



Midwives' Association of Washington State

MAWS Update: Fall 2012

MAWS 2012: A Fruitful Year

2012 started off well for midwives, families and babies in WA state thanks to the ground work of Cynthia Jaffe, LM (from Whidbey Island) and the MAWS Legislative committee (led by President Audrey Levine) and the efforts of many of you who traveled to Olympia to educate your representatives about the value of House Bill 2186. Now in WA state, Licensed Midwives (LMs) have the ability to direct Registered Nurses. The success of this bill effectively broke down a significant barrier to LMs working in federally qualified health centers and obtaining hospital privileges. LMs can now also hire RNs as birth assistants and work with CNM students without concern. Access to employment in federally qualified health

Access to employment in federally qualified health centers opens up the possibility that LMs could serve a more diverse population in WA

centers opens up the possibility that LMs could serve a more diverse population in WA state since many women of color and migrant workers access prenatal care through these clinics.



Speaker Sheila Capestany (left) and Michelle Sarju (center) of Open Arms chat with special guest Jennie Joseph (right) at the Spring 2012 conference

Contributing to the process of preparing LMs to serve families from a wider array of cultural backgrounds, MAWS organized a spring conference themed *Eliminating Disparities in Maternity Care Together*. MAWS members, students and activists from the larger community

INSIDE

Update on LMs and Hospital Privileges: Barrier Removed with Passage of HB 2186	2
Miles for Midwives 2012	3
“Smooth Transitions” – Improving Hospital Transports	4
FAM Grant Awarded to MAWS to Further Data Collection in WA State	4
A Report on the 2012 Legislative Session	5
Washington Midwives Lead the Way at Historic 2012 CPM Symposium	6
OB COAP report	7

>> continued on next page

seized the opportunity to learn about the successful *JJ Way*® model that has been shown to drastically reduce infant mortality and improve maternal outcomes and satisfaction in high risk women including African American mothers and babies. Participants left inspired and challenged to continue the ongoing and important work of recognizing the ways in which white privilege prevents all mothers and babies from benefiting from the midwifery model of care in ways that we wish all families could. As a small, but significant first step, the Washington Midwifery Foundation (WMF) was launched at the conference. WMF was formed as a non-profit foundation whose work will be to fund projects to grow and bring awareness to midwifery in Washington State. Our first project is the establishment of a scholarship fund for aspiring midwives of color, and over \$6500 was raised as seed money. While the concept was not new, the official launch of the WA Midwifery Foundation Scholarship Fund on the heels of the CPM Symposium held in March could not have been more timely. The clear request for this type of financial support, while also not new, was reiterated at this historic event where national stakeholders in the midwifery movement gathered together to focus on and strategize about the issues facing our profession which most require our shared attention.

Another priority focus for the MAWS board this year has been strategizing about how to improve data collection in our state so that we can demonstrate all of the awesome work that you all are doing out there in the trenches. We are proud to have received grant funding from the Foundation for the Advancement of Midwifery to begin this important work! Our stakeholder meeting held this October was a success and we look forward to our next steps.

Besides all of our new accomplishments, your MAWS board, committees, staff and volunteers have been hard at work maintaining the ongoing work of the organization. From the invaluable work of the Quality Management Committee to the expanding influence of the Smooth Transitions Transport Quality Improvement Project, we're looking ahead to 2013 with even higher hopes. Step forward and offer some of your time to help move this important work forward. In particular, we are looking for a volunteer to organize a continuing education event in eastern WA sponsored by MAWS and we always need more help organizing our twice yearly conferences.

We look forward to seeing you at the upcoming Fall conference and updating you during that time at our Annual Meeting. And as always, we welcome your feedback anytime by phone and email.

Sincerely,

Kristin Effland, LM, CPM

Update on LMs and Hospital Privileges: Barrier Removed with Passage of HB 2186

by Cynthia Jaffe, LM, CPM

As many of you know, I became the second Licensed Midwife (LM) in Washington State to receive hospital privileges. I was credentialed in April, 2011.

