

1 STATE OF ALASKA  
2 DEPARTMENT OF COMMERCE, COMMUNITY,  
3 AND ECONOMIC DEVELOPMENT  
4 DIVISION OF CORPORATIONS, BUSINESS  
5 AND PROFESSIONAL LICENSE  
6

7 BOARD OF CERTIFIED DIRECT-ENTRY MIDWIVES  
8

9 550 West 7<sup>th</sup> Ave  
10 Atwood Building Room 1270  
11 Anchorage, AK  
12

13 February 12-13, 2015  
14

15 By authority of AS 08.065.020 and in compliance with the provision of AS 44.62, Article 6,  
16 a scheduled meeting of the Board of Certified Direct-Entry Midwives was held  
17 February 12-13, 2015, 550 West 7<sup>th</sup> Ave, Suite 1270 Anchorage, AK  
18

19 Thursday February 12, 2015  
20

21 **Call to Order/Roll Call**  
22

23 Cheryl Corrick called the meeting to order at 9:08 a.m. A quorum of the Board was present.  
24

25 Cheryl Corrick, CDM, Chair, Fairbanks  
26 Jennifer Swander, Public Member, Secretary, Seward  
27 Deborah Schneider, CDM, Wasilla  
28 Peggy Downing, MD, Wasilla  
29 Sarah Taygan, CNM, Anchorage  
30

31 Present from the Division of Corporations, Business & Professional Licensing  
32

33 Sara Chambers, Director (via telephone)  
34 Martha Hewlett, Administrative Officer (via telephone)  
35 Angela Birt, Chief Investigator  
36 Alvin Kennedy, Senior Investigator  
37 Ed Riefle, Senior Investigator  
38 Brian Howes, Investigator  
39 Connie Petz, Licensing Examiner  
40

41 Public Members in attendance:  
42

43 February 12, 2015: Susan Terwilliger, Kay Kanne, Lena Kilic, Juniper Lanmon, Autumn  
44 Loken, Judi Davidson, Darcy Lucey, Holly Steiner  
45

46 February 13, 2015: Samantha Keller, Judi Davidson, Juniper Lanmon, Lena Kilic, Susan  
47 Terwilliger, Darcy Lucey, and Iris Caldentey  
48

49 **Agenda Item 1 - Consent Agenda**  
50

51 October 2-3, 2014 meeting minutes  
52 December 1, 2014 teleconference minutes

53 October 6, 2014 letter to Senator Fairclough  
54 October 8, 2014 letter to Director Brodie  
55 October 13, 2014 letter to Maureen Sullivan  
56 October 16, 2014 letter to Darlene Dorries-Scrivner  
57 October 16, 2014 email to Anna Lavender  
58 Sunset Audit – Final Report 2014  
59

60 **ON MOTION BY TAYGAN, SECONDED BY SWANDER TO APPROVE THE OCTOBER 2-3, 2014**  
61 **MEETING MINUTES AS FINAL. ALL IN FAVOR, NO NAYS.**  
62

63 **ON MOTION BY TAYGAN, SECONDED BY SCHNEIDER TO APPROVE THE DECEMBER 1, 2014**  
64 **TELECONFERENCE MINUTES AS FINAL. DR. DOWNING ABSTAINED. ALL IN FAVOR, NO NAYS.**  
65

66 Dr. Downing abstained as she was not present during the December 1, 2014 teleconference.  
67

68 **ON MOTION BY TAYGAN, SECONDED BY SWANDER TO APPROVE ITEMS 1, 2, 3, 4, 5, 6, 7**  
69 **AND 8 OF THE CONSENT AGENDA. ALL IN FAVOR, NO NAYS.**  
70

#### 71 **Agenda Item 2 - Review/Approve Agenda** 72

73 Agenda amended to end meeting on February 13<sup>th</sup> at 3:30 p.m. instead of 4:00 p.m. to allow  
74 time for Ms. Corrick to testify before the legislature for the Board’s legislative audit report.  
75

76 **ON MOTION BY SCHNEIDER, SECONDED BY TAYGAN TO AMEND THE AGENDA TO END THE**  
77 **MEETING AT 3:30 ON FEBRUARY 13<sup>TH</sup>. ALL IN FAVOR, NO NAYS.**  
78

#### 79 **Agenda Item 3 - Ethics Reporting** 80

81 There were no ethics violations to report by any board members or staff.  
82

#### 83 **Agenda Item 4 - Old Business Discussion** 84

85 The Board reviewed and finalized their letter to Alaska Medical Board and Bartlett Hospital  
86 stating their understanding of Alaska Law for Certified Direct Entry Midwives.  
87

88 **ON MOTION BY DR. DOWNING, SECONDED BY TAYGAN TO APPROVE THE LETTER TO THE**  
89 **MEDICAL BOARD AND BARTLETT HOSPITAL. ALL IN FAVOR, NO NAYS.**  
90

91 Task: Staff will put on state letter head and forward to Dr. David Miller of the Alaska Medical  
92 Board and Dr. James Thompson of Bartlett Hospital along with attachments from prior  
93 correspondence.  
94

95 Staff informed the board that Director Chambers had sent a follow-up memo to Health and  
96 Social Services, Director Brodie, asking her for a response to the Board’s October 8, 2014 letter  
97 regarding the infant care and the apprentice issue. A response has not yet been received.  
98

99 Task: Staff will forward any response from Director Brodie to the Board once received.  
100

#### 101 **Agenda Item 5 - Investigative Report** 102

103 Investigative staff attending the meeting were; Chief Birt, Al Kennedy, Ed Riefle, and Brian Howes  
104 who was introduced as the boards new investigator.

