

POLICY ON ACTIVE PRACTICE REQUIREMENTS

Preamble

The objective of active practice requirements is to ensure the initial consolidation, and ongoing currency and competency of midwifery skills.

Definitions

Newly Registered Midwife: Refers to a registrant who is a new graduate of a College of Midwives of BC (CMBC) recognized midwifery education program. This may also refer to a registrant who is newly registered through inter-provincial reciprocity and has not met CMBC's initial active practice requirements within a two-year period in their originating jurisdiction.

Principal Midwife: Means a midwife who takes primary responsibility for and provides midwifery services as the primary care provider during the intrapartum period. Where a midwife is providing direct supervision to a student midwife, a Conditional Registrant, a Conditional (remedial) Registrant or a Conditional (return to practice) Registrant, the midwife can count those births as births attended as principal midwife.

Continuity of Care: Means the provision of midwifery services during the antepartum, intrapartum and postpartum periods, to a client by a registrant or small group of registrants known to the client and includes twenty-four (24) hour on-call availability of care from a midwife known to the client.

Policy

Newly registered midwives shall meet the following initial active practice requirements within their first consecutive two years of practice:

- 1) The provision of midwifery care to at least 40 clients as principal midwife or second birth attendant, twenty of whom the registrant attends as principal midwife and twenty of whom are cared for in accordance with the principles of continuity of care, in British Columbia (BC) or in another jurisdiction in Canada where midwifery is regulated.
- 2) The provision of midwifery care during labour and birth, as principal midwife, for at least ten births occurring in a hospital.
- 3) The provision of midwifery care during labour and birth, as principal midwife, for at least ten births occurring in an out-of-hospital setting^{1,2}.

Registrants will be asked to report their initial active practice requirements after their first two

¹ Where a midwife is working in a rural or remote community where the hospital does not have cesarean section capabilities, the midwife may apply to have births attended in that facility count toward both the hospital and out-of-hospital birth requirements. Documentation of the provision of choice of birth place appropriate to the community (e.g. addressing transport time, resources, etc.) must be provided.

² Of the ten out-of-hospital births required to be attended as principal midwife, the registrant may count up to two transfers of location from out-of-hospital to hospital as required so long as the registrant remained as principal midwife following the transfer or, if care was transferred, continued to provide supportive care.

years of registration. However, they may report their initial active practice numbers to CMBC if they have met the requirements sooner. Should a registrant fail to meet the requirements for initial active practice, they will be required to fulfil a remedial plan set by the Active Practice Panel of the Quality Assurance Committee in accordance with the *Policy on Requirements for Registrants with Initial Active Practice Shortfalls*.

Once initial active practice requirements are satisfied, midwives are required to stay clinically active in the provision of prenatal, intrapartum and postpartum care over a rolling period of three years as part of the current clinical experience requirement of CMBC's Quality Assurance Program (QAP). Midwives who fail to satisfy current clinical experience requirements will be required to develop a remedial practice plan and may be registered as Conditional (return to practice) with imposed practice requirements in accordance with the QAP.