



Standard:	Standards of Practice
Approved By:	CMNL
Date Approved:	November 2019
Date to be Reviewed:	July 2022
Effective Date:	November 2019

STANDARDS OF PRACTICE

Registered Midwives of Newfoundland and Labrador

The College of Midwives of Newfoundland and Labrador (CMNL), in partnership with the Newfoundland and Labrador Council of Health Professionals (NLCHP), ensure Registered Midwives (RM) are registered health care professionals who meet all requirements of registration and licensing, continuing competency, and accountability for safe, ethical midwifery practice. RMs may work in a variety of settings including clinics, hospitals, birth centers and homes, and are committed to providing community based reproductive healthcare, well-client care, primary maternity and newborn care. RMs are required to practice in accordance with the Health Professions Act (2010), Midwives Regulations (2016), and the policies and standards of the CMNL. RMs follow evidence informed maternity care standards and policies of the Regional Health Authorities (RHA).

CMNL adopts the Canadian Association of Midwives' Model of Care Position Statement (September 2015), the Reproductive Healthcare Position Statement (December 2015) and the Position Statement on Home Birth (Revised March 2019).

<https://canadianmidwives.org/wp-content/uploads/2016/06/CAM-MoCPSFINAL-OCT2015-ENG-FINAL.pdf>

<https://canadianmidwives.org/wp-content/uploads/2016/06/CAM-ReproCarePS-eng-Feb2016-FINAL.pdf>

https://canadianmidwives.org/wp-content/uploads/2019/03/CAM_HomeBirthPS_EN_20190328_FINAL.pdf

1. STANDARD

The RM practices as a primary care provider within the scope of midwifery practice.

The RM:

- 1.1 Practices within the midwifery scope of practice and their own level of competence.
- 1.2 Demonstrates the competencies required for the delivery of safe and ethical midwifery care.
- 1.3 Manages care within the scope of midwifery practice without supervision¹.
- 1.4 Is fully responsible and accountable for the care they provide.

¹ Unless conditions on the midwife's registration to practice require supervision.



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2. STANDARD

The RM collaborates with other health professionals in maternity care teams.

The RM:

- 2.1 Recognizes and respects the unique and overlapping scopes of practice of other members of the team.
- 2.2 Establishes collaborative relationships and networks with other health professionals and the community.
- 2.3 Acts as a role model and mentor to midwifery colleagues and other healthcare providers within the team.

3. STANDARD

The RM consults with and/or refers to the most appropriate health professional when the care required by the client is outside of the scope of midwifery practice.

The RM:

- 3.1 Identifies risk factors or health conditions that require consultation with/or referral to a medical practitioner or other health professional, as set out in the NL Midwives Regulations (2016), and CMNL's Indications for Consultation and Transfer of Care (ICTC).
- 3.2 Initiates timely and appropriate consultations or transfer of care to the most appropriate healthcare provider.
- 3.3 Shares records and relevant information with the healthcare provider who is being consulted or who is assuming responsibility for care.
- 3.4 Documents appropriately in the client's health record when a consultation and/or transfer of care has occurred.
- 3.5 May continue to provide midwifery care when collaborating with other health care providers and document clear delineation of responsibility for aspects of care according to the scope and expertise of each provider involved in care.

4. STANDARD

The RM works in partnership with the client to:

- 4.1 Develop a plan for midwifery care together.
- 4.2 Facilitate open and interactive communication.
- 4.3 Share knowledge and relevant information.
- 4.4 Support the client as the primary decision maker in their care.
- 4.5 Involve family according to their wishes.



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4.6 Respect their value system, cultural needs and beliefs.

5. STANDARD

The RM promotes informed choice throughout the childbearing experience.

The RM:

- 5.1 Recognizes the right of each person to be the primary decision maker about their care.
- 5.2 Encourages and enables clients to participate fully in the planning of their own care and the care of their newborns.
- 5.3 Recognizes that informed choice requires cooperative dialogue and encourages shared responsibility between client and RM.
- 5.4 Shares their knowledge and experience, provides information about community standards, and offers evidence-based recommendations.
- 5.5 Encourages clients to actively seek information and ask questions throughout the process of decision-making.
- 5.6 Recognizes and respects that clients will sometimes make choices for themselves and their families that differ from the RM's recommendation and/or community standards. In such circumstances, the RM will continue to provide access to the best possible care.

6. STANDARD

The RM ensures continuity of care throughout the childbearing experience.

The RM:

- 6.1 Provides comprehensive midwifery care during the trimesters of pregnancy and throughout labour, birth, and the postpartum period.
- 6.2 Ensures, within the collaborative team, 24 hour on-call availability to clients'.
- 6.3 Identifies, within the collaborative team, the RM who is responsible for leading and coordinating the client's care.
- 6.4 Makes every effort to ensure that a care provider familiar to the client is available to attend the birth.