The biggest obstacle we faced when I was applying for hospital privileges was the nursing law which mandated who can give an order to an RN or LPN. The laundry list of providers who could direct an RN or LPN was long, but, unfortunately, LMs were not included on that list. This omission meant that the OB who was my sponsor at the hospital, had to leave standing orders for the nursing staff for every single thing I might ask for from a nurse; from taking a pulse to monitoring the baby after delivery. This created a lot of confusion and led to questions of liability and "Who is in charge here?" As a result of this barrier to LMs who might wish to pursue hospital privileges, I decided to try and see about changing the law to include LMs on the list.

To pursue the necessary statute change, I contacted Representative Barbara Bailey who is my state rep and who luckily, is also on the health care committee. I sent her a letter outlining what I wanted to do and she agreed to meet with me. She came to my clinic and we met with the Nurse Manager for Whidbey Family Birthplace. We had a great meeting of the minds and Rep. Bailey agreed to look into sponsoring a bill to amend the nursing law. Next, we hosted a round table discussion with interested parties. The list of participants was amazing! We were represented by MAWS President Audrey Levine, our MAWS lobbyist Amber Ulvenes, Dr. Burnett (my

MILES FOR MIDWIVES 2012

OB sponsor), members of the nursing commission, Chief Medical Officer for WA state Medicaid Dr. Jeff Thompson, and a host of other interested parties. We all had an opportunity to speak, so the round table lasted about an hour. After that, I received word that Rep. Bailey would sponsor the bill we needed! The bill, HB 2186, was passed in record time with no opposition votes! The bill was signed into law on March 2, 2012.

You can read the Press Release about HB 2186 which begins “A bill sponsored by Rep. Barbara Bailey that will remove barriers in the state’s health care system and empower midwives and nurses was signed into law ...” at www.housepublicans.wa.gov/news/health-care/bailey-midwives-bill-signed-into-law/

I am proud to say that the passage of this bill allows Licensed Midwives to directly approach hospitals and seek privileges. You will no longer need an OB to countersign any orders. This means that, operating under the scope of our licenses, we can admit clients, deliver their babies and act as the baby’s care provider. This allows for early release from the hospital, as I have done, as soon as the LM deems the mother and baby stable and all exams have been completed. In cases where a client requests something outside our scope of practice, like an epidural, that becomes either collaborative care with an OB or a transfer of care.

I sincerely hope more LMs will consider opening up dialogues with their local hospitals and seek privileges. In these difficult economic times, the administration knows full well the value of having more women deliver at their facility.

Sunday, October 21st, over 150 moms, dads, babies, children, midwives and midwifery supporters braved the early morning cold to come out for the 3rd Annual Miles for Midwives event jointly-sponsored by MAWS with the Washington Affiliate of the American College of Nurse Midwives (ACNM held two prior to MAWS’ participation). Kathy Carr, CNM and Chair of the Nurse-Midwifery Program at Seattle University greeted participants and spoke of her appreciation of CNMs and LMs working together on this event and the positive relationships LMs and CNMs have here in Washington State.

It was a grand event that included a lollipop run for the children and a 2.5-mile fun walk/run around beautiful Lincoln Park in West Seattle. Miles for Midwives also included exhibitors, ear acupuncture and chair massage and raised over \$5000 for MAWS and ACNM. Look for Miles for Midwives on Facebook for a link to photos of the event (facebook.com/milesformidwives). And think about joining us next fall!



Katherine Camacho Carr, CNM



MAWS member Molly Gray ND/LM with new daughter at Miles for Midwives

“Smooth Transitions” — Improving Hospital Transfers

As you may know, MAWS is an active member of the WA State Perinatal Collaborative, a multi-stakeholder group working to improve maternity care outcomes in WA State. Since 2004, one of the ways that Licensed Midwives have contributed to these efforts is by their participation in The Physician-Midwife (MD-LM) Workgroup. The workgroup, which includes 3 midwives, 3 obstetricians, and a health policy consultant and midwifery consumer, was charged with studying and improving the process of transferring women and their babies from a planned home or birth center location to an acute care hospital when a higher level of care becomes necessary.

