

**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC
DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING
BOARD OF CERTIFIED DIRECT-ENTRY MIDWIVES**

**Meeting Minutes
February 25-26, 2010**

By authority of AS 08.065.020 and in compliance with the provision of AS 44.62, Article 6, a scheduled meeting of the Board of Certified Direct-Entry Midwives was held February 25-26, 2010 in Conference Room A, 333 Willoughby Ave. Juneau, Alaska

February 25, 2010

Agenda Item 1 Call to Order

Meeting was called to order by Holly Steiner, CDM, Chair at 9:06 a.m. This meeting was public noticed on January 15, 2010 and published in the Anchorage Daily News.

Present, constituting a quorum of the board were:

Holly Steiner, CDM, Chair, Wasilla
Cheryl Corrick, CDM, Secretary, Fairbanks
Peggy Downing, MD, Wasilla
Barbara Norton, ANP, CNM, Anchorage

Approved Absence: Mila Cosgrove, Public Member, Juneau

Staff present: Connie Petz, Licensing Examiner

Agenda Item 2 Review / Agenda

Agenda was amended requesting lunch break at 11:30 a.m. on 2-26-10.

On a motion made by Dr. Downing, seconded by Cheryl Corrick it was RESOLVED TO APPROVE THE AGENDA as amended. All in favor, carried unanimously.

**Agenda Item 3 Review / Approve Minutes
August 20-21, 2009**

August 20-21, 2009 minutes were in order except for minor grammatical corrections and there were no substantive changes.

On a motion made by Dr. Downing, seconded by Cheryl Corrick it was RESOLVED TO APPROVE MINUTES as amended. All in favor, carried unanimously.

Staff asked the board to discuss one portion of the August 21, 2009 board meeting which needed a technical aspect on record. This discussion will be reflected in today's board meeting February 25, 2010.

At the August board meeting, when the chair called for executive session one step in the process was overlooked. The correct procedure was to "read the wording for executive session Sec 44.62.310". For the record, this decision should reflect the board members in attendance were in agreement. Barbara Norton was not at the meeting so she will not vote on the amendment.

Holly stated for the record that the board did go in to executive session on August 21, 2009 at 1:10 p.m. In accordance with Sec 44.62.310 (c) (2) and (3) and the Alaska Constitutional Right to Privacy Provisions, for the purpose of discussion of (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion and (3) matters which by law, municipal charter, or ordinance are required to be confidential.

On a motion made by Dr. Downing, seconded by Cheryl Corrick it was RESOLVED TO AMEND FOR THE RECORD, the decision for the executive session at the August board meeting. All voted yes, Vote carried by a quorum. Barbara Norton did not vote.

Agenda Item 4 Ethics Reporting

Barbara Norton has declined to accept any reimbursement from the board for her attendance to the February 25-26 board meeting in Juneau.

The board watched the ethics video and staff explained the State Ethics video or Self-Guided Ethics Training can be viewed from the web:
<http://www.law.state.ak.us/doclibrary/ethics.html>

Agenda Item 5 Investigative Report

Staff called investigator Jo Anna Williamson regarding the investigative report.

3400-08-001	(Violating Prof. Ethics)	Investigation on-going
3450-09-002	(Unlicensed Practice)	Consent Agreement
3400-08-003	(Violation of License Regulation)	Consent Agreement

Holly called for executive session according to A.S. 44.62.310 (c) (2) and (3) and the Alaska Constitutional Right to Privacy Provisions, for the purpose of discussion of (2) subjects that tend to prejudice the reputation and character of any person, provided the person may request a public discussion and (3) matters which by law, municipal charter, or ordinance are required to be confidential.

On a motion by Cheryl Corrick, 2nd by Barbara Norton; Enter into Executive Session, for discussion of consent agreements 3450-09-002 Unlicensed Practice and 3400-08-003 Violation of License Regulation. All in favor, carried unanimously.

The board entered executive session, off the record at 10:13 a.m.
The board ended executive session, back on record at 10:40 a.m.

On a motion by Barbara Norton, seconded by Dr. Downing, it was resolved to ADOPT the CONSENT AGREEMENT for 3450-09-002 for Unlicensed Practice. All in favor, carried unanimously.