7. STANDARD

The RM works with clients to select the optimal setting for birth and respects the client's choice of birthplace.

The RM:

- 7.1 Assesses risk and safety considerations and provides clients with the necessary information to make an informed choice about settings for giving birth.



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7.2 Evaluates and ensures a safe environment for the birth experience.

7.3 Uses safety measures to protect self and colleagues from injury and potentially abusive situations.

8. STANDARD

The RM recognizes the safest care can be provided when there are two qualified persons, skilled in neonatal and maternal emergencies, present at each birth.

The RM:

8.1 Makes every effort to ensure that a second qualified person (health care professional/practitioner, midwife, qualified second birth attendant) who is currently certified in neonatal resuscitation and cardiopulmonary resuscitation assists at every birth, regardless of setting.

8.2 Ensures that the second attendant understands and supports the midwifery model of care.

8.3 Shall inform the client of the requirement for a second attendant to ensure the client's consent.

9. STANDARD

The RM ensures that no action or omission places the client at unnecessary risk.

The RM:

9.1 Uses current knowledge and evidence-informed guidelines to plan and implement midwifery care.

9.2 Conducts ongoing assessments and modifies the plan of care as required.

9.3 Responds promptly and appropriately to emergency situations.

9.4 Maintains appropriate equipment and supplies for out-of-hospital birth.

9.5 Does not abandon care of a client in the course of labour.

9.6 Refers to another appropriate healthcare practitioner when necessary.

9.7 Recognizes and reports errors and takes all necessary actions to prevent and minimize harm arising from an adverse event.

9.8 Takes action in situations where client safety and well-being is potentially or actually compromised.

10. STANDARD

The RM maintains complete and accurate healthcare records.

The RM:

10.1 Uses a documentation system that facilitates accurate communication of information to clients, consultations and institutions.

10.2 Reviews and updates records at each professional contact with the client.



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- 10.3 Ensures prompt documentation of professional actions, decisions and treatments, screening and diagnostic test results, informed choice discussions with the client and consultations with other professionals.
- 10.4 Ensures that records are legible, signed and dated.
- 10.5 Documents errors, incidents and complaints, reports to the appropriate authorities and initiates restorative actions.
- 10.6 Makes every effort to document events contemporaneously and chronologically.

11. STANDARD

The RM ensures confidentiality of client information except in extraordinary circumstances where disclosure is required by law, or where failure to disclose will result in immediate and grave harm to the client.

The RM:

In collaboration with the RHA, establishes procedures and systems for storing, transferring and disposing of client records which protects client confidentiality and personal health information.

12. STANDARD

The RM is accountable to the client, the midwifery profession and the public for safe, competent and ethical care.

The RM:

- 12.1 Responds to and reports situations which may be adverse for clients and/or health care providers, including incompetence, misconduct and or incapacity of midwives and/or health care providers.
- 12.2 Informs the client as to complaint and review procedures established under the NLCHP.
- 12.3 Participates in review processes as required by RHAs, CMNL, and NLCHP.
- 12.4 Participates in risk management and quality assurance programs as required by RHAs, NLCHP, and CMNL.
- 12.5 Strives to maintain their own physical, mental and emotional well-being and safety.

13. STANDARD

The RM maintains competencies relevant to their scope of practice.

The RM:

- 13.1 Engages in continuing education activities appropriate to midwifery practice,



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- including the management of obstetrical emergencies, as required by the CMNL policy.
- 13.2 Documents and keeps records of continuing competency activities to provide to the NLCHP.
 - 13.3 Strives to maintain current knowledge and to appraise research findings relevant to midwifery practice.
 - 13.4 Engages in reflective practice and seeks feedback from clients, peers and practice partners in evaluating their practice.
 - 13.5 Participates in practice reviews as determined by the NLCHP and CMNL to determine areas of improvement and develop learning or action plans.
 - 13.6 Integrates relevant research findings and client or peer evaluation into practice.
 - 13.7 Uses health information systems to support professional practice.

STANDARD 14

The RM shall, in accordance with the midwifery scope of practice, guidelines and policy on *Prescribing and Administering Drugs for Registered Midwives* approved by CMNL:

- 14.1 Prescribe and administer medications.
- 14.2 Prescribe and administer narcotics and sedatives that are controlled drugs within the meaning of the Controlled Drugs and Substances Act (Canada) as determined by the federal Department of Health.

STANDARD 15

The RM shall collect samples and order, perform, and interpret screening and diagnostic tests listed in the CMNL's policy on Guidelines for Screening and Diagnostic Tests.

STANDARD 16

The RM shall perform minor surgical and invasive procedures, including procedures that may be required in an emergency situation.