105  
106 Brian Howes presented the investigative report for the period September 30, 2014 through  
107 January 1, 2015; includes 14 files opened, 14 closed and 11 ongoing. He asked the Board to  
108 consider Executive Session for discussion on a case.  
109  
110 Al Kennedy stated four files which had been moved to the Attorney Generals' office are set to  
111 be reviewed soon. One file is still with OSPA for unlicensed practice.  
112  
113 Ms. Birt assured the Board that the division is working with the legislative audit recommendations.  
114  
115 Ed Riefle was assigned to a special project for 14 files. Licensees were notified and these cases  
116 were opened and closed quickly as it was determined the postmark date of May 1<sup>st</sup> would be  
117 accepted. Those with a later postmark date were reminded of the regulatory deadline.  
118  
119 Ms. Taygan asked if it was possible for investigations to provide the costs related to each case.  
120 Ms. Birt stated that it's positive time keeping, not per case but per board. Ms. Taygan felt that  
121 when you keep track you can quantify the problem. Ms. Birt explained they are exploring other  
122 ways of calculating costs.  
123  
124 There was discussion as to how the Board can keep costs down, would the disciplinary action  
125 matrix help. Ms. Birt explained it can be a guideline, each case must be considered by its own  
126 merits. Investigations can work with the Board on this and Mr. Howes will help with a historical  
127 precedent and he will work with the chair of the Board.  
128  
129 The Board again asked about the process of investigations. The Board wants Midwives  
130 Association of Alaska peer review to be the authority on case review. Ms. Birt stated it is the  
131 Board who is authorized to discipline as board members are appointed by the governor.  
132  
133 The Board asked if Peer Review could be the clinical expert who would advise the investigator  
134 on all cases. Ms. Birt said then the Board would see nothing on the case, it would only be the  
135 final agreement.  
136  
137 Ms. Corrick called for a motion to enter into executive session in accordance with AS 44.62.310  
138 (c) The following subjects may be considered in an executive session (2) subjects that tend to  
139 prejudice the reputation and character of any person, provided the person may request a  
140 public discussion; and (3) matters which by law, municipal charter, or ordinance are required to  
141 be confidential; in order to review an application and a consent agreement.  
142  
143 **ON A MOTION BY TAYGAN, SECONDED BY SCHNEIDER, TO ENTER EXECUTIVE SESSION PER**  
144 **AS 44.62.310 (C)(2) AND (3) TO REVIEW AN APPLICATION AND A CONSENT AGREEMENT.**  
145 **ROLE CALL VOTE, EACH BOARD MEMBER STATED THEIR NAME AND VOTED YES TO ENTER**  
146 **EXECUTIVE SESSION. SWANDER, SCHNEIDER, DOWNING, TAYGAN, CORRICK**  
147  
148 For the record Ms. Corrick stated all Board members and investigative staff, Birt, Kennedy, Riefle  
149 and Howes as well as Petz to stay in the room. Public members were asked to leave the room.  
150  
151 Off the record 10:23 a.m.  
152 Back on the record 11:42 a.m.  
153  
154 Dr. Downing left the meeting at 11:45 a.m. all other Board members, Investigator Kennedy and  
155 staff Petz remained in the room.  
156

157 ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER, TO ACCEPT THE CONSENT  
158 AGREEMENT. THE BOARD OF MIDWIFERY FOR THE STATE OF ALASKA, HAVING EXAMINED  
159 THE CONSENT AGREEMENT AND PROPOSED DECISION AND ORDER, CASE NO. 2014-000346,  
160 LICENSE NO. 75 ADOPTED THE CONSENT AGREEMENT AND DECISION AND ORDER IN THIS  
161 MATTER WITH THE MODIFICATIONS TO REDUCE THE FINE TO A SUSPENSION OF \$4500.00 AND  
162 INSTRUCTIONS ON HOW TO DO ADDITIONAL TRAINING TO REDUCE PROBATION TO BE  
163 COMMUNICATED TO HER AS WELL. ALL IN FAVOR, NO NAYS.  
164

165 Ms. Corrick stated the motion passed and was approved with the modified consent agreement  
166 for Madison Nolan Grimes, respondent. Ms. Corrick signed the board order.  
167

168 The Board was behind schedule and will return to investigation discussion after the Budget is  
169 discussed.  
170

### 171 **Agenda Item 6 - Budget Report - Annual Fiscal Report**

172  
173 Administrative Officer Martha Hewlett and Director Sara Chambers both spoke to the Board via  
174 telephone and explained the budget report and budget analysis. As of the end of the 2<sup>nd</sup>  
175 quarter of FY15 the Board had a negative deficit of \$117,725.  
176

177 Ms. Hewlett informed the Board that if they held board meetings a few weeks after the end of  
178 each quarter they could have the most current financials at each meeting. She provided FY15  
179 financials through the 2<sup>nd</sup> quarter, costs for investigations were \$1292.91 and regulations \$658.73.  
180

181 Ms. Chambers informed the Board that she will return to her prior position as operations manager  
182 and the new Director, appointed by the Governor, will start on March 2, 2015.  
183

184 Lunch Recess – off record at 12:53 p.m. Reconvene at 2:04 p.m. All board members except Dr.  
185 Downing who had an excused absence for the afternoon session.  
186

### 187 **Agenda Item 7 - Public Comment**

188  
189 Holly Steiner asked the Board to streamline license renewal and implement online renewal  
190 applications. Staff explained that the division is working towards online renewal applications for  
191 many boards.  
192