The Board of Certified Direct-Entry Midwives for the State of Alaska, having examined the Consent Agreement and Proposed Decision and Order, Case No. 3450-09-002, Tamara S. Smith, Permit # MID A 43, adopted the Consent Agreement and Decision and Order in this matter. Dated this 25th day of February, 2010 at Juneau, AK.

On a motion by Cheryl Corrick, seconded by Barbara Norton, it was resolved to ADOPT the CONSENT AGREEMENT for 3450-09-002 for Violation of License Regulation. All in favor, carried unanimously.

The Board of Certified Direct-Entry Midwives for the State of Alaska, having examined the Consent Agreement and Proposed Decision and Order, Case No. 3400-08-003, Susan K. Terwilliger, MID M 47, adopted the Consent Agreement and Decision and Order in this matter. Dated this 25th day of February, 2010 at Juneau, AK.

Agenda Item 6 Regulation Projects

The Board had lengthy discussion on necessary regulation. The intent was for clarification of current standards of care. The board requests the regulation specialist review and prepare a final draft of the below changes for the board to review for public comment. A brief explanation is provided for each requested change. Staff used regulation wording from prior regulation documentation for the board to discuss changes and for the layout of the minutes; (Words in boldface and underlined indicate language being added; words [CAPITALIAZED AND BRACKETED] indicate language being deleted. Complete new sections are not underlined.

12 AAC 14.200. COURSE OF STUDY REQUIREMENTS.

DELETE current (2)(L) and replace with:

(2)(L) screening and diagnostic tests to include but not limited to ultrasound and laboratory tests that are used during pregnancy, with indications for use and the risks and benefits of the tests.

The board would like to add the above in order to allow Certified Direct-Entry Midwives to practice according to the current standard of care.

12 AAC 14.420. CONTINUING EDUCATION REQUIREMENTS.

12AAC14.420. (1) at least four hours of the required continuing education contact hours must be in pharmacology, **education of alternative medications may include but are not limited to herbology and homeopathy and shall not exceed 2 hours.**

The board would like to add this because alternative medications are commonly used in certified direct-entry midwives practice and to allow CEU's.

12 AAC 14.470. REINSTATEMENT OF A LAPSED CERTIFICATE

(1) PAYS THE PENALTY FEE REQUIRED IN 12 AAC 02.105]

Repeal (1) as this penalty was repealed in centralized regulations.

12 AAC 14.500. PRENATAL CARE.

(a) The board recommends that a certified direct-entry midwife make prenatal visits to a client every four weeks until the 28th week of gestation, every two weeks from the 29th through the 35th week of gestation, and weekly from the 36th week of gestation until birth. **The midwife shall document if the client refuses any required or recommended tests or visits.**

The board wants to make sure it is clearly stated that the midwife needs to document whenever a client refuses any required or recommended tests or visits.

(c) (1) (G) [URINALYSIS]

The board would like to REPEAL (G) as the routine use of this test is unnecessary.

(c) (1) (J) cervical cytology **per American Cancer Society guidelines:**

(c) (2) recommend the following laboratory tests:

(C) ultrasound for size/date discrepancy, unsure dates or other American College of Radiology accepted indications.

The board would like to add (C) in order to allow Certified Direct-Entry Midwives to practice according to the current standard of care.

(d) (2) 15 – 20 weeks of gestation, the certified direct-entry midwife shall discuss with the client the availability of maternal [SERUM ALPHAFETOPROTEIN] **fetal** screening;

The board would like serum alpha fetoprotein to be replaced with fetal above in order to reflect the evolving medical testing.

(e) [AT EACE PRENATALVISIT] **the** certified direct-entry midwife shall order, **if indicated,** the analysis of a clean catch urine sample for glucose and protein.

The board would like add to reflect standard midwifery practice.

(h) The certified direct-entry midwife shall consult with a physician **or certified nurse midwife** if, during the prenatal period, the client

The board would like to add certified nurse midwife above because there is not always a physician available and it reflects current practice in the state of AK that Certified Direct-Entry Midwife's and certified nurse midwives practice collaboratively.

(h) (2) develops [CONSISTENT GLUCOSURIA OR] proteinuria of 1+ or greater;

The board would like delete [consistent glucosuria] because it is outdated language.

(h) (4) before 37 weeks gestation, has [SIX OR GREATER] **regular** contractions **with cervical change**; [PER HOUR NOT RESOLVED WITH HYDRATION OR REST, OR HAS EFFACEMENT OR DIALATION OF THE CERVIX;]

The board would like to change the above to reflect updated definition for preterm labor.

