



DECEMBER 2017 REGISTRANT’S HANDBOOK UPDATES

<p><i>CPD Reflective Exercise</i></p>	<p>As per the <i>CPD Scoring Framework</i>, Registrants are required to complete a reflective exercise for each print-based or “flat media” activity, including but not limited to journal articles, webinars, online rounds and podcasts. This reflective exercise worksheet is now ready for use as a fillable PDF. Please note that CMBC is actively working towards an integrated IT solution for tracking CPD events and exercises, and that an announcement regarding the timeline of the CPD cycle will be released in January.</p>
<p><i>Indications for Discussion, Consultation and Transfer of Care</i></p>	<p>Updates to this document include clarification that consultation should be requested for any intrauterine fetal demise and that Registrants with Specialized Practice Certification in STI Management do not need to consult for sexually transmitted infections requiring treatment that are within their scope of practice.</p>
<p><i>Policy on Informed Choice</i></p>	<p>This policy contains substantive updates informed by a literature and jurisdictional review as well as the lived midwifery experience. Your feedback as a Registrant is requested- please follow this link to provide your comments by January 10, 2018 on the new <i>Policy on Informed Choice</i>. Registrant comments and feedback will be considered in the next round of revisions.</p>
<p><i>Policy on Active Practice Requirements for Registrants in their First Two Years of Practice</i></p>	<p>The <i>Requirements for Active Practice</i> was renamed the <i>Policy on Active Practice Requirements for Registrants in their First Two Years of Practice</i>. The policy was updated to remove references to old bylaws and to remove the five year active practice requirement. Key additions include stating the objective of the two-year active practice requirement, clarification of when reporting of active practice numbers must take place, clarification that while completing their two-year active practice requirements registrants are still required to be compliant with CMBC’s QA Program, and next steps once the two-year active practice requirement is met.</p>

<p><i>Policy on Requirements for Active Practice Shortfalls</i></p>	<p>The <i>Requirements for Active Practice Shortfalls</i> was renamed to <i>Policy on Requirements for Active Practice Shortfalls</i>. The policy was updated to remove the five-year active practice requirements, and to clearly outline the process when a registrant does not meet the requirements for active practice. Reference to CMBC's QA Program was also added.</p>
<p><i>Policy on Practice Protocols</i></p>	<p>Two required protocols were added to reflect all required protocols in CMBC documents. These were: Practice protocols around the use of social media in midwifery practice and the use of email, fax and text message with regard to communication with clients and the sharing of client information; and, a protocol for sharing responsibility for confidential and secure record storage and retention. A statement on reviewing practice protocols every three years was added.</p>
<p><i>Policy on Registrants Infected with Blood-borne Pathogens</i></p>	<p>This is a brand new policy created to inform Registrants of their professional obligation to know their serologic status as related to HBV, HCV and/or HIV, and what steps to take to ensure clinical safety. The policy outlines requirements for reporting infectious status, health monitoring requirements, and routine practices and precautions.</p>
<p><i>Quality Assurance Program Framework</i></p>	<p>The <i>Quality Assurance Program Framework</i> has been updated to accommodate new and integrated requirements for currency and competency (current clinical experience, self-assessment and CPD). Changes have been made to set the stage for a multisource feedback process (which will eventually replace the collection of <i>Client Evaluation of Midwifery Care</i> forms) and practice reviews as part of the Quality Assurance Program.</p>
<p><i>Standards, Limits and Conditions for Prescribing, Ordering and Administering Therapeutics.</i></p>	<p>It has come to the attention of CMBC that the <i>Standards, Limits and Conditions for Prescribing, Ordering and Administering Drugs</i> were outdated in terms of some of the information and best practices as related to blood products (including WinRho, HBig, and</p>

	<p>some vaccinations). These have been updated. Additionally, members of the Provincial Transfusion Medicine Advisory Working Group have provided initial feedback as included in the attached Standard, including the suggestion to rename the document to <i>Standards, Limits and Conditions for Prescribing, Ordering and Administering Therapeutics</i> to reflect the fact that blood products are not considered a “drug”, rather, a therapeutic.</p> <p>In addition, the <i>Standard for Ordering Compression Stockings</i> has been integrated with the newly and inclusively named <i>Standards, Limits and Conditions for Prescribing, Ordering and Administering Therapeutics</i>.</p> <p>Finally, the information regarding Vitamin K has been updated with the clarification that intramuscular administration and oral administration are not equally effective and if the IM route is declined, the oral dosing regimen should be recommended. The dosing regimen for oral administration now matches that of the Canadian Pediatric Society.</p>
<p><i>Standards, Limits and Conditions for Ordering and Interpreting Screening and Diagnostic Tests</i></p>	<p><u>Ultrasound</u> The section on ultrasound has been revised for clarity and order. Please note that the Standards of Practice Committee will revise this section again in 2018 to include additional information about additional ultrasounds midwives may order, including pelvic and renal ultrasounds. CMBC is also in process of formally requesting the addition of extremity ultrasound (code 08658) to the list of ultrasounds midwives may order, to allow for midwives to order newborn hip ultrasounds.</p> <p><u>HSV Serology</u> Updates to this section have been made to remove extraneous and outdated information and provide clarification regarding the utility of type-specific serology vs. non-type specific serology.</p>

<p><i>Policy on New Registrant Requirements</i></p>	<p>The title of the policy was changed from the <i>New Registrants Policy</i> to the <i>Policy on New Registrant Requirements</i>. Information regarding the peer case review requirements for new registrants was updated to reflect CMBC Peer Case Review Policy. In addition, a paragraph was added to allow new registrants to meet the CMBC new registrant requirements in another regulated Canadian jurisdiction, as applicable.</p>
<p><i>Policy on Cessation of Practice</i></p>	<p>Formerly the <i>Policy on Changing Registration Status and Resignation</i>. A section was added regarding the process to take place should a registrant pass away and edits were made throughout the document for clarity.</p>
<p><i>Policy on Inter-Provincial Registration Reciprocity</i></p>	<p>References to Agreement on Internal Trade were changed to the Canadian Free Trade Agreement. The document was restructured and edits were made throughout for clarity and to allow non-practising registrants from other regulated Canadian jurisdictions to apply for non-practising registration in BC.</p>
<p><i>Policy on Timeframe for Completion of Application</i></p>	<p>This existing policy has been added to the Registrant's Handbook to inform applicants for midwife registration on the allowable timeframe for completing an application.</p>
<p><i>Policy on Timeframe for Registration for Approved Program Graduates</i></p>	<p>This existing policy has been added to the Registrant's Handbook to inform applicants who are graduates from a CMBC recognized midwifery program on the allowable timeframe for applying for registration and completing the required examinations.</p>