193 Task: Staff was asked to inform the division the Board would like online license renewal.  
194

195 Susie Terwilliger, representing Midwives Association of Alaska and asked the Board to accept the  
196 MANA summaries and MANA stat forms for peer review instead of the current MAA reporting  
197 forms for birth summary. As of January 1, 2015 MAA has transitioned to the MANA forms. It was  
198 noted the regulation states a copy of each birth summary however she asked the Board to  
199 accept the summary of all births on one form instead of a summary of each birth.  
200

201 The Board interpreted the regulation does not say what the form is only that it should be a  
202 summary of each birth. Ms. Corrick stated that she did not see any reason that MAA could not  
203 use their own forms.  
204

205 Lena McGinnis Kilic stated she was the new chair of MAA accountability action committee for  
206 Peer Review. She said they are working towards more self-governing as much as they can. She  
207 will provide staff with the list of who is now on the peer review committee.  
208

209 Ms. Kilic asked the Board to remove the requirement for peer review to use the outliers created  
210 in the past. Considering the Board has requested MAA do their peer review of birth summaries  
211 and they feel like it is adequate that they review selected charts. MAA now has their  
212 confidential peer review in place. Midwives will have two charts reviewed during the license  
213 period. The midwife will sit with their fellow midwives and have their chart reviewed. The Board  
214 agreed peer review did not need to consider outliers any longer.

215  
216 Ms. Kilic said the Board has entrusted peer review to perform tasks and the Board should trust  
217 them. She asked that the Board no longer require peer review return the postmarked  
218 envelopes. The Board decided to drop the requirement to document the envelope which  
219 would provide a date the licensee submitted documentation to peer review.

220  
221 Several midwives shared they were distressed over receiving letters from investigations for late  
222 reporting of peer review when in was then later determined the postmark date would be  
223 accepted as the date of submission, not the date it was actually received.

224  
225 Holly Steiner said it's up to the Peer review committee to determine if a midwife is in compliance.  
226

227 Ms. Taygan read 08.01.070(4) requires, through the department, investigation of violations of its  
228 laws and regulation. She does not understand why the Board is not the one who decides what  
229 should go to investigations.

230  
231 MAA chair Susie Terwilliger also asked the Board to not require the postmarked envelopes from  
232 the midwives and to trust Peer Review. MAA designated the accountability action committee  
233 for peer review. The Board decided that they will trust peer review to make sure all midwives are  
234 in compliance.

235  
236 There was extensive discussion over what should or should not be submitted to investigations.  
237

238 **ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER TO CREATE A SUBCOMMITTEE OF**  
239 **JENNIFER SWANDER AND SARAH TAYGAN TO WRITE A LETTER TO INVESTIGATIONS ABOUT**  
240 **OUR CONCERNS. ALL IN FAVOR, NO NAYS.**

241  
242 TASK: Ms. Taygan will write the letter and address it to Chief Birt, investigations and Sara  
243 Chambers.

244  
245 Kaye Kanne stated she thought processes have broken down. She said the licensing examiner  
246 works for the Board and it is a conflict of interest when the examiner turns any complaints over to  
247 investigations. She asked the Board to get a legal opinion to determine what the examiner  
248 could and could not do for the Board as it will save everyone time and money.

249  
250 Ms. Corrick will talk to Ms. Chambers about these concerns.  
251

252 **Agenda Item 8 - Peer Review & Peer review agreement**

253  
254 Staff will mail Peer Review letters in early March to all midwives.

255  
256 The current peer review agreement ends May 2015. The Board was presented with the  
257 state of Alaska's Standard Agreement Form for Professional Services. They decided to  
258 take up the discussion later in the meeting as they were not comfortable with the  
259 contract wording.  
260

261 The Board decided to ask investigations to come back to the meeting to explain the  
262 investigative process. The Board wants Peer Review to be the first point of contact and they  
263 want Peer Review to be included in the department's investigative process. Staff would ask  
264 Chief Birt to attend the meeting Friday morning if available. The Board said this discussion will  
265 help them determine what questions they need to ask Department of Law.  
266

267 Staff asked the Board if they want any process in place for peer review committee? It is  
268 understood the Board will have discussion for a future regulation project but there needs  
269 to be a system in place now as to what is expected from the committee within the  
270 current regulations.  
271

272 Break 4:13 p.m. back on record at 4:25 p.m.  
273

### 274 **Agenda Item 9 - Regulations** 275

276 The regulation project submitted to regulations specialist (statute enacted 10/2014) in October  
277 required additional board attention. The Board was behind schedule and recognized they  
278 would need more time to work on the regulations project. They agreed to arrive at 8:30 a.m. to  
279 split into teams for discussion. Dr. Downing was not at the meeting during this discussion, so she  
280 would not be part of this committee.  
281

282 Staff will type up the amendments discussed for the regulations for the Board to review and  
283 approve on Friday.  
284

285 Ms. Terwilliger asked the Board to amend 12 AAC 14.500. PRENATAL CARE (c) At the initial  
286 prenatal visit, the certified direct-entry midwife shall (J) cervical cytology;  
287

288 Ms. Taygan will work on this for the next regulation project.  
289

290 **ON MOTION BY SWANDER, SECONDED BY SCHNEIDER TO FORM A COMMITTEE OF**  
291 **SWANDER, CORRICK, TAYGAN AND SCHNEIDER TO WORK ON REGULATION PROJECT AT**  
292 **8:30 A.M. ON 2-13-15. ALL IN FAVOR, NO NAYS.**  
293