(h) (5) [HAS SEVERE PROTRUDING VARICOSE VEINS OF THE EXTREMITIES OR VULVA;]

The board would like to REPEAL ALL OF 5 as it is not a significant risk.

(h) (8) has symptoms of urinary tract infection [SUCH AS A RISE IN TEMPERATURE] **including but not limited to a fever of 100.5 degrees Fahrenheit or 38 degrees Celsius**, kidney or flank pain or **hematuria**; [URINARY FREQUENCY, OR DYSURIA]

The board would like to change the above because these are the symptoms that most closely reflect a significant risk.

(h) (17) has [VAGINAL BLEEDING OTHER THAN SHOW BEFORE THE ONSET OF LABOR] **unexplained or concerning vaginal bleeding**;

The board would like to change above for clearer language.

12 AAC 14.510. INTRAPARTUM CARE.

(c) (7) [HAS MECONIUM STAINED AMNIOTIC FLUID OTHER THAN VERY LIGHT;]

Board wants to repeal (c) (7) because it reflects a changed standard of care and it is addressed where it is more pertinent under infant care AAC 14.530 (a)(7).

12 AAC 14.530. INFANT CARE. (a) A certified direct-entry midwife shall consult with a physician concerning an infant who

(a) (6) shows signs of prematurity, [DYSMATURITY, OR POSTMATURITY];

Board would like to remove dysmaturity or postmaturity because they are ambiguous terms that pose an insignificant risk.

(a) (7) had meconium stained fluid before birth [OTHER THAN VERY LIGHT] **and has any indication of respiratory compromise**;

Board would like to remove other than very light due to change in standard of care.

(a) (12) weighs less than five and one half pounds; or 2,500 grams, [OR MORE THAN 10 POUNDS OR 4,500 GRAMS;]

The Board agrees babies weighing greater than 10 pounds don't inherently pose a greater risk.

(a) (14) requires **greater than one minute** resuscitation by bag and mask or cardiopulmonary resuscitation; or

The board added greater than one minute because less than this time amount does not pose a significant risk.

12 AAC 14.550. MEDICAL BACK-UP ARRANGEMENTS.

(a) (3) [CONDUCTING LABORATORY TESTS]

The board would like to repeal because ordering labs is within current scope of practice therefore they do not need medical backup to conduct laboratory tests.

12 AAC 14.570. MEDICATIONS.

(6) pitocin, administered by intramuscular injection or intravenous drip, [IN AN EMERGENCY SITUATION] for the control of postpartum hemorrhage;

The board requested deletion [in an emergency situation] because the standard of care involves the use of pitocin prior to an emergency situation.

(8) (A) [ADMINISTERED INTRAVENOUSLY TO A POSTPARTUM CLIENT, IN AN EMERGENCY SITUATION TO PREVENT OR TREAT SHOCK AND STABILIZE THE CLIENT'S CONDITION WHILE ARRANGING TRANSPORT TO A HOSPITAL;]

The board would like to repeal all of (A) because it is covered in AAC 14.570 (6).

(8) (B) up to 2,000 milliliters administered intravenously to [AN INTRAPARTUM] a client who would benefit from hydration;

The board wants to reflect the current expanded practice.

The board would like to have everywhere in the statutes and regulations which states fever of 100.4 degrees Fahrenheit CHANGED to 100.5 degrees Fahrenheit. The board notes the standard is 38 degree Celsius which is 100.5 degrees Fahrenheit.

12 AAC 14.500. PRENATAL CARE.

(h) (13) has fever of 100.4 degrees Fahrenheit or 38 degrees Celsius for 24 hours or more;

12 AAC 14.510. INTRAPARTUM CARE.

(c) (2) develops a fever of 100.4° F. or 38° C.;

12 AAC 14.520. POSTPARTUM CARE.

(g) (3) develops a fever greater than 100.4° F. or 38° C. on any two of the first 10 postpartum days;

The board discussed the above changes and reviewed each regulation. The goal of the board would be to have the public comment received in time for the August 19-20, 2010 board meeting and request staff to provide the draft changes to the regulation specialist. Once the draft is returned by regulations specialist a teleconference could be called.

On a motion made by Dr. Downing, seconded by Cheryl Corrick it was RESOLVED TO APPROVE regulation changes and submit to the regulation specialist for a draft. All in favor, carried unanimously.