The MD-LM group’s latest project, *Smooth Transitions*, is a quality improvement initiative dedicated to improving transfers by facilitating communication between midwives and hospital providers. The *Smooth Transitions* project is a simple approach to a complex issue. It is an example of less is more and can be easily replicated or modified for broad use.

Midwives may demonstrate interest and encourage hospital participation, but project implementation rests upon hospital interest, staff motivation, and formal introduction from the MD-LM team. The basic components of *Smooth Transitions* include:

- A formal introduction to the project from MD-LM Workgroup members
- Hospital development of a Notification Procedure for Transfers from Planned Home and Birth Center Birth.
- Formation of a Planned Out-of-Hospital Birth Perinatal Transfer Committee
- Surveying everyone involved in a transfer: the midwife (referring provider), midwifery client, receiving provider & hospital staff.
- Hospital review of surveys for quality improvement and progress reporting (excluding private health information and transfer details) to the MD-LM Workgroup for use in evaluating areas of success and areas needing improvement.

So far, five hospitals in Washington State have held initial introductory meetings and have agreed to participate and at least one other has expressed interest. Together, these six hospitals account for more than 20% of the deliveries in Washington State.

To learn more about the Smooth Transitions project, visit www.waperinatal.org.

To learn more about the MD-LM Workgroup, visit www.washingtonmidwives.org/about-maws/affiliations.html

FAM Grant Awarded to MAWS to Further Data Collection in Washington State

Washington’s midwives have the potential to change maternity care in all settings! Fueled by a recent grant awarded by the Foundation for the Advancement of Midwifery, MAWS members are working towards improving data collection in Washington State. The aim is to increase participation in both the MANA Statistics Project and also Washington’s OB COAP program, lending more validity to the data which is already being collected, and helping to examine best practices in all settings.

Midwifery care stands out with higher client satisfaction, a decreased c-section rate, and improved maternal morbidity. Sharing our data will showcase the safety and quality we deliver our clients, and bring us to the table with hospital-based providers who will see what outcomes are possible for low-risk women in all settings. FAM’s grant helps us move towards this goal of leading the field in terms of data submission, as well as helping to make the process easier for midwives. Drawing on the feedback received from the data collection survey sent out to MAWS members, the grant team met in October to strategize about how to best assist midwives in overcoming the barriers and hurdles that accompany data collection efforts. The team’s ongoing work also involves examining the clinical quality indicators that are used to develop the benchmarks for maternity care so that they can better reflect the strengths of the midwifery model of care. Next steps include applying for grant funding to incentivize midwives who want their good care to be recognized and counted!

With FAM’s help, the good work of MAWS midwives will serve as an example for what is possible in all settings, and improve maternity care as a whole.

A Report on the 2012 Legislative Session

We feel confident that, with the implementation of healthcare reform and the growing emphasis on cost containment and quality of care, the benefits of midwifery care will increasingly be recognized.



Jo Anne Myers-Ciecko at the Washington State Capitol

Agenda Item: Support HB 2186 - Help Licensed Midwives Collaborate with Nurses

Result: HB 2186, sponsored by Rep. Barbara Bailey from Whidbey Island, was signed into law by the Governor. (See the article on page 2 by Cynthia Jaffe, LM, CPM.) This bill allows Licensed Midwives to give direction to Registered Nurses (RNs) and Licensed Practical Nurses (LPNs). The Department of Health received \$11,000 in their budget to undergo rulemaking in 2012 to implement the new law. The department plans to hold two public hearings as part of this process.

Our goals with this bill were threefold:

1. It removes a barrier for midwives who have hospital privileges or are seeking hospital privileges. A midwife would be able to follow her client into the hospital in the event of a transport, increasing the likelihood of a vaginal birth which carries fewer risks for mother and baby, and is much less costly than a cesarean section.
2. It allows nurses to work in freestanding birth centers, or to work as a birth assistant with a Licensed Midwife at home births. Midwives frequently get applications from nurses, but are not able to hire them.
3. It removes one barrier to Licensed Midwives working in Federally Qualified Health Centers. This has been identified as one way to address the problem of access to maternity care in rural and underserved areas of the state.

