

Nurse Midwifery Advisory Committee  
Meeting Minutes  
Date: September 7, 2017  
Sheraton Fairplex Hotel & Conference Center  
601 W. McKinley Avenue  
Pomona, California 91768  
(909)622-2220

Attending: Members of NMAC - BJ Snell, PhD, CNM, WHNP, MSN, FACNM; Lin Lee, RN, CNM; Karen Ruby Brown, MSN, CNM; Karen Roslie, CPPM, Public Member; BRN members/staff – Janette Wackerly, RN, BSN, MBA; Betty Woods, RN, FNP, MSN; Trande Phillips, RN  
Absence: Naomi Stotland, MD

Item for Discussion	Discussion	Action
<b>10.0 Call to Order/Roll Call /Establishment of a Quorum</b>	Chair called the meeting to order. Chair shared that materials for meeting are found on the BRN website. Roll call conducted by Chair person. Chair shared that Dr. Stotland was not able to be physically present at the meeting. Chair shared that there was a plan for Dr. Stotland be to available by phone but there were some mechanical difficulties with that so if she was able to she would call in. Chair shared that there were some public members from northern California who wanted to be involved with the committee as well and we will talk about how we might be able to utilize our time a little differently in the future.	If a member is not able to attend the Nurse Midwifery Advisory Committee meeting in the planned physical location, they need to submit the location where they plan to access the meeting electronically and the telephone number at least 15 days before the date of the meeting. Public participants may attend the meeting at any location.
<b>10.01 Vote on Whether to Approve Committee Meeting Minutes: April 5, 2017</b>	Chair reported that the members have been given an opportunity to give input for the April 5 <sup>th</sup> meeting. Chair referred the minutes with edits in red as suggestions made by committee members. Motion made by Karen Roslie to approve minutes with suggested edits. The motion was seconded by Ruby Brown. Call for discussion made. No discussion. All is favor: aye Opposed: none Abstentions: none	No action required
<b>10.1 Items to be Discussed and Considered; Possible Action</b>		
<b>10.1.1. Updates on presentation to Board regarding CNM Scope of Practice</b>	Presentation to the Board is planned for November 9 <sup>th</sup> to allow time for the committee to collect more information.	Tabled until the November meeting

<p><b>10.1.2. Advance Practice Nursing Survey 2017; Status of Survey</b></p>	<p>Julie Campbell-Warnock was lead for the Advanced Practice Nurse Survey 2017 was lead on the survey. As provided in the previous update on April 5, 2017, the BRN has commissioned the University of California San Francisco (UCSF), Center for the Health Professions to complete a survey of California Nurse Practitioners (NPs) and Certified Nurse-Midwives (CNMs). UCSF provided the survey to the selected survey sample of 2,500 NPs and CNMs. The survey data collection closed in early May 2017. Responses were received from a total of 1,616 NPs and CNMs. USCF is analyzing the data. Highlight of the survey will be presented by JoAnne Spetz at the November 9 Board meeting. Chair asked if there would be an opportunity to tease out the midwifery data. Staff shared that Ms. Spetz should be able to do that after the data is reported to the Board.</p>	<p>No action required until after the Board meeting</p>
<p><b>10.1.3. Advance Practice Committee Membership process</b></p>	<p>CNM membership as approved by the Board September 3, 2015. Nurse-Midwifery Committee be composed of  One direct practice nurse-midwife from northern California  One direct practice nurse mid-wife from southern California  One nurse-midwifery educator  One public member who is a consumer of nurse midwifery services; and  One obstetrical practicing with experience working with nurse-midwives- total of five members on the Committee.</p>	<p>No action required</p>
<p><b>10.1.4. CNM Committee Meeting Frequency</b></p>	<p>The board made the following motion on September 3, 2015 that the Nurse-midwifery committee will meet twice a year.</p>	<p>No action required</p>
<p><b>10.1.5. CNM Committee Members' Term of Office</b></p>	<p>Chair and staff discussed term of office configurations including that the Chair has a three-year term and would go to 2018. The other members would extend to 2019. Two members would term out in 2018. Three members would term out in 2019. Chair shared that members have an opportunity to apply for another term. Everybody would go for another two years. The public member and physician are on a two-year cycle.</p>	<p>Committee to send proposal for the alignment of terms to the Practice Committee for the October 4<sup>th</sup> meeting. Report to the Board on November 9<sup>th</sup> for extension and staggering of the terms- Agenda Item Summary</p>