Staff gave the board a regulation flow chart which identified all steps involved for any regulation change to take place. The board now understands this is a very lengthy process and why it takes so long for the process to be completed.

Lunch: Off record 12:29 p.m., back on record 1:02 p.m.

Holly called meeting to order, all board members and staff were present. Holly said if we have time at the end of agenda item 8 today, we will try to finish reviewing the regulation project for agenda item 6.

Agenda Item 7 Public Comment

Kaye Kanne asked the board to consider identifying within the statutes and regulations that midwives use ultrasounds in their scope of practice. She shared with the board that for 10 years she had privileges to order ultrasounds with the hospital. Then about 3 years ago the hospital credentialing committee decided that midwives did not have the knowledge or training to order ultrasounds so privileges were taken away.

Barbara Norton thought it could be added in 12 AAC 14.500 Prenatal Care and to also identify it's for size/date discrepancy and unsure dates. This should also be considered for placement under permitted practices in the statutes and regulations.

Agenda Item 8 Review applications

Application for **Kristin Hock** was reviewed by the board. Kristin was asked if the midwives who oversaw her primary births in Texas had been licensed for 2 years or more and Kristin said yes. The board also asked where Kristin trained and she said primarily in Juneau (4 years with Kaye Kanne) but she did train for 2.5 months in El Paso Texas. The board determined 2 additional primary births were needed in order for the application to be complete.

Motion to approve for licensure PENDING:

- Passing NARM
- Fulfill remaining 2 primary birth requirements
- Submitting certification fee of \$500.00

On a motion made by Barbara Norton, seconded by Cheryl Corrick it was RESOLVED TO APPROVE Kristin Hock for licensure as a Certified Direct-Entry Midwife pending passing the NARM exam, fulfillment of 2 additional primary births with submission of birth documentation requirements and submission of the certification fee. All in favor, no nays.

Application for **Felicity Janet Smith** was reviewed by the board and they found everything to be in good order so there were no questions. Board called Ms. Smith to advise she was approved for licensure.

On a motion made by Barbara Norton, seconded by Dr. Downing it was RESOLVED TO APPROVE Felicity Janet Smith for licensure as a Certified Direct-Entry Midwife pending passing NARM exam. All in favor, no nays.

Application for **Tamara Sue Smith** was reviewed by the board and they found everything to be complete. Board called Ms. Smith to advise she was approved for licensure.

On a motion made by Cheryl Corrick, seconded by Barbara Norton it was RESOLVED TO APPROVE Tamara Sue Smith for licensure as a Certified Direct-Entry Midwife. All in favor, no nays.

Staff reminded the board that in the past new licensee's were asked to take the state law exam. It was not part of any of the approved licensees today and this is a topic that will be discussed later in the board meeting.

TASK: Dr. Downing will create a revision for the medications form # 08-4215e for the board to discuss at the August 2010 board meeting. She stated that there should be a clear understanding by each applicant of how a medication it to be used and why.

Continued discussion with the regulations project under Agenda item 6 and all the revisions are included in these minutes under agenda item 6.

Holly called to adjourn the meeting at 4:18 p.m.

February 26, 2010

Agenda Item 9 Call to order

Holly called meeting to order at 9:06 a.m., present and constituting a quorum of the board were:

Holly Steiner, CDM, Chair, Wasilla
Cheryl Corrick, CDM, Secretary, Fairbanks
Peggy Downing, MD, Wasilla
Barbara Norton, ANP, CNM, Anchorage

Approved Absence: Mila Cosgrove, Public Member, Juneau

Staff present: Connie Petz, Licensing Examiner

Agenda Item 10 Budget Report

Staff explained the current budget report and stated the administrative officer will provide the 'proposed fees' in the August 19-20, 2010 budget report. Staff explained the fee structure is set by policy and any request for deviation of the budget report would require a written explanation from the board and the board has the option to appeal any fee increases or decreases.

Agenda Item 11 Fiscal year 2010 annual report

Staff explained the Annual Report must be complete by August 1, 2010. New board secretary Cheryl Corrick will update annual report and provide to staff by mid June.