294 **Recess Meeting at 5:17 p.m.**  
295

296 Friday February 13, 2015  
297

298 The Board broke in to two teams to work on regulation wording at 8:30 a.m.  
299

300 Ms. Corrick called the meeting to order at 9:05 a.m. and took roll call. Swander, Schneider,  
301 Taygan and Corrick were all present as was staff Petz. Dr. Downing arrived at 9:08 a.m.  
302

303 Staff confirmed Chief Birt would return to the meeting per their request.  
304

305 Old Business from Thursday, Board deviated to agenda item 8, peer review contract.  
306

307 Both Ms. Swander and Ms. Taygan said they did not think they should use this contract. Staff  
308 explained this is the contract between the state of Alaska and MAA. The Board wants to keep  
309 their prior written agreement and does not read in the regulations where it states they need a  
310 contract.  
311

312 The Board decided to reject the contract presented by the state with the Midwives Association  
313 of Alaska. They noted the regulation states "the board will designate". They choose to make  
314 two motions, one designating peer review and one to reject the proposed state contract with  
315 MAA.

316  
317 **ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER, THE BOARD WILL DESIGNATE AS A**  
318 **PEER REVIEW COMMITTEE THE MIDWIVES ASSOCIATION OF ALASKA WHICH IS THE**  
319 **QUALIFIED ORGANIZATION WITH EXPERIENCE IN CERTIFIED DIRECT-ENTRY MIDWIFERY TO**  
320 **PROVIDE PEER REVIEW TO THE BOARD CONCERNING THE QUALITY OF CARE PROVIDED BY A**  
321 **CERTIFIED DIRECT-ENTRY MIDWIFE AS PER 12 AAC 14.900. ALL IN FAVOR, NO NAYS.**

322  
323 **ON A MOTION BY SCHNEIDER, SECONDED BY DOWNING, WE DECLINE TO USE THIS**  
324 **PROVIDED STATE CONTRACT FOR DESIGNATING A QUALIFIED PEER REVIEW ORGANIZATION.**  
325 **ALL IN FAVOR, NO NAYS.**

326  
327 The Board deviated to discussion with Chief Birt who returned to the meeting at their request.  
328 They asked her to explain a flow chart used between investigations and peer review. Ms. Birt  
329 stated the flow chart presented to her does not reflect the way the division does business. The  
330 investigative process is on the website and was revised about 3 years ago.

331  
332 Ms. Birt said only two programs have a peer review mechanism, chiropractors and midwives.  
333 The smallness of this community (approximately 30 midwives) makes it very difficult for  
334 investigations to investigate without bias. In order to abide by rules that give due process and  
335 you cannot taint the pool.

336  
337 Her understanding for the mechanism of Peer Review is to provide oversight for general  
338 awareness, conduct an audit of births to see if there is a problem. They are not the mechanism  
339 to investigate matters.

340  
341 Ms. Birt explained the investigative process must have authority. A complaint must have  
342 statutory or regulatory authority, such as 08.65.110, "secured a certificate or permit through  
343 deceit, fraud, or intentional misrepresentation" this is something that would be investigated.

344  
345 There could be complaints that come in that are not governed by the statutes and regulations  
346 and those could be reviewed by peer review, if the Board wants them to be forwarded via a  
347 formal request from investigations. ie: "we received a complaint on this date... we do not have  
348 statutory authority to investigate this matter, please look into this and submit your results back to  
349 the board". If this is not happening, they (investigations) can make that happen.

350  
351 Ms. Birt said her concern is that it appears the board wants peer review to do their investigations.  
352 Ms. Corrick said the point is to save investigations money and involve peer review who are the  
353 experts in midwifery. Ms. Schneider asked Ms. Birt if they confer with peer review during an  
354 investigation and how much time do they take to read through charts and documentation. Ms.  
355 Birt said that they are professional interviewers, they collect facts and it is the role of the board  
356 member who is appointed by the governor, to review the case.

357  
358 Dr. Downing asked the Board if they really wanted to involve Peer Review in this process. She  
359 said peer review is protected and anything that is said during peer review is undiscoverable and  
360 protected.

361  
362 Ms. Taygan asked why not contact a board member to review any complaint first. Chief Birt  
363 explained that if the board member vetted a complaint then that person could not participate

364 in any further review of it. The Board is so small you reduce the ability of the Board to have a  
365 quorum to make decisions. It is safer for the Board to allow the investigative department to run  
366 their investigation. If someone contacted a board member, they have no idea if they might be  
367 under investigation. If a board member engages in conversation they engaged in ex parte  
368 communication and have broken the law. She said, let the calls come to the division, don't  
369 engage, it protects the Board from civil liability. Then the investigator contacts the reviewing  
370 board member, asks if they know the person or if they have any conflict of interest. If they do,  
371 then a different board member is contacted.

372  
373 It was asked when it comes to staff reporting technical violations, why can't staff contact a  
374 board member to determine if there is any reason to be concerned? Chief Birt recommended the  
375 Board chair write a letter to the director to ask for a legal opinion on their statutes and  
376 regulations which they are uncertain on how to interpret. When a Board has a question on  
377 interpretation of a law they should seek legal opinion as it protects the Board. If the Board makes  
378 a decision that is not defensible they could potentially be held liable for some action that may  
379 harm someone who could bring civil suit against the Board or board member personally.

380  
381 Angela asked the Board to confirm that if a complaint comes in that is not jurisdictional the  
382 Board wants it to be referred formally to peer review so they can address the matter.

383  
384 The Board recognized the old flow chart should be removed so it does not get addressed again.

