

Course Title: MOD8-HON390G-Laws & Regulations

Credits: 3.00

Course Description: This course outlines the important questions for students to understand about the legislation and regulations regarding midwifery in their local jurisdiction. These questions are designed as a guide for students to interrogate their own laws and know them intimately. As midwifery laws are created on a state level, there is a wide range in state laws and it is on-going duty of the (student) midwife to stay informed on the legal issues in her state as they are often subject to change.

- Upon Completion of this section, the student must submit a copy of her informed consent form. This must be on file with NCM in order for the student to be eligible to take the NARM Exam and to graduate.

Learning Objectives:

A: Student will be able to answer the Study Questions (below).

B: Student will be able to demonstrate thorough knowledge of the Clinical Skills required for this course (None required for this course).

C: Student will demonstrate thorough knowledge of the MANA Core Competencies for Midwives required for this course (below).

D: Student will be able to demonstrate knowledge of any new information in the area of study.

E. Student will be able to demonstrate her knowledge of the *regulations* governing the practice of midwifery and the current midwifery *guidelines for practice* of the state in which the student is planning to practice and of the state in which she is apprenticing, how these affect her practice, and the differences between the versions for where she is apprenticing and where she plans to practice.

Learning Activities:

I. Student Reads required texts.

II. Student Completes study questions.

III. Preceptor elaborates on study questions.

IV. Clinical Skills and Core Competencies training consists of the following (may take place at clinical visits or at childbirth education classes):

1. Preceptor Explanation of	Safe, evidence-based midwifery care for the individual Clinical Skills and Core Competencies including etiology, sequelae, appropriate management and follow-up for the individual patient, appropriate times and reasons for consult and referral, access to relevant resources and information, complete, thorough and timely record keeping, appropriate, professional, and compassionate management of every task involved, receptiveness and responsiveness to patient's concerns. The Explanation will include a discussion of midwifery decisions and actions as they relate to possible outcomes and their wider impact, based on the Midwives Model of Care®.
2. Preceptor Demonstration of	
3. Student Practice of	
4. Student Demonstration of	

V. Student researches and presents to the preceptor relevant latest developments in academic and clinical midwifery as relevant to the subject.

VI. Student/Preceptor discussion.

VII. Student locates and obtains state midwifery regulations and practice guidelines, reads them, and relates their requirements to the practice of midwifery.

VIII. Student reviews Informed Consent form used by her preceptor's practice and compares it to state regulations and practice guidelines.

Learning Materials / Resources:

(Please use textbooks less than 5 years old, or most recent edition)

1. Jones, Shirley R. The Law and the Midwife. 2nd edition. Wiley-Blackwell. 2003.
2. Dept of Health (for the state in which the student is planning to practice and in the state in which she is apprenticing). *Regulations governing the practice of Midwifery*. Current. Your state. Current.
3. State Midwifery Association (for the state in which the student is planning to practice and in the state in which she is apprenticing). *Current midwifery guidelines for practice*. Current. Your State. Current.
4. NARM Recommendations for Client/Midwife Interactions (Below).
5. NARM Recommendations for the Informed Consent Form (Below).
6. MANA Core Competencies for Midwives.
7. Midwives Model of Care®.
8. Internet links as needed for latest developments in midwifery care:
[The Cochrane Collaboration](#)
[EBSCO](#)
[National Library of Medicine](#)
[PubMed](#)
[Medline](#)
[SCIRUS](#)
[Medscape](#)
[World Health Organization](#)

Evaluation Tools / Methods:

1. Answers to study questions: Student must achieve at least 80% correct to pass. The preceptor evaluates each answer for correctness and explains the questions that were incorrect. This counts for 85% of the final grade.
2. Clinical Skills: None required for this course.
3. MANA Core Competencies: Student's ability to apply MANA Core Competencies for Midwives in discussion to simulated and real-life situations. This counts for 5% of the final grade.

Evaluation of NARM Skills and MANA Core Competencies: The student demonstrates thorough knowledge to the satisfaction of the preceptor in the following areas:

**The student will be able to, in accordance with safe, evidence-based midwifery care, explain the condition, verbalize etiology and sequelae, verbalize appropriate management for the individual patient, follow up appropriately, consult and refer appropriately, access resources and information, accomplish complete, thorough and timely record keeping, appropriately manage every task involved correctly, professionally, and compassionately, while being receptive and responsive to patient's concerns. She/he will be able to explain her decisions and actions as they relate to possible outcomes and their wider impact.*

4. Student presentation of new information in area of study. The preceptor evaluates the correctness of the information presented. This counts for 5% of the grade.
5. a) Student presentation of a summary of the state midwifery regulations and practice guidelines, and b) her review of the informed consent form used by the preceptor's practice (or she may create her own informed consent form that she plans to use in her own practice). The preceptor evaluates thoroughness of student's understanding and ability to relate it to practice and procedures. This counts for 5% of the grade.
6. Student must submit a copy the Informed Consent form to NCM. This does not count toward the grade.