You can read more about this bill in Rep. Barb Bailey's press release: houserepublicans.wa.gov/news/health-care/bailey-midwives-bill-signed-into-law/

Agenda Item: Maintain the current cap on midwifery licensing fees

Result: The \$59,000 budget proviso to cap midwifery licensing fees in 2012 was preserved in the 2012 Supplemental Budget. Annual professional licensing fees are currently capped at \$525. Maintaining this cap is an access to care issue because without it licensing fees would be approximately \$1500, which would force some midwives out of their profession and discourage some from entering. Licensed Midwifery is a profession that the state wants to promote and build because patients receive high-quality care while saving the state money.

Thank you to all of you who showed up on Lobby Day and to those of you who contacted your representatives and senators and had your clients do so, too. We feel confident that, with the implementation of healthcare reform and the growing emphasis on cost containment and quality of care, the benefits of midwifery care will increasingly be recognized.

Washington Midwives Lead the Way at Historic 2012 CPM Symposium

The presence of Washington midwives was an undeniable force at the CPM Symposium, in Warrenton, VA from March 16-20, 2012. Over the course of the trip, which began with a day of lobbying on Capitol Hill, the significance of the event was spoken but perhaps won't be completely understood or appreciated for some time.

Seventeen midwives, students, and midwifery educators from Washington joined peers from around the US to discuss what was most important to the future of the profession. The first two days were spent primarily listening and learning from a tremendous line-up of presenters representing every major government health care organization, and a walk from a global view down to a national look at what is happening today for midwives, educators, and the women for whom they care. This speaker line-up included a video interview conducted by MAWS president, Audrey Levine with Jeff Thompson, M.D., MPH, chief medical officer of the state of Washington's Medicaid program showing great support for the role CPMs play in the state.

Washington State was again well represented, as many of the participants were also speakers. Audrey Levine spoke on the role that midwives play at the Washington State Perinatal Advisory Committee as well as the WA State Perinatal Collaborative. Valerie Sasson and Liz Chalmers spoke on the role of birth centers in both urban and rural Washington. Senior Bastyr student Yesenia Guzman spoke about her graduate research project in developing strategies for including CPMs in the National Health Service Corps. (Washington participants and SMS/Bastyr grads pictured right.)



Through the long days, the topics of health disparities and race continuously bubbled to the surface. It was undeniably a topic that was on everyone's mind and, without any planning, became the center of an intense talk given on the second evening. Not a single person stirred in the room while full attention was given to a young woman from Texas as she spoke from her heart about the role that race plays in our lives, not just as people but specifically as midwives.

The intensity never eased as the Symposium was forced to hold the much needed space for the very real problems of racism, health disparities, unity of the profession, the disparities of legalization and licensure among the states, and the need for payment reform, access to education, collaboration with sister organizations, and more powerful public relations.

The final day left participants exhausted and weary of the great work ahead. But with a renewed sense of commitment to the causes we hold dear, the group from Washington returned home to begin looking to the future. The list of goals and focus items will serve as a compass for our work as a state organization that continues to lead the country in innovation and problem solving in the name of serving women.

For videos and more information about this historic event, visit: cpmsymposium.com.

~Neva Gerke, Bastyr University MAWS Board Representative, Class of 2014



SAVE THE DATE!

LOBBY DAY 2013

Friday February 8, 2013

OB COAP Report

In the fall of 2009, the Midwives' Association of Washington State (MAWS) was invited by the Foundation for Health Care Quality to participate in the pilot phase of a clinical outcomes assessment program called OB COAP. From March through December 2010, MAWS members submitted data on their pregnancy and birth outcomes to the OB COAP database. Participation was voluntary, although all MAWS members were strongly encouraged to submit data and the participation rate was very high—of the 85 professional MAWS members, over 80% participated in the pilot project.