	<p>Committee member shared that terms should be staggered. Karen Ruby-Brown would need to be replaced on the Committee.</p> <p>The committee proposes that the Nurse Midwifery Committee should have membership with staggered terms for two direct practice nurse mid-wives. One direct practice nurse-midwife would be a term of two years and one direct nurse-midwife would be a term of three years. The other three members would have staggered terms of two years.</p> <p>Chair and Committee to request Board to allow extension of the original terms for another two-year term with the exception of the new member coming on board to be a three-year term. The chair will have a three year term.</p> <p>Committee will put together a proposal for the October Nursing Practice Committee. Executive Officer shared that if the committee misses that time then it will need to go to the January committee meeting. November 9 is the committee meeting. Plan is to have the proposal to the practice committee to request an extension and staggering of the terms. In the meantime, applications will be sent out through association to seek a southern practice CNM to replace Karen Ruby-Brown. The chair shared that they propose to have another meeting on November 9<sup>th</sup> so the committee can keep moving with the amount of work that this committee has taken on and the breadth of things being discussed. Committee requests to hold an additional meeting. Staff informed the committee that the request to hold an additional meeting would require Board approval. Staff confirmed that all meetings will start at 1:00pm or after the completion of the Board's agenda so that the committee has time to get to the location. Staff confirmed that the meetings will not start before 1:00pm.</p>	<p>Chair to submit proposal to be presented to the Nursing Practice Committee.</p> <p>Staff to seek approval from the Board for an additional meeting in November</p>
<p><b>10.1.6.</b> The adoption of the Core Competencies for Midwifery Practice and Standards of Midwifery Practice</p>	<p>Chair shared that in California, there are no standard setting documents that outline what the standard of care is for nurse midwifery practice. As the committee moves forward, our scope of practice in the statute is very soft, without specificity such as what is the standard for nurse midwifery practice and the scope of practice for nurse midwives was written, passed in</p>	

1974. Things have changed so what was the understanding of nurse midwifery practice was in 1974 and what the understanding of practice in 2017 is quite different. Chair discussed the opportunity to determine what would be some documents about nurse midwifery so that should there be questions about nurse midwifery practice or education, those documents could be used as things to be looked at for the standards. Chair asked if there are other things to be looked at. Chair shared that there is no definition of nurse midwifery. The best, found by the chair, with the education part and the chair having been in education, there is a delineation of the things that have been taught which outline what a nurse midwife can do and in fact in the most part follow the core competencies that are not identified in writing in California. Committee member asked the chair to provide an example. Example from chair, one thing in the core competencies, there was not a lot about newborn care in 1974 standard for newborn care was that the nurse midwife care for the newborn was one (1) year and now it is twenty-eight (28) days and so having those documents is going to give nurse midwives the currency of practice not just for California but all nurse midwives to practice as certified nurse midwives and to follow those basic core competencies. Chair shared that in addition those documents outline the core competencies of nurse midwifery practice and standards for midwifery are dynamic documents meaning that they are reviewed by practice experts in the field on a periodic basis usually every five (5) years, both are undergoing discussions and revisions now on the national level and therefore would be something that would be looked at overtime to demonstrate how the practice of midwifery and education goes. There are additional documents to be looked at including ethical practice of nurse midwives and the philosophy of nurse midwifery care and many other things could be proposed. Board member asked where the documents come from. Chair shared that the core competencies come from the American College of Nurse Midwives which has been around for years and has undergone many revisions as practice changed. The competencies are foundation for any educational program so that any person graduating as a nurse midwife and nationally certified by the American Midwifery Certifying