385  
386 Break 10:30 a.m. back on record 10:38 a.m.

387  
388 Deviated to schedule meetings.

389  
390 February 25-26, 2016 two day board meeting to be held in Anchorage.  
391 May 11, 2015 Teleconference was scheduled for 12:15 p.m. to 12:45 p.m.

392  
393 The May teleconference it being scheduled to review the draft regulations to approve for public  
394 comment and to hold discussion about the disciplinary action matrix.

395  
396 Task: Staff will forward date and times to the regulations specialist along with the proposed  
397 regulation project.

398  
399 February 25-26, 2016 two day board meeting to be held in Anchorage.

400  
401 Ms. Swander will draft a letter to Chief Birt for investigations (cc to Brian Howes) to formally ask  
402 investigations to ask that any complaint that is not a statute or regulation break to automatically  
403 be sent to peer review.

404  
405 TASK: Staff - Send draft letter to all board members for approval to put on state letterhead

406  
407 Deviated to **Agenda Item 11 - Review Applications for Licensure**

408  
409 Cheryl Corrick, Chair of the Alaska Board of Certified Direct-Entry Midwives call for a motion to  
410 enter executive session in accordance with AS 44.62.310 (c) The following subjects may be  
411 considered in an executive session:

412 (2) subjects that tend to prejudice the reputation and character of any person, provided the  
413 person may request a public discussion;

414 (3) matters which by law, municipal charter, or ordinance are required to be confidential;  
415



416 This is to discuss follow up discussion with the applicant.

417

418 **ON A MOTION BY SCHNEIDER, SECONDED BY TAYGAN, CALL FOR A VOTE TO ENTER**  
419 **EXECUTIVE SESSION PER TO DISCUSS THIS MATTER. ALL IN FAVOR, NO NAYS.**

420

421 Ms. Corrick stated the Alaska Board of Certified Direct Entry Midwives is RESOLVED to enter  
422 executive session. All board members, Iris Caldentey and staff to stay in the room, all public  
423 members to leave the room.

424

425 **Enter Executive Session – Off the record 10:48 a.m. Back on record at 11:06 a.m.**

426

427 The Board determined they should review other applications in Executive Session.

428

429 Cheryl Corrick, Chair of the Alaska Board of Certified Direct-Entry Midwives call for a motion to  
430 enter executive session in accordance with AS 44.62.310 (c) The following subjects may be  
431 considered in an executive session:

432 (2) subjects that tend to prejudice the reputation and character of any person, provided the

433 person may request a public discussion;

434 (3) matters which by law, municipal charter, or ordinance are required to be confidential;

435

436 This is to discuss applications.

437

438 **ON A MOTION BY SWANDER, SECONDED BY DR. DOWNING, CALL FOR A VOTE TO ENTER**  
439 **EXECUTIVE SESSION TO DISCUSS TWO APPLICATIONS. ALL IN FAVOR, NO NAYS.**

440

441 Ms. Corrick stated remaining in the room all board members and staff Petz.

442

443 **Enter Executive Session – Off the record 11:07 a.m. Back on record at 12:50 p.m.**

444

445 **ON A MOTION BY SWANDER, SECONDED BY TAYGAN FOR IRIS CALDENTY TO RETAKE THE**  
446 **NARM AND CERTIFIED DIRECT-ENTRY MIDWIFE LICENSE PENDING PASSING THE NARM,**  
447 **PAYING THE LICENSE FEE, SUBMISSION OF CURRENT QUALIFYING CERTIFICATES AT TIME OF**  
448 **LICENSURE FOR GROUP B STREP AND THE IV THERAPY. ALL IN FAVOR, NO NAYS.**

449

450 Motion passed unanimously.

451

452 Task: Staff will provide letter outlining the requirements for her application to be complete.

453

454 The Board reviewed the application for Juniper Lanmon and spoke with her. The Board is  
455 satisfied except for the evidence of the required 15 continuity of care births. They have seen  
456 evidence of 6 of them, and require evidence of 9 more continuity of care births to be  
457 completed prior to licensure.

458

459 **ON A MOTION BY SCHNEIDER, SECONDED BY TAYGAN FOR JUNIPER LANMON APPROVE**  
460 **HER APPLICATION PENDING RECEIVING 9 CONTINUITY OF CARE BIRTHS. ALL IN FAVOR, NO**  
461 **NAYS.**

462

463 Motion passed unanimously.

464

465 Task: Staff will provide letter outlining the requirements for her application to be complete.

466

467 Samantha Keller application by exam.

468  
469 **ON A MOTION BY SWANDER, SECONDED BY TAYGAN TO ACCEPT AND APPROVE**  
470 **SAMANTHA KELLER APPLICATION FOR CERTIFIED DIRECT-ENTRY MIDWIFE PENDING RECEIPT**  
471 **OF THE \$1750.00 LICENSE FEE. ALL IN FAVOR, NO NAYS.**  
472

473 Motion passed unanimously.

474  
475 Task: Staff will issue license once fee is paid.

476  
477 Two apprentice permit applications were discussed. The Board reviewed an applicant who had  
478 been issued an apprentice permit by staff, before it was determined by legislative audit that it is  
479 the Board who is to approve apprentices for a permit.