- Add new goals that the board discusses at each board meeting

FINAL minutes Feb 25-26-2010

- List all board activity for Fiscal Year; FY is July 1 to June 30
- Remove goals which have been completed

Board discussed the #1 Legislative goal and staff explained the board could create a letter to hand out to friendly legislators to promote any statutes changes the board would like to have entered during a session. Good legislative contacts are Senator Paskvan and Senator Thomas. Any contact should be in a formal letter, reviewed and approved by staff and presented to the director of the division for approval. This is to follow procedures and to keep our director informed of board issues.

TASK: Cheryl will submit the annual reports' narrative statement to staff by June 2010. Staff will add statistical information and send out completed annual report via e-mail so board members can vote by mid July in order to meet the August 1, 2010 deadline.

Agenda Item 12 Jurisprudence Exam

The board discussed the need to revise the jurisprudence exam prior to the upcoming renewal. Completion of the jurisprudence exam earns 2 CE credits.

Dr. Downing asked if how the current exam is administered is meeting the goal and purpose of this requirement. The exam is to make sure licensees are current in their understanding of Alaska state law.

Cheryl wants the board to review each exam, note any errors in answers and then send it back to the applicant. This is to educate the licensee in areas they misunderstood. She suggested creating a generic cover letter to attach to their copy of the exam.

TASK: Staff to ask supervisor. Can return the exam to the licensee with corrections? Do we need approval as this will be an added expense to the board for postage, administrative time etc...

TASK: Staff will provide word document of last exam and Holly to revise exam with specific questions which allow for multiple choice and true/false selections to answer the questions. This will allow the board the ability to review exams efficiently and to confirm licensees understand the state law. Draft should be returned to staff by July 15, 2010.

Agenda Item 13 Old Business

All applications need to be revised to include 12 AAC 14.140. APPLICATION MADE UNDER OATH OR AFFIRMATION; DISCIPLINARY SANCTIONS. The applicant must sign the application and swear to or affirm the truth of its contents. False or misleading statements or information on the application, whether or not made knowingly, are grounds for denial of approval to take an examination under AS 08.65 or for disciplinary sanctions under AS 08.65.120.

The board changed the wording on the professional fitness page to include the above requirement instead of creating another form in the application.

Also add words surrendered (voluntary or involuntary) to professional fitness question # 6.

Break 10:43 a.m. Back on record at 10:48 a.m.

Review Preceptor application and checklist:

Continued discussion of preceptor requirements as the board wants higher requirements for a preceptor. Should we revise the application to allow for more specific answers from the applicant in order to have a better picture of the experience history from preceptor?

The application can be revised as long as there are no "requirements" placed on a preceptor that does not meet current statutes and regulations. Currently the preceptor application asks: Number of deliveries for which you had primary responsibility in the last two years. In order to qualify as a preceptor we require at a minimum 10 primary births in the past 2 years. We also know in order to renew any midwife must have been primarily responsible for 10 births. So this requirement is already established.

Staff directed the board to 12 AAC 14.440. CONTINUING PROFESSIONAL PRACTICE REQUIREMENTS. Except as provided in 12 AAC 14.450, an applicant for renewal of a certificate as a direct-entry midwife shall certify having assisted with, or been primarily responsible for, 10 deliveries during the concluding license period.

Barbara read the new NARM policies which go into effect this year. Per the NARM website: "A preceptor for a NARM PEP applicant must be credentialed as a Certified Professional Midwife (CPM), Certified Nurse Midwife (CNM), or Licensed Midwife who has an additional three years of experience or 50 births, including ten (10) continuity of care births beyond the primary birth experience requirements for CPM certification. (effective June 1, 2010) A preceptor who does not meet the above requirements may request an exemption by filling out the preceptor application form on this web site".

Barbara would like the board to make it a goal to have higher standards for midwives who are teaching apprentices. She would like our requirements to be consistent with NARM. Holly reminded everyone that this topic has gone on for 2 years of board meetings. We can only make changes if we work towards statute change. All agreed they preferred that only experienced midwives should be training new midwives.

Goal for the board: Develop appropriate requirements, applications and forms for preceptors both in Alaska and from other states.

Project: All aspects of preceptorship. Including considering regulation change on the 12 AAC 14.130(e) An apprentice direct-entry midwife shall submit written notice to the department within 30 days after any addition or change to the relationship with the apprenticeship program preceptor. Need more discussion on this topic – save to next meeting. Goal would be to have the regulation changed to be to report a change in the Primary preceptor not every person who supervises the apprentice.

