



MEDICAL BOARD OF CALIFORNIA
Licensing Operations



Midwifery Advisory Council

Lake Tahoe Room
2005 Evergreen Street
Sacramento, CA 95815

August 8, 2013
MINUTES

Agenda Item 1 Call to Order/Roll Call

The Midwifery Advisory Council (MAC) of the Medical Board of California (Board) was called to order by Chair Carrie Sparrevohn at 1:04 p.m. A quorum was present and notice was sent to interested parties.

Members Present:

Carrie Sparrevohn, L.M., Chair
James Byrne, M.D.
Karen Ehrlich, L.M.
Monique Webster

Members Absent:

Barbara Yaroslavsky

Staff Present:

Diane Dobbs, Department of Consumer Affairs, Legal Counsel
David Galbraith, Administrative Assistant
Kurt Heppler, Staff Counsel
Kimberly Kirchmeyer, Interim Executive Director
Natalie Lowe, Licensing Manager
Erin Nelson, Business Services Analyst
Regina Rao, Business Services Analyst
Jennifer Simoes, Chief of Legislation
Kathryn Taylor, Licensing Manager
Cheryl Thompson, Licensing Analyst
See Vang, Business Services Analyst
Kerrie Webb, Legal Counsel
Curtis Worden, Chief of Licensing

Members of the Audience:

Jennifer Brown, L.M.
Yvonne Choong, California Medical Association
Fiaura Conen
Sarah Davis, California Association of Midwives

Rachel Fox-Tierney, L.M.
Joscelyn Grole, California Association of Midwives
Brent Keime, Nizhoni Institute
Brooke Lonegan
Tosi Marceline, L.M.
Laura Nichols, California Association of Midwives
Laura Perez, Sacred Birth Place
Debra Puterbaugh, California Association of Midwives
Constance Rock, L.M., California Association of Midwives
Shannon Smith-Crowley, American Congress of Obstetricians and Gynecologists
Krystel Viehmann, California Association of Midwives
(The above list identifies attendees who signed the meeting sign-in sheet)

Agenda Item 2 Public Comment on Items not on the Agenda
No public comment was provided.

Agenda Item 3 Approval of the Midwifery Advisory Council Meeting Minutes

A. August 30, 2012

Ms. Ehrlich made a motion to accept the August 30, 2012 meeting minutes; s/Webster. Motion carried.

B. March 14, 2013

Ms. Webster made a motion to accept the March 14, 2013 meeting minutes; s/Ehrlich. Motion carried.

Agenda Item 4 Report from the Midwifery Advisory Council Chairperson

Ms. Sparrevohn commended all of the parties who have been working at the legislature to craft language regarding licensed midwives, which will improve the abilities of families in California to access midwifery care. Specifically, she identified the following individuals and organizations; Constance Rock and Sarah Davis, with the California Association of Midwives; Lucia Davis-Rodriguez, Lobbyist; Shannon Smith-Crowley and Laurie Gregg, M.D. with the American Congress of Obstetricians and Gynecologists; Jennifer Simoes with the Medical Board of California; Adeola Adesun with the California Families for Access to Midwives; and Assemblywomen Susan Bonilla.

Ms. Sparrevohn also thanked former MAC member Faith Gibson for her many years of service, not only as a member of the MAC, but to the advancement of midwifery in California and across the United States.

Agenda Item 5 Selection of a New Midwifery Advisory Council Member

Ms. Sparrevohn stated that applications were solicited from all licensed California midwives for a three (3) year term on the MAC. Applications were received from: Sharon Economides, Maria Iorillo, Renne` Wilson, Tosi Marceline, Zhaleh Yadollah, Lori Luyten, Genie DeKruyf, and Katherine McKee.

Ms. Sparrevohn stated that legal counsel had advised that the vacant MAC position must be filled by a licensed midwife and therefore, Katherine McKee, Nurse Midwife, was disqualified from the application process.

Ms. Sparrevohn invited any of the applicants present at the meeting, the opportunity to address the MAC.

Tosi Marceline, being the only applicant present at the meeting addressed the MAC.

Ms. Marceline stated that she has been a licensed midwife for a significant amount of time and has been involved in legislative efforts since the 1970's. She expressed concern that none of her fellow applicants had attended this MAC meeting because they may have been able to provide new ideas to the MAC. However, Ms. Marceline stated that her presence on the MAC would bring a sense of history and continuity, due to her experience as a historian for the California Association of Midwives (CAM).

Ms. Ehrlich asked if Ms. Marceline was aware of the time and travel commitments of being a member of the MAC, and all of the side work that accompanies the position.

Ms. Marceline informed the MAC that she was aware of the commitments involved and that she would be able to devote the necessary time.

Ms. Sparrevohn asked for public comment. No comments were provided.

Ms. Sparrevohn asked the MAC if there were any nominations for the vacant licensed midwife MAC position.

Ms. Ehrlich made a motion to nominate Tosi Marceline, L.M. for the vacant licensed midwife MAC position; s/Webster. Motion carried.