480  
481 **ON A MOTION BY SWANDER, SECONDED BY DR DOWNING TO ACCEPT AND APPROVE**  
482 **APPRENTICE PERMIT # 95 FOR MARY YANAGAWA. TAYGAN ABSTAINED, REST VOTED YES.**  
483

484 Motion passed with one abstained.

485  
486 **ON A MOTION BY TAYGAN, SECONDED BY SCHNEIDER TO APPROVE THE APPRENTICE**  
487 **PERMIT APPLICATION FOR COURTNEY DONNELLAN. ALL IN FAVOR, NO NAYS.**  
488

489 Motion passed unanimously.

490  
491 Lunch break 1:02 p.m. Back on record 1:45 p.m.

492  
493 Role Call: Corrick, Swander, Schneider, Downing, Taygan and staff Petz

494  
495 **The Board deviated back to agenda item 9 Regulations.**  
496

497 The Board is adding the below regulation changes to the prior regulation project submitted and  
498 reviewed at the October 2014 board meeting. It was noted there is one correction needed on  
499 that project. The spelling of the word abruption as stated under the proposed new scope of  
500 practice 12 AAC 14.150 (c)(9) has bleeding with evidence of placenta previa or placenta  
501 abruption.

502  
503 Due to changes in statute AS 08.65.140 enacted on 10/23/2014 the Board reviewed the  
504 regulatory references in the regulations. Staff ran a find function and located all the areas  
505 where the statute AS 08.65.140 was referenced in the current regulations. The Board discussed  
506 changes to statute AS 08.65.140 must be addressed in the regulations as well as address the  
507 proposed new scope of practice regulation 12 AAC 14.150 which should now be referenced in  
508 the current regulation project.

509  
510 In keeping with regulatory drafting policy; Words in **boldface and underlined** indicate language  
511 being added; works [CAPITLAIZED AND BRACKETED] indicate language being deleted.  
512 Complete new sections are not underlined.

513  
514 Under scope of practice:

515  
516 12 AAC 14.150 (a) it was decided that in addition to CNM to also include advanced practice  
517 registered nurse (APRN) as that is the new language being proposed in the profession of nursing.

518

519 Under 12 AAC 14.150 (a)(1) remove the words "a positive titer" and replace with the word  
520 "isoimmunization" and end with the word herpes by striking the words "in the first trimester or  
521 active herpes"

522  
523 Under 12 AAC 14.150 (b) strike the words "In consultation with a physician, ANP or CNM" and  
524 begin with "A certified... "

525  
526 Under 12 AAC 14.150 (c)(4) has Rh disease add the words "with an affected fetus";

527  
528 Under 12 AAC 14.150 (c)(9) has bleeding with evidence of placenta previa add the words "or  
529 placental abruption";

530  
531 Under 12 AAC 14.400(b)(4) change (D) to (B) and correct spelling on acronym NRP.

532  
533 **12 AAC 14.500. PRENATAL CARE.**

534  
535 (b) At the initial prenatal visit, the certified direct-entry midwife shall recommend that the client  
536 undergo a physical examination as required in AS 08.65.140 (1) to screen for health problems  
537 that could complicate the pregnancy or delivery and that includes a review of the laboratory  
538 studies required in (c) of this section. The certified direct-entry midwife shall obtain a signed  
539 written consent from the client reflecting the client's informed choice regarding the  
540 recommended physical examination and retain the consent in the client's record.

541  
542 • Clarify 12 AAC 14.500. PRENATAL CARE. (b) the statute reference AS 08.65.140 should  
543 now read AS 08.65.140(1)

544 (f) The certified direct-entry midwife shall comply with [~~AS 08.65.140(B)~~] **{change to} AS**  
545 **08.65.140(2)** in obtaining a signed informed consent [~~FOR HOME DELIVERY~~] {add words} **before**  
546 **the onset of labor**

547  
548 • Clarify: Home delivery is old verbiage and today women have 'out of hospital' births,  
549 meaning in homes or in birth centers. By adding the words **before the onset of labor** it  
550 clarifies when to have the signed informed consent.

551 (i) If, following the consultation set out in (h) of this section, the physician recommends referral for  
552 immediate medical care the certified direct-entry midwife shall refer the client for immediate  
553 medical care. A referral for immediate medical care does not preclude the possibility of [~~A~~  
554 ~~HOME~~] **out of hospital** delivery if, following the referral, the client does not have any of the  
555 conditions set out in AS 08.65.140[(~~d~~)]**(4) and 12 AAC 14.150**

556  
557 • Clarify: change to newer verbiage "out of hospital", change old statute to new statute  
558 reference AS 08.65.140(4) and add new scope of practice regulation 12 AAC 14.150

559 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

560  
561 **12 AAC 14.510. INTRAPARTUM CARE.** (d) A consultation or referral as required in (c) of this section  
562 does not preclude the possibility of a [home delivery] **out of hospital** if, following the consultation  
563 with a physician or referral for medical care, the client does not have any of the conditions set  
564 out in AS 08.65.140[(D)] **(4) and 12 AAC 14.150**

565 • Clarify: change to newer verbiage "out of hospital", change old statute to new statute  
566 reference AS 08.65.140(4) and add new scope of practice regulation 12 AAC 14.150

567 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

568 **12 AAC 14.520. POSTPARTUM CARE.**

569 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

570 **12 AAC 14.530. INFANT CARE.**

571 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

572 **12 AAC 14.540. RECORDS.**

573 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

574 **12 AAC 14.550. MEDICAL BACK-UP ARRANGEMENTS.**

575 **Authority:** AS 08.65.030 AS 08.65.140 AS 08.65.190

576

577 12 AAC 14.570 (6) pitocin, administered by intramuscular injection or [INTRAVENOUS DRIP]

578 intravenously, for [CONTROL] the prevention or treatment of postpartum hemorrhage;

579

580 

- Clarify: reflect current standard of care

581 12 AAC 14.570 (7) methergine, administered orally or by intramuscular injections, [IN AN

582 EMERGENCY SITUATION] for the prevention or treatment of [CONTROL] postpartum hemorrhage

583 [THAT WAS NOT CONTROLLED BY THE ADMINISTRATION OF PITICON].

