

MEDICAL BOARD OF CALIFORNIA

DATE REPORT ISSUED: January 8, 2015
ATTENTION: Board Members
SUBJECT: Midwifery Advisory Council (MAC) Chair Report
CONTACT: Carrie Sparrevohn, L.M., Chair

REQUESTED ACTION:

Approval of the following agenda items are requested for the March 19, 2015 MAC meeting:

- Task Force Update:
 - Licensed Midwife Annual Report (LMAR) Data Collection Tool
- Update on continuing regulatory efforts required by Assembly Bill (AB) 1308
- Update on midwife assistant legislation
- Update on interested parties meeting held December 15, 2014
- Presentation by Diane Holzer on Home Birth Summit recommendations regarding best practices for home to hospital transfer by midwives

BACKGROUND:

The last MAC meeting was held on December 4, 2014. At this meeting, the MAC heard updates on the continuing efforts to craft regulations required by AB 1308 (Bonilla, Chapter 665, Statutes of 2013). The interested parties will continue to meet privately to come to an agreement on 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 prior to the midwife continuing care for a particular client. After the interested parties meeting on December 15, 2014, agreement was reached with only a few minor points of unresolved conflict. It is hoped these issues will be resolved between the parties, namely the California Association of Midwives and the American Congress of Obstetricians and Gynecologists. Discussion surrounding the Hospital Reporting form continues with general agreement as to what the form should contain.

A one page reference document (Attachment A) has been developed that compares Licensed Midwives (LM) with Certified Nurse Midwives (CNM). The chart reflects education and licensing requirements as well as the scope of practice, prescriptive authority, and provides a quick comparison between LMs and CNMs. This document will also be provided to new Board Members in the future.

MAC was advised that discussion surrounding the creation of a pathway for CNM to LM licensure has been aborted, in large part because it appears that CNMs will seek legislation this year to remove physician supervision from their statute on their own.

The Board's recognition of needed language to legitimize midwife assistants and the Board's consideration to move that language forward to the legislature is appreciated by the MAC.



MEDICAL BOARD OF CALIFORNIA Licensing Program



COMPARISON CHART BETWEEN CALIFORNIA LICENSED MIDWIVES and CERTIFIED NURSE MIDWIVES

SCOPE OF PRACTICE and PRESCRIPTIVE AUTHORITY	
Licensed Midwife	Certified Nurse-Midwife
<p><u>Scope of Practice</u> Licensed midwives (LM) provide the necessary supervision, care and advice to women prior to and during pregnancy, labor, postpartum and the inter-conceptional period and care for the well newborn and infant. They provide care as independent care providers and without physician supervision in homes, birth centers, offices, clinics and hospitals. This care includes preventive measures, the detection of abnormal conditions and complications in the mother and child, and the procurement of medical assistance when necessary. They provide emergency care until medical help can be obtained.</p> <p><u>Prescriptive Authority</u> LMs have the authority to directly obtain and administer drugs that are necessary to their practice of midwifery and consistent with their scope of practice. LMs do not administer schedule II controlled substances and do not require “standardized procedures.”</p>	<p><u>Scope of Practice</u> Certified nurse midwives (CNM) provide the necessary supervision, care and advice to women during pregnancy, labor, postpartum and inter-conceptional periods under physician supervision. They conduct deliveries and care for the well newborn and infant. They provide this care in homes, birth centers, offices, clinics and hospitals. This includes preventive measures, the detection of abnormal conditions in mother and child, and procurement of physician assistance and consultation when indicated. They provide emergency care until physician assistance can be obtained. For additional care the CNM utilizes standardized procedures as described in Section 2725 of the Business and Professions Code. (Title 16 California Code of Regulations section 1463)</p> <p><u>Prescriptive Authority</u> CNMs have authority to furnish drugs, including schedule II controlled substances, under “standardized procedures.” CNMs do not have the authority to obtain these medications directly.</p>
EDUCATION and LICENSURE REQUIREMENTS	
Licensed Midwife	Certified Nurse-Midwife
<p><u>Education</u> Education prepares LMs for the management of reproductive health care, pregnancy, birth, and postpartum care of the otherwise well woman and immediate care (up to 6 weeks) of the well, newborn infant.</p> <p><u>Licensure Requirements</u> Graduation from a midwifery school that meets the following criteria: “The midwifery education program shall provide both academic and clinical preparation equivalent, but not identical to that provided in programs accredited by the American College of Nurse Midwives...” [Business & Professions Code (B&P) section 2512.5 (a) (3)] OR “An approved midwifery education program shall offer the opportunity for students to obtain credit by examination for previous midwifery education and clinical experience. ...Beginning January 1, 2015, new licensees shall not substitute clinical experience for formal didactic education.” [B&P section 2513 (a)] AND “...the applicant shall successfully complete a comprehensive licensing examination adopted by the board which is equivalent, but not identical, to the examination given by the American College of Nurse Midwives.” [B&P section 2512.5 (a)(1)]</p>	<p><u>Education</u> Education prepares CNMs for the management of primary care for women throughout the lifespan, including reproductive health care, pregnancy, birth and postpartum care for the otherwise well woman.</p> <p><u>Licensure Requirements</u> The applicant must hold a valid license as a registered nurse in California and be a graduate of an approved nurse-midwifery program. The attainment of clinical skills must meet Core Competencies for Basic Midwifery Education (American College of Nurse-Midwives 2012). All California Nurse-Midwifery education programs approved by the Board of Registered Nursing are Master degree programs within Schools of Nursing. [B&P section 2746]</p>