Board have met those core competencies to the full extent the midwife can practice. Obviously, the state, having their authority, can constrict that so whatever it feels the standards should be based on the overall competencies for midwifery practice. The standards, once you graduate, the practice that you are in, whether it be a solo practice or whether it be a group practice, or a big practice like Kaiser system, the practice should follow the eight (8) standards and one is very clear is the nurse midwife practices using consultation, collaboration, and referral process so that they are part of the healthcare system not just isolated as we all know it would be lovely to adopt but we know we need legislative action. Core competencies are used by all nurse midwifery programs (confirmed by chair). As a nurse midwife moves into practice, they need to make sure the standards that have been outlined for midwifery practice are met in that practice. When you graduate you are given a certificate that you meet all the core competencies so that if you never do the national certification exam and you have no way of knowing whether that person meets the core competencies. Executive Officer asked if there is an assumption that the curriculum has the core competencies. Chair shared that all American Commission of Midwifery Education accredited programs have the core competencies. The three nurse midwifery programs in California are accredited by American Commission of Midwifery Education. Chair and committee member shared that Nurse midwife may have completed a program outside of California that was not accredited but they could not find employment or be nationally certified.

1. American College of Nurse Midwives (ACNM) national professional association for nurse midwives in the United States.
2. American Midwifery Certification Board (AMCB) national certifying board for nurse midwives
3. American Commission of Midwifery Education (ACME) accrediting body for nurse midwifery education accredited by the Department of Education

All CNM programs in California are in schools of nursing that are CCNE accreditation schools of nursing masters component All programs are CCNE accredited as well as have accreditation by nurse midwifery accrediting bodies.

	<p>Staff shared that there are ways to put the national standards into law. Legal counsel needs to be consulted for regulatory change core competencies and standards of nm practice</p> <p>Process to update practice act what you put into statute</p> <p>Bring state standards into alignment with the national standards.</p> <p>Motion by chair: Advise the Board on the committee's request to adopt the Core Competencies for Midwifery Practice and Standards of Midwifery Practice from the American College of Nurse Midwives as foundational to midwifery practice and education. 2<sup>nd</sup> by Lin Lee</p>	Refer to Legal Counsel for regulatory change and incorporation of documents
10.1.7. Meeting Schedule for 2018	<p>The request by the Chair is to schedule two meetings in 2018 unless there are pressing issues where a third meeting would be requested. Clarification: does the group need to be present at the committee meeting or just the chair? This would be dependent of the committee's business. Suggestion to look at the dates. Committee meeting for 2018: Jan 11. Mar 15, May 10, August 16, October 11. 2018 Board meetings: February 15, April 12, May 10, June 14, September 13, November 15. If we propose, yes all of us can be there for committee meeting. For the committee, we would have one representative at the meeting. Do you want to do Could we propose the committee meeting to be April and September 13 at 1pm or completion of board meeting. Dates will be determined based on location. If members want to call in, notify</p> <p>Dr. Stotland is not available on Thursdays.</p>	
10.2 Adjournment	<p>Meeting adjourned. Meeting readjourned after the following discussion.</p> <p>EO acknowledged work that has been done by the committee. There was discussion about compliance with Bagley-Keene Act. Google docs is not available for document sharing.</p>	Staff to request Legal Counsel to conduct presentation about Bagley-Keene Act
Next meeting	Tentatively scheduled in the LAX area November 9 <sup>th</sup> at 1:00pm (requires Board approval)	

Submitted, Susan C. Engle DNP, PHN, RN

Signature: JANETTE WACKERLY RN SNEC Date: April 26 2017  
 Janette Wackerly