584

585 

- Clarify: reflects current standard of care

586 12 AAC 14.570 (8)lactated ringers, plain or with dextrose five percent, or normal saline, up to

587 [2000 MILLILITERS] 2 liters administered intravenously to a client who would benefit from hydration

588

589 

- Clarify: correcting grammar

590 **12 AAC 14.600. EMERGENCY PRACTICES.** In addition to the practices permitted in [~~AS 08.65.140(E)~~

591 ~~AND (F)~~ {add} 08.65.140(4), 12 AAC 14.150 and 12 AAC 14.560, in an emergency a certified

592 direct-entry midwife who has documented training and skills demonstrating competence as set

593 out in 12 AAC 14.560 may

594

595 (1) perform an episiotomy; and

596 (2) [ADMINISTER PITOCIN, METHERGINE, EPINEPHRINE, AND DIPHENHYDRAMINE AS DESCRIBED

597 IN 12 AAC 14.570(6),(7), (10), AND (11)] attend and/or deliver a woman whose condition

598 is outside the scope of practice in 08.65.140(4)

599

600 

- Clarify: repeal all of (2) administer pitocin, methergine, etc.... and change in the event

601 of an emergency a CDM may provide necessary services for an imminent delivery to a

602 woman who would be outside of the scope of practice.

603

604 **Authority:** AS 08.65.030 [~~AS 08.65.140~~] AS 08.65.190

605

606 **12 AAC 14.610. EMERGENCY TRANSPORT PLAN**

607

608 **Authority:** AS 08.65.030 [~~AS 08.65.140~~] AS 08.65.190

609

610 

- Clarify the board does not think this statute reference applies here.

611 **12 AAC 14.900. PEER REVIEW.**

612

613 (D) had any of the complications or conditions listed in AS 08.65.140[(d)(1) — (17)] {add} **(4) and**  
614 **12 AAC 14.150** if the newborn was delivered by a certified direct-entry midwife ~~in accordance~~  
615 ~~with AS 08.65.140(e) or (f)~~

616  
617 **Authority:** AS 08.65.030 AS 08.65.110 {ADD} **AS 08.65.140**

618  
619 **ON A MOTION BY SWANDER, SECONDED BY TAYGAN, TO APPROVE THE REGULATION**  
620 **PROJECT TO BE PREPARED FOR PUBLIC COMMENT AS AMENDED AND READ ABOVE.**  
621 **ALL IN FAVOR, NO NAYS.**

622  
623 TASK: Staff forward regulation project to Mr. Maiquis, requesting it be ready for the Board to  
624 review on May 11, 2015 for a teleconference. Also, run a word search for "home delivery".

625  
626 The Board took a moment to offer a certificate of appreciation to Dr. Downing for her eight  
627 years on the board.

628  
629 Deviated to **Agenda Item 10 - Course Provider Review**

630  
631 The Board is required to review approved organized course of study providers biennially per 12  
632 AAC 14.200. COURSE OF STUDY REQUIREMENTS (e). They are to determine if the course of study  
633 on the list continues to meet the requirements as outlined in 12 AAC 14.200. If they determine  
634 they no longer met the requirements they would be removed from the list but would never be  
635 able to be reconsidered.

636  
637 Staff secured complete educational outlines from all three providers and asked them to  
638 document they are meeting the Alaska regulations under 12 AAC 14.200. COURSE OF STUDY  
639 REQUIREMENTS as well as documenting 12 AAC 14.200(g) a course of study must include at a  
640 minimum a comprehensive mid-course of study examination and a final comprehensive  
641 examination that covers all of the topics in (a) of this section.

642  
643 The three course providers now have their educational programs documented and the Board  
644 will only ask they submit documentation for any changes to their course content in the future.

645  
646 **ON A MOTION BY DR. DOWNING, SECONDED BY SWANDER, TO APPROVE ALL THREE**  
647 **PROGRAMS, VIA VITA, ANCIENT ARTS AND MIDWIFE TO BE. ALL IN FAVOR, NO NAYS.**

648  
649 Task: Staff will send the re-approval letter to all three of the course of study providers and  
650 update the website.

651  
652 **Agenda Item 12 - Correspondence**

653  
654 Vicki Penwell asked to be considered as a course provider, staff had told the law did not allow  
655 the board that option, all new courses are required to be MEAC approved. She is in the process  
656 of having her course approved by MEAC. No follow up required.

657  
658 **Agenda Item 13 - Annual Report**

659  
660 The Board did not have time go over the Annual report. Ms. Swander will complete the  
661 Narrative Statement based on the minutes for this fiscal year.

662  
663 Ms. Schnieder proposed a sub-committee of two to work on future regulations and disciplinary  
664 matrix to bring ready to share at the next meeting. They will consider requiring preceptor be

665 required to have a license in good standing. Hemmorage guidelines/Uterotonic agents,  
666 disciplinary matrix and all of those things to get farther ahead.

667  
668 Dr. Downing left the meeting at 2:48 p.m.

