

MEDICAL BOARD OF CALIFORNIA

DATE REPORT ISSUED: October 10, 2016
ATTENTION: Medical Board of California, Members
SUBJECT: Midwifery Advisory Council (MAC) Chair Report
CONTACT: Carrie Sparrevohn, L.M., Chair

REQUESTED ACTION:

Approval of the following agenda items is requested for the next MAC meeting:

- Task Force Update:
 - Update on Revisions to Licensed Midwife Annual Report (LMAR)
- Update on continuing regulatory efforts required by Assembly Bill (AB) 1308
- Update on Hospital Transfer Form
- Update on Midwifery Task Force
- Update on midwifery related legislation expected to be introduced or followed next year
- Update on the midwifery program
- Update on progress of midwifery assistant regulations
- Report from California Association of Licensed Midwives on new Quality Care Program
- Discussion and decision on 2017 MAC meeting dates

BACKGROUND:

The last MAC meeting was held on August 18, 2016. At this meeting, the MAC was updated by Staff regarding recommendations for changes to the Licensed Midwife Annual Report (LMAR). This process continues to move forward.

The MAC reviewed applications from a number of licensed midwives for the vacant position on the MAC. The MAC is pleased to recommend Diane Holzer, LM, PaC for this position. Ms. Holzer has worked throughout her career to further the profession of midwifery, in California, the US and globally, and she will be a great asset to the MAC.

Once again, the MAC heard updates on the continuing efforts to craft regulations required by AB 1308 (Bonilla, Chapter 665, Statutes of 2013); specifically language required by Business and Professions Code section 2507(b)(1)(A)(i) and (ii), essentially the development of a list of conditions requiring a referral to a physician for consultation and a determination that the risk factors presented by the woman's disease or condition are not likely to significantly affect the course of pregnancy or childbirth, prior to the midwife continuing care for a particular client. There continues to be disagreement regarding care for women who have had a prior cesarean. In an effort to further this conversation, a task force was formed so that members of the Board could be better informed regarding this discussion.