Discuss the need to create a Reinstatement Application and checklist:

Staff explained a licensee who is in lapsed status is seeking reinstatement. Board reviewed the draft checklist and discussed the requirements. A lapsed license over 2 years but less than 5 would require an apprentice permit if the applicant has not met the birth requirements while practicing as a midwife in another state. 12 AAC 14.470. REINSTATEMENT OF A LAPSED CERTIFICATE. (6) documents completion of (A) the continuing professional practice requirements in 12 AAC 14.440 for the entire period

since the certificate lapsed; or (B) at least 10 supervised deliveries in the year immediately preceding the application for reinstatement.

The board also noted that per Sec. 08.65.160. CERTIFICATION REQUIRED IF DESIGNATION USED. A person who is not certified under this chapter or whose certification is suspended or revoked, or whose certification has lapsed, who knowingly uses in connection with the person's name the words or letters "C.D.M.," "Certified Direct-Entry Midwife," or other letters, words, or insignia indicating or implying that the person is certified as a direct-entry midwife by this state or who in any way, orally or in writing, directly or by implication, knowingly holds out as being certified by the state as a direct-entry midwife in this state is guilty of a class B misdemeanor.

The board agreed our statute clearly states a permit is required to practice and our statutes and regulations do not provide for a midwife who chooses to take time out of practice to have clear directions on how to reinstate their license.

Staff drafted a letter to the lapsed certificate holder providing directions on what steps to take in order to work towards the reinstatement of licensure and the board reviewed and approved it being sent.

Goal for the board: Project to allow for an inactive status for a midwife and then set the standards for reentry. Holly suggests creating a permit.

PROJECT: Add to present goals and objectives goal # 3 develop interim permit for an inactive CDM to allow practice of midwifery under supervision of a licensed midwife in order to reinstate her license. Determine if we can create a temporary permit similar to the apprentice permit.

LUNCH off record at 11:45 a.m. – BACK on RECORD at 12:57 p.m.

All board members and staff in attendance.

Apprentice application forms:

Can you be the primary preceptor located in AK and your apprentice is birthing babies in TX? Who is responsible for the apprentice? 12 AAC 14.130. REVIEW OF AN APPRENTICE DIRECT-ENTRY MIDWIFE PERMIT APPLICATION. (e) An apprentice direct-entry midwife shall submit written notice to the department within 30 days after any addition or change to the relationship with the apprenticeship program preceptor.

In the event that an apprentice midwife starts her midwifery training outside of Alaska then we need to develop a form that an out of state preceptor can sign to affirm they qualify per AK requirements. Do we need to include a form with the apprentice application that provides directions to add or change a preceptor? Make instructions very clear that any change of preceptor must be done in writing and within 30 days.

Goal: Develop appropriate requirements, applications and forms for preceptors both in Alaska and from other states.

Application form to apply by Exam:

Course of study certification form 08-4215d was revised from a 7 page form to a 1 page

form which affirms the applicant has successfully completed all required subjects per 12 AAC 13.200 a. The new form will require both the course of study provider and the preceptor to have their signatures notarized.

Board reviewed the 52 page application by exam # 08-4215 and revised form# 08-4215c by altering the way in which births are recorded. It will be changed to group the clinical experience according to type. This will assist the board in reviewing an application and should make it easier for the apprentice to track their requirements. Part I will now have 3 parts; Part I a - Observes, Part I b - Assists, Part I c - Primary.

Discussion of the boards desire to require the Alaska law exam as part of the application by exam. In review of Sec. 08.65.060. EXAMINATIONS. The last sentence: The board may require an applicant to pass an examination about Alaska laws that are applicable to the profession of direct-entry midwives.

Goal: Regulation project to spell out the requirement for applicants by exam and by credentials to take the state law exam.

Agenda Item 14 Board Website

New website redesign includes more links with expanded explanations, FAQ's and disciplinary actions. Future agendas will be posted to the website once board members are mailed their board meeting packets. Then a "draft" minutes will be posted (as soon as possible) after board meeting and replaced with the final approved minutes board.

The board would like disciplinary actions posted on web to educate midwives but they want to see what will be written to approve it prior to posting on the web. TASK: Staff to provide draft of disciplinary actions to the board for approval prior to posting on the web.

**Agenda Item 15 Review/Revise
forms/checklists/applications**

Due to the substantive changes in the applications and current regulation changes, staff suggested putting a statement on all application advising current forms or applications must be used. The board said we should just return any forms submitted by an applicant that are out of date and request they complete a new form.