Along with the licensed midwives, four WA State hospitals of various sizes submitted data to OB COAP during the pilot phase. A report from the Foundation for Health Care Quality is included with this summary. Among the highlights:

- Demographic data from all the sites were quite similar—in other words, the improved outcomes for women receiving midwifery care in an out-of-hospital setting do not seem to be attributable to our serving a lower-risk population than the hospital-based providers
- Total c-section rate of 7% compared to 28% in the hospitals
- VBAC success rate of 100%

This report was released by the Foundation for Health Care Quality to Dr. Jeff Thompson, Chief Medical Officer at the Washington State Health Care Authority. Dr. Thompson has been serving as co-Chair of the WA State Perinatal Collaborative, a multi-stakeholder group working since 2009 to improve outcomes for mothers and babies. The report, along with a cost-benefit analysis conducted in 2008 by the WA

State Department of Health which demonstrated that the care provided by licensed midwives results in significant cost savings to Medicaid, has prompted Dr. Thompson to advocate for increased access to licensed midwifery care in Washington for low-risk women on Medicaid. At Dr. Thompson's request, MAWS has created a brochure describing the benefits of midwifery care and birth at home or in freestanding birth centers. This brochure will be available in offices throughout WA State where pregnant women apply for Medicaid benefits.

We anticipate that this public awareness effort will result in a significant increase in the number of women seeking midwifery care and out-of-hospital birth, especially in rural areas of the state where the options for maternity care are limited. It should be noted that, historically, a large proportion of licensed midwives' clients have been on Medicaid which currently pays for approximately 52% of the births in WA State.



IS A MIDWIFE
RIGHT FOR ME?



Support Our Associate Members

MAWS is proud to have a growing membership of Associates who list their business in our online directory. If you haven't browsed this directory, please take some time to check it out. This is a great resource for referrals. Consider placing a link from your web site to the directory so your clients can use it.

You can help us grow our Associate membership by talking to your colleagues whom you refer to on a regular basis—childbirth educators, lactation consultants, naturopaths, chiropractors, acupuncturists. The list goes on and on. Or if you are a supporting member and have a birth or pregnancy-related business, consider upgrading your membership to join our directory.

Find the directory by visiting:
washingtonmidwives.org/midwife-friendly-businesses.html

New associates can learn more and join by going to the Join MAWS, Support MAWS tab on the web site. Joining now, offers an extra month and a half of membership through the end of 2013.

MAWS 2012 Fall Conference & Annual Meeting Friday November 9, 2012



Join the fun on November 9th! Great clinical topics and a membership meeting with organization updates, awards and recognitions, and time set aside for you to speak up about what's on your mind! All at the lovely Upper Gwinn Commons at Seattle Pacific University!

- *Frenulums and Craniums: Overcoming Certain Breastfeeding Challenges with Frenotomies and Cranial Therapy* (MaryAnn O'Hara MD and Karen Santos PT)
- *Update on Hypertensive Disorders of Pregnancy* (Robin deRegt MD OB/Gyn)
- *Intermittent Auscultation: Research and Practice* (Karen Hayes CNM DNP and Wendy Gordon LM MPH)
- *Update on Non-Stress Tests and Using Electronic Fetal Monitors in our Practices* (Karen Hayes CNM DNP)

washingtonmidwives.org/fall2012conference.html

All Region Peer Review

Saturday, November 10, 2012
9:30 am - 2:30 pm

Center For Birth
1500 Eastlake Avenue East
Seattle WA 98102

Need a peer review? Join us!
Write to Melissa Hughes at:
allregionpr@washingtonmidwives.org to RSVP

Neonatal Resuscitation Workshop

Thursday, November 8, 2012
6 pm - Seattle Home Maternity

Write to Marge Mansfield -
margemansfield@earthlink.net



PMB 2246
10002 Aurora Avenue N. - #36
Seattle WA 98133

Join us November 9th for the MAWS 2012 Fall Conference & Annual Meeting! Visit www.washingtonmidwives.org for details and registration.