669  
670 The Board determined they were ready to add more to their regulation project as they  
671 had discussed Peer Review 12 AAC 14.900 (c)(1) for summaries be January 1<sup>st</sup> to  
672 December 31<sup>st</sup> instead of April 1 to March 31. They discussed other dates with Susie  
673 Terwilliger and she was not comfortable in making any change to the date required to  
674 be submitted unless she could first speak with Bruce Ackerman with MANA stats. It was  
675 determined that changing the dates for the summaries to a calendar year is the goal of  
676 MAA. Keeping the date midwives are required to submit to peer review will stay as May  
677 1<sup>st</sup>. Staff will continue to send the Peer Review letter to licensees in March each year.

678  
679 Ms. Swander read the entire proposed changes for the peer review regulation as the Board  
680 would like it to read. It is noted this motion does not include what would be removed from 12  
681 AAC 14.900. They want this to be included with the current regulation project.

682  
683 **ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER TO CHANGE THE REGULATIONS IN**  
684 **THE FOLLOWING**

685  
686 12 AAC 14.900. PEER REVIEW. (a) The board will designate, as a peer review committee, a  
687 qualified organization with experience in certified direct-entry midwifery to provide peer review  
688 to the board concerning the quality of care provided by a certified direct-entry midwife.  
689 (b) In the agreement for peer review services, the board will require the organization providing  
690 peer review to

691 (1) maintain confidentiality of medical records as required by law;

692 (2) document that all certified direct-entry midwives have participated in Confidential  
693 Peer Review according to MAA By-laws;

694 (3) review those summaries of births or other records submitted under (c) (2) and (3) of  
695 this section;

696 (4) review at the request of the board any case or summary of birth relating to care by a  
697 certified direct-entry midwife,

698 (5) maintain records of the organization related to the review;

699 (6) provide communication to the board and division investigative staff, as requested by  
700 the board or division investigative staff; and

701 (7) report to the board or division investigative staff on activities and results of the peer  
702 review conducted under this section, including any recommendations for disciplinary  
703 action.

704 (c) A certified direct-entry midwife shall submit to the board or, if an organization has been  
705 designated under (a) of this section, to that organization the following information:

706 (1) a copy of an annual summary of primary births attended by the certified direct-entry  
707 midwife or assisting births that the certified direct-entry midwife is documenting for purposes of  
708 re-licensure, during the 12-month period that began January 1 of the preceding year; the copy  
709 must be submitted on or before May 1 of each year;

710 (2) all records required under 12 AAC 14.540 as requested by the board or the organization  
711 providing peer review; and

712 (3) within 14 days after the delivery or transfer of care all records required under 12 AAC  
713 14.540 for any case in which a client for whom the certified direct-entry midwife had primary  
714 responsibility in Alaska

715 (A) died;

716 (B) required emergency hospital transport;

717 (C) required intensive care within the first week after birth; or  
718 (D) had any of the complications or conditions listed in AS 08.65.140(4) and 12 AAC  
719 14.150 if the mother was attended in active labor or the newborn was delivered by a certified  
720 direct-entry midwife.

721 (d) Failure to comply with the requirements of this section is grounds for disciplinary sanction  
722 under AS 08.65.110(6).

723  
724 **Authority:** AS 08.65.030 AS 08.65.110 AS 08.65.140

725  
726 **ALL IN FAVOR, NO NAYS.**

727  
728 Note: Dr. Downing was not in attendance for this motion.

729  
730 **ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER THAT THE PROPOSED PEER**  
731 **REVIEW REGULATIONS THAT WERE JUST READ GO OUT FOR PUBLIC COMMENT.**  
732 **ALL IN FAVOR, NO NAYS.**

733  
734 Note: Dr. Downing was not in attendance for this motion.

735  
736 Task: Staff will forward all regulations to the regulations specialist.

737  
738 Break off the record 3:11p.m. Back on record 3:15 p.m.

739  
740 The Board discussed continuing education certificates and process for approval. When  
741 a course does not meet 12 AAC 14.430 APPROVED CONTINUING EDUCATION  
742 PROGRAMS, there is an allowance for the board to review programs under 12 AAC  
743 14.430 (d) A continuing education program not sponsored by one of the organizations  
744 listed in (b) of this section must be individually approved by the board. A course renewal  
745 request should be submitted to the board in time to all review prior to submitting a  
746 renewal application.

747  
748 Staff stated certificates can reflect who has provided the course (sponsored it) and  
749 reflect on the certificate who reviewed and approved the educational content.

750  
751 Staff informed the Board MAA certificates received with renewal applications still do not  
752 reflect the date the course was completed. Ms. Schneider said that they were just trying  
753 to use up all the old certificates which had been printed before revising them.

754  
755 The Board may consider having future applications reviewed via a secure website mail ballot.  
756 Each board member would be required to review the entire application independently and  
757 respond via a mail ballot.

758  
759 Nominations for the one year terms for the chair and secretary.

760  
761 **ON A MOTION BY SWANDER, SECONDED BY SCHNEIDER, NOMINATE CHERYL CORRICK TO BE THE**  
762 **CHAIRPERSON FOR THE NEXT YEAR. ALL IN FAVOR, NO NAYS.**

763  
764 **ON A MOTION BY SCHNEIDER, SECONDED BY TAYGAN BY TO NOMINATE JENNIFER SWANDER TO BE**  
765 **THE SECRETARY FOR THE NEXT YEAR. ALL IN FAVOR, NO NAYS.**

766  
767 Ms. Corrick adjourned the meeting at 3:45 p.m.

768

769  
770  
771  
772  
773  
774  
775  
776  
777  
778  
779  
780

Respectfully Submitted:



Renee Hoffard, Licensing Examiner



Cheryl Cerrick, CDM Chair

10-30-15

Date