Study Questions

1. Describe the law regarding midwifery in your jurisdiction:
 - a. What is its history?
 - b. Where can it be found?
 - c. What does it authorize?
2. Describe the regulations governing the practice of midwifery in your jurisdiction:
 - a. Whom are they promulgated by?
 - b. Are they mandatory or voluntary?
 - c. What areas of care do they cover?
 - d. What directives are included for consult or referral?
 - e. What procedures do they mandate?
 - f. What is the process for disciplining a practitioner?
 - g. What is the process for educating a practitioner?
 - h. What are the requirements for certification/licensure/registration?
 - i. What are the requirements for continuing education, continuing recertification or licensure?
 - j. What are the requirements for Informed Consent?
 - k. What are the requirements for a midwife's relationship with a physician?
 - l. What body oversees the practice of midwifery? How does it carry out this duty?

Clinical Skills (NARM Skills)

No Clinical Skills Required for this course.

Core Competencies (MANA Core Competencies for Midwives)

II. General Knowledge and Skills

The midwife provides care incorporating certain concepts, skills and knowledge from a variety of health and social sciences including, but not limited to:

- 2 E. Significance of and methods for documentation of care through the childbearing cycle.
- 2 F. Informed decision-making.

VI. Newborn Care

The entry-level midwife provides health care to the newborn during the postpartum period and support and information to parents regarding newborn care. She determines the need for consultation or referral as appropriate. The midwife uses a foundation of knowledge and/or skill which includes the following:

- 6 D. Community standards and state laws regarding indications for, administration of, and the risks and benefits of prophylactic bio-technical treatments and screening tests commonly used during the neonatal period.

VII. Professional, Legal and Other Aspects

The entry-level midwife assumes responsibility for practicing in accord with the principles outlined in this document. The midwife uses a foundation of knowledge and/or skill which includes the following:

- 7 B. The purpose and goal of MANA and local (state or provincial) midwifery association
- 7 C. The principles and practice of data collection as relevant to midwifery care.
- 7 D. Laws governing the practice of midwifery in her local jurisdiction.
- 7 E. Various sites, styles and modes of practice within the larger midwifery community
- 7 F. A basic understanding of maternal/child health care delivery systems in her local jurisdiction.

NARM Recommendations for Informed Consent Form:

The NARM Certified Professional Midwife shall have on file a formal statement of informed consent for each client. An informed consent form should be written in language understandable to the client and there must be a place on the form for the client to attest that she understands the content by signing her full name. The informed consent form may be entitled "Informed Consent," "Informed Choice," "Informed Disclosure" or any similar title but should include, at a minimum, the following:

1. A description of the midwife's education and training in midwifery, continuing education, and Peer Review process;
2. The midwife's experience level in the field of midwifery;
3. The midwife's philosophy of practice;
4. Antepartum, intrapartum and postpartum conditions requiring consultation, transfer of care and transport to a hospital (this would reflect the midwife's written practice guidelines) or availability of the midwife's written guidelines as a separate document, if desired and requested by the client;

5. A medical back-up plan;
6. The services provided to the client by the midwife;
7. The midwife's current legal status and pertinent legal ramifications.
8. Completion of NARM Certification cannot be seen as legal protection because legality is determined by territorial governments; treatments or procedures explained in detail; both the risks and expected benefits described in detail;
9. Discussion of possible alternative procedures and treatments and their risks and benefits;
10. Any procedure required by law that is refused by the client must be written and signed by the client;
11. Availability of a grievance process; and
12. Client and midwife signatures and date of signing.

NARM RECOMMENDATIONS FOR CLIENT/MIDWIFE INTERACTION:

The midwife should protect herself with good documentation at each visit, remembering to make notes in the chart that indicate things taught and agreements made with the client as well as any actions taken for the client along with any treatments or referrals. Each entry should begin with the date and time. Any refusal or non-performance of recommendations made by the midwife should be precisely written in the chart. In such a situation, NARM recommends quoting the client directly using quotation marks and having the client sign the entry. The midwife should initial each entry in the record, use a single line to fill blank spaces, and be sure to sign a full signature at the end of the last entry on each page. The midwife can feel comfortable in the informed consent process because it benefits the client as well as the midwife, and protects both by verifying the contents of the communication.

A well-written informed consent form may not satisfy the client's desire for information. To determine how much information to give a client, the midwife should take her cues from the client herself. Research on informed consent practices indicates that, if a provider answers all the client's questions to her satisfaction, the client is far less likely to feel that she was inadequately informed and far less likely to pursue legal remedies. For midwifery, this simply means that it is best to answer all of your client's questions.