8, 2009 1:00-4:00

**Agenda Item 7  Agenda Items for Next Meeting**

None

**Agenda Item 8  Public Comment on Items Not on the Agenda**

None

**Agenda Item 9  Adjournment**

The meeting adjourned at 3:55 p.m.