Ms. Sparrevohn invited Ms. Marceline to join the MAC and stated that her application and the MAC's recommendation would be submitted to the full Board in October for approval.

Agenda Item 6 Sunset Review Report Update

Ms. Lowe informed the MAC that Jennifer Simoes, the Chief of Legislation for the Board, was present and would provide the Sunset Review Update.

Ms. Simoes updated the MAC on the Sunset issues related to midwifery and what would be included in the Sunset Bill (SB 304).

Ms. Simoes stated that the Board had made suggestions that the issue of physician supervision and obtaining lab accounts and medical supplies should be addressed through legislation. The Business and Professions Committee (B&P Committee) agreed. Assembly Bill 1308 (AB 1308), would include language to clarify that licensed midwives can obtain lab accounts and medical supplies. The Board currently has support if amended position on the bill with the amendment being for the bill to address the physician supervision issue.

The Board also recommended that the issue of midwife student apprenticeships needs to be clarified in legislation due to confusion in the midwifery community. SB 304 includes language that would define the role of a bona fide student, as an individual who is enrolled and participating in a midwifery education program, or who was enrolled in a program of supervised clinical training as part of the instruction of the three year post-secondary midwifery education program approved by the Board.

The Board recommended that the issue of a midwife assistant, and what they can legally perform, needed to be addressed in legislation. The B&P Committee directed the Board to provide more information regarding the proposal and to address the issue of midwife assistants in legislation. SB 304 does not include language and the Board is still working with the MAC to find a definition.

The Board also suggested that existing law be amended to include Certified Nurse Midwives as being able to supervise midwifery students. SB 304 does not currently include language that would allow a Certified Nurse Midwife to supervise a midwifery student or assistant.

Agenda Item 7 Update and Discussion on Assembly Bill 1308 – Practice of Midwifery

Ms. Simoes provided an update on AB 1308 stating that the bill is currently in the Senate Appropriations Committee and would be heard on August 12, 2013. AB 1308 as originally introduced, would allow midwives to directly obtain supplies, order testing, and receive reports that are necessary for the practice of midwifery, and be consistent with scope of practice for a licensed midwife.

The bill would require the Board to adopt regulations defining the appropriate level of care and supervision, and would also require a licensed midwife to disclose orally and in written form to a prospective client, the specific arrangement for referral to a physician/surgeon should complications arise.

However, this bill was amended in July and will now allow midwives to obtain supplies and devices, and to obtain and administer drugs and diagnostic tests. Amendments would specify that a licensed midwife is not required to identify a specific physician in the arrangement for the referral with complications to a physician/surgeon consultation. The amendments would also allow licensed midwives to be an attendant in an alternative birth center and change the standards of certification that must be met by an alternative birth center to those established by the American Association of Birth Centers (AABC).

Lastly, the author took amendments from the B&P Committee. The amendments were recommended by the committee to delete the requirement in the bill and in the existing law for the Board to develop regulations defining the appropriate standard of care and the level of physician supervision required for the practice of midwifery.

The bill would address one of the barriers of care by allowing a licensed midwife to directly obtain supplies and devices, obtain and administer drugs and diagnostics tests, to order testing and receive reports necessary to the practice of midwifery.

The bill no longer requires the Board to adopt regulations regarding physician supervision; however, the Board still believes that it is essential that this bill addresses the issue. Board staff will continue to work with the author's office and sponsor language that will help to solve the issue of physician supervision and remove barriers to care, while at the same time ensuring that consumers are protected.

Ms. Sparrevohn thanked Ms. Simoes for the update on AB 1308 and asked for public comment.

Constance Rock, President of the CAM, introduced herself and Sarah Davis, Vice President of CAM. Ms. Rock stated that they have been working with Assemblywoman Susan Bonilla and the American Congress of Obstetricians and Gynecologists (ACOG) to draft language for the bill that would remove physician supervision and restrict some types of births that licensed midwives could perform. For instance, normal birth is defined as a singleton vertex between 37-42 weeks with no pre-existing disease or condition that could significantly impact the pregnancy or pregnancy related diseases. Ms. Rock stated that the bill allows for concurrent care for women that are outside of this criteria and provided an example. Midwives can provide care to patients with twin pregnancies but are unable to perform the deliveries.

Ms. Rock also stated that the bill limits physician liability for consultation of patients planning out of hospital births and transfers from out of hospital births. The bill authorizes licensed midwives to directly obtain drugs, devices and testing related to the practice of midwifery.

Ms. Rock asked Sarah Davis to provide specific information pertaining to disclosures. Ms. Davis stated that the bill would require midwives to submit both verbal and written disclosures. The disclosures would define the conditions under which midwives would transfer care to a physician.

Ms. Rock also shared that the bill requires licensed midwives to provide records and give reports to physicians receiving transfers of care. The bill would allow the Board to adjust data elements for annual reporting to be more aligned with the Midwife Alliance of North America (MANA) statistics.

Ms. Sparrevohn asked if there was any input from MAC members.