Agenda Item 16 Peer Review

Per 12 AAC 14.900 Peer review is a function of the board and the board will designate an organization to provide peer review to the board concerning quality of care provided by a CDM's. There is an agreement with the MAA organization. Peer Review letters are sent by late March each year for review of the prior year (April 1, 2009 to March 31, 2010).

The board discussed the practice has been the licensing examiner mails out the letters directing the licensees to comply with the peer review by a specific date and the licensees submit the information to the appointed address on the letter. MAA has a committee which reviews each licensee's submission. MAA provides a write up for the board, forwards their findings to staff for the next board meeting.

Could not find anything in 'writing' representing an agreement.

TASK: Staff to work on peer review agreement as referred to in the board packet.

Goal: Develop written agreement for peer review with MAA.

Agenda Item 17 Discussion of boards' role

Staff explained to the board that her role is to make sure the board is complying with the statutes and regulations and assist the board in interpretations along with assisting in the board business functions. When errors in how we function become evident staff needs to bring it to the board's attention to make sure we follow all laws.

The board job description is in Sec. 08.65.030. DUTIES AND POWERS OF BOARD.

The intent of the board is to protect the public. The role of MAA is to promote midwifery in Alaska. Staff reminded the board they should not intertwine board business with the MAA issues. When a board member is in attendance at a MAA meeting, they should not represent themselves as a board member. They can wear the hat of a midwife and they should avoid discussing board business to avoid violation of the open meetings act.

Protection of the public shall be the highest priority for the Board of Certified Direct-Entry Midwives in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.

Per Sec 08.65.010 (c) The board shall elect a chair and a secretary from among its members to terms of one year. Cheryl Corrick had been elected as the new secretary to replace exiting member Mila Cosgrove at the prior board meeting. The board discussed that the statute does not say they could not re-elect an existing member and agreed it is more effective to have consistency in the role and would like Holly Steiner to continue as the board chair.

On a motion made by Dr. Downing, seconded by Barbara Norton it was RESOLVED TO APPROVE Holly Steiner for another term as the board chair. All in favor, carried unanimously.

Agenda Item 18 Schedule Meetings

Fall board meeting was confirmed to be on August 19-20, 2010 in Anchorage.

Task list for meeting follow up:

Connie:

- Peer Review written agreement documentation to be prepared and sent out to the board for a mail vote.
- Revise all applications/forms per board meeting discussion.
- Send letter to applicant seeking reinstatement of CDM.
- New website can be updated, add additional information as it is created, board disciplines, draft minutes.
- Create a frequently asked questions link and add MAA data to website.
- Draft disciplinary actions to the board for approval prior to posting on the web.
- Provide current jurisprudence exam to webmaster to redesign, forward to Holly so she can work on it.

FINAL minutes Feb 25-26-2010

- Check with Supervisor to see if we can return the exam to the licensee with corrections on it after the renewal is complete.
- Review list of 'tasks' from past board meeting which Holly provided to make sure we have covered everything.

Holly:

- Revise and return jurisprudence exam by mid July to staff to have in time to put in the August board packet so it can be finalized at the August 19-20 board meeting.

Peggy:

- Revise form 08-4215e per 12 AAC 14.570 – Medications and send draft to staff by mid July to staff to have in time to put in the August board packet so it can be finalized at the August 19-20 board meeting. Exam applicants need to explain the training and skills acquired in order to safely and competently administer the pharmaceutical agents in the practice of midwifery. The board will discuss the suggestions provided by Peggy to determine if they want to change the form in the application packet.

Cheryl:

- Add all new goals to the annual report and submit the draft narrative statement to staff by June 2010. Staff will add statistical information and send out completed annual report via e-mail so board members can vote by mid July in order to meet the August 1, 2010 deadline.

Agenda Item 19 Adjourn Meeting

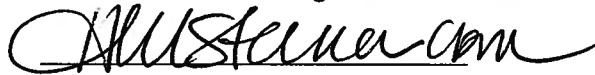
**On a motion by Dr. Downing, seconded by Cheryl Corrick,
ADJOURN the meeting. All in favor, carried unanimously.**

Meeting adjourned and off the record at 4:57 p.m.

Respectfully Submitted:



Connie Petz, Licensing Examiner



Holly Steiner, CDM Chair

Date: 8/19/10