Ms. Ehrlich asked about the content of the report and where the reports would be sent. Ms. Davis responded that the content of the report would be determined through regulation and that the reports would go to the Board and then be provided to the MAC and Maternal Quality Care Collaborative (MQCC).

Ms. Ehrlich asked if there was any input from the liability insurance industry into limitations for liability for accepting physicians. Ms. Davis responded that Assemblywoman Bonilla was in contact with the liability insurance industry.

Ms. Ehrlich inquired into the non-abandonment clause and how that relates to the requirements for birth being 38-42 weeks. Ms. Rock informed Ms. Ehrlich that the waiver is not included in the bill. Ms. Davis spoke to Ms. Ehrlich's question by stating that the standards of emergency care will still apply.

Ms. Ehrlich inquired into the appropriate time frames involved in referring a patient for care and discharging patients from care. Dr. Bryne stated that under normal conditions a medical provider gives the patient adequate notice while offering the patient a list of alternate providers that they are able to pursue. The patient is given a stipulation to provide emergency sessions for 30 days.

Ms. Ehrlich asked if 30 days was the recommended time. Ms. Kirchmeyer informed Ms. Ehrlich that there were no laws or regulations specific to the amount of time before a care provider can discontinue care for a patient; however, it is dependent upon the standards of practice.

Dr. Bryne commented on the proposed legislation considering the changes to be remarkable. He continued by thanking all of the parties involved in helping effect the change.

Ms. Sparrevohn asked for other comments from the MAC or public.

Ms. Marceline indicated that she had a question concerning the writing of the report that midwives are required to submit to hospitals. Specifically, she wanted to know if the MAC would have input into the content of the report. Her concern was that the report would not represent the views of midwives or parents.

Ms. Davis stated that the intention was that a regulatory body would create the form. However, she would bring this concern to Assemblywomen Bonilla's office indicating that the MAC would like input on the content of the form.

Dr. Bryne mentioned that the form would likely be a checklist that would document data and outcomes, similar to reporting requirements for OSHPD and the Joint Commission. He thought that the form would be non-threatening.

Ms. Sparrevohn pointed out that the form would contain the same elements that are in the LMAR for transfers, that hospitals would have to fill out. She also anticipated that the form would be outlined in regulation.

Agenda Item 8 Program Update

Ms. Lowe provided an update on the Midwifery Program, informing the MAC that the current Midwifery Analyst position for the Board was now vacant and that staff would begin the hiring process to fill the position. Ms. Lowe also updated the MAC on the Department of Consumer Affairs' Licensing system project, BreEZe, stating that Board staff had been working diligently on the Breeze project which is anticipated to go live in mid-September. The new system will allow applicants to apply online, make payments, submit renewal payments, request verification letters, and change an address as well as other miscellaneous transactions. Ms. Lowe encouraged all midwives who would be coming up for renewal during September or October to submit their renewal payments early, as there may be delays in processing once the system went live.

Ms. Lowe also updated the MAC on the Board's subscribers' lists that were available, advising that the Board currently had five different email subscriber lists that licensees and consumers

could subscribe to, in order to obtain information from the Board regarding meeting agenda notices, materials and minutes, newsletters, news releases, and regulation updates.

A. Licensing Statistics

Ms. Lowe provided an overview of the licensing statistics for the third and fourth quarters of fiscal year 2012/2013 for the period of January 1, 2013 through June 30, 2013. During this time frame 11 new applications were received, 14 licenses were issued, and at the end of the fiscal year 297 licenses were in renewed and current status with 24 in delinquent status.

B. 2012 Licensed Midwife Annual Report

Ms. Lowe referred MAC members to the 2012 Licensed Midwife Annual Report (LMAR) which was provided in the meeting packet, and provided a brief summary of the report stating, per the Office of Statewide Health Planning & Development (OSHDP), the agency that compiles the data and provides it to the Board, this year had an 87% submission rate which is the highest yet on record. Upon providing the report to the Board, OSHPD did raise some questions. One of the questions was how OSHPD could get the midwives to submit the results more timely. At the end of March only 194 reports had been submitted which calculates to 62%. The delay in submitting the reports results in additional staff time to send delinquent reminders, and to follow up on a regular basis with OSHPD to compare numbers.

C. Enforcement Statistics Report

Ms. Lowe referred MAC members to the enforcement statistics provided in the meeting packet. During the third and fourth quarters of the fiscal year, 12 new complaints were received against licensed midwives and four against unlicensed midwives; two investigations against licensed midwives were opened; and, there were no referrals for disciplinary or criminal actions.

Agenda Item 9 Agenda Items for the December 5, 2013 Midwifery Advisory Council Meeting – Sacramento

The following agenda items were identified by Ms. Sparrevohn for the December 5, 2013 MAC meeting:

- Midwifery Program Statistics
- Update on Assembly Bill 1308
- Discussion on Licensees in Surrendered Status Returning to Practice
- Licensed Midwife Annual Report (LMAR) Statistical Comparison

Agenda Item 10 Adjournment

Ms. Sparrevohn made a motion to adjourn the meeting. Motion carried.

Adjourned at 2:14 p.m.