

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

**MINUTES OF MEETING**

**SEPTEMBER 11, 2008**

By authority of AS 08.65.020 and in compliance with the provisions of AS 44.62, Article 6, a scheduled meeting of the Board of Certified Direct-Entry Midwives was held September 11, 2008 in the Atwood Building, 550 W 7<sup>th</sup> Ave., Suite 1760, Anchorage, Alaska and 333 Willoughby Ave, Conference Room A, Juneau, Alaska.

**September 11, 2008**

**Agenda Item            **1****

**Call to Order/Roll Call**

The meeting was called to order by Judy Weske, Licensing Supervisor at 11:00 a.m.

Present, constituting a quorum of the board were:

Holly Steiner, CDM, Wasilla  
Barbara Norton, CNM, Anchorage  
Mila Cosgrove, Public Member (participating from Juneau)  
Cheryl Corrick, CDM, Fairbanks

Peggy Downing, MD, Wasilla was not able to attend due to a prior commitment.

Staff present: Judy Weske, Licensing Supervisor

Public Present in Anchorage: Susan Terwilliger, Christine Olson, Rebecca McKimney, Laura Gore, Tammy Smith, and Judi Davidson.

**Agenda Item            **2****

**Elect New Chairperson**

On a motion made by Cosgrove, seconded by Norton and carried unanimously it was

**RESOLVED TO ELECT HOLLY STEINER, CDM AS CHAIRPERSON**

**Agenda Item 3**

**Review/Amend Agenda**

On a motion made by Cosgrove, seconded by Norton and carried unanimously it was

**RESOLVED TO APPROVE THE AGENDA**

**Agenda Item 4**

**Ethics Reporting**

All members present reported that they had no ethics violations or potential violations.

**Agenda Item 5**

**Review/Approve Minutes**

On a motion made by Cosgrove, seconded by Norton and carried unanimously it was

**RESOLVED TO APPROVE THE SEPTEMBER 6-7, 2007 AND FEBRUARY 25, 2008 MINUTES AS WRITTEN.**

**Agenda Item 6**

**Investigative Report**

Susan Winton presented the investigative report. Susan advised that Case Number 3400-08-002 was closed with a non-disciplinary letter of advisement. A letter was also sent to the preceptor advising the importance of following statutes and regulations. Susan advised the board's statutes and regulations do not provide for action against a preceptor if that preceptor's apprentice is not in compliance with statutes and regulations.

The on-going complaint involves Medicaid violations and Susan is working with another agency on that case.

Susan offered to do a presentation of the investigative process at the next meeting for the new board member.

Susan updated the board on an omnibus bill that she has drafted for the division. The division is attempting to address loopholes in statute that affect all licensing boards and especially health care boards. The division hopes to have the bill introduced during the 2009 legislative session.

**Agenda Item 7**

**Public Comment**

Public present but no public comment offered. The board used the public comment period time to review the application of Rebecca McKimmey for certification by examination.

On a motion made by Cosgrove, seconded by Corrick and carried unanimously it was

**RESOLVED TO APPROVE THE APPLICATION FOR REBECCA MCKIMMEY FOR CERTIFICATION BY EXAMINATION PENDING PASSING THE NARM EXAMINATION, THE STATE LAW QUESTIONNAIRE AND PAYMENT OF THE LICENSE FEE.**

**Agenda Item 8**

**Review Proposed Regulations**

On a motion made by Cosgrove, seconded by Norton, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.200(c)(2) for public notice with the understanding that we will modify the existing form to exclude the long list of practices so that is a simpler process for the applicant.**

Clinical to be signed by preceptor and didactic by course of study provider.

On a motion made by Norton, seconded by Cosgrove, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.200 for public notice.**

On a motion made by Cosgrove, seconded by Norton, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.540(a) for public notice as written.**

On a motion made by Cosgrove, seconded by Norton, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.140 for public notice.**

On a motion made by Cosgrove, seconded by Corrick, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.400(b)(3), 14.460(a) and 14.470(b)(3) for public notice.**

On a motion made by Norton, seconded by Cosgrove, and carried unanimously it was

**RESOLVED TO approve 12 AAC 14.130 for public notice.**

The board recessed at 12:50 p.m.

Back on the record at 1:30 p.m.

Present, constituting a quorum of the board were:

Holly Steiner, CDM, Wasilla, Chairperson  
Barbara Norton, CNM, Anchorage  
Mila Cosgrove, Public Member (participating from Juneau)  
Cheryl Corrick, CDM, Fairbanks

Staff present: Judy Weske, Licensing Supervisor

Susan Winton was present to recap with the board why she recommended the board define the term "deliver". AS 08.65.140(d) addresses circumstances when a certified direct-entry midwife may not knowingly deliver a woman with certain conditions present. Webster's definition of "deliver" means birth of the baby. The reason Susan Winton had asked the board to define deliver was because we had an alleged violation where a midwife was providing care for an expectant mother who had at one point learned her patient had a history of cardiac issues; the midwife didn't transfer care and continued to provide care up to and including the point where the woman went into labor; there was a complication in labor and the woman was transported to the hospital and the birth occurred in the hospital. The board's statutes and regulations do not define "to deliver" so legally can we prove a violation since the midwife did not "deliver" the baby by Webster's definition which is the "birth"; the baby was delivered in the hospital by a physician. The reason Susan had brought this issue to the board's attention at their last meeting was to determine the board's intent regarding "to deliver". If the board is satisfied with Webster's definition of "deliver" which is birth of the baby and midwives may provide prepartum care all the way up to the actual birth then that would be a situation where you don't need to further define it. If the board wants to address situations where there's health conditions the mother may have and midwives need to transfer care at some point during the pregnancy, then that's what the board would look at to determine at what point during the pregnancy the midwife is required to transfer care.

Holly says at times midwives collaborate with physicians and the board is worried that if they define deliver it will cause problems in a different way. Barbara Norton can think of three situations where midwives took care of situations where they shouldn't have.

Susan says she recommends the board write a regulation and shape their definition of "to deliver" for purposes of AS 08.65.140(d). The board can define it to include the collaborative agreement, etc. If the board writes a regulation it still has to go through the Department of Law for approval.

Laura Gore asked Susan Winton if there had been a definition of "to deliver" would that have helped her in the example she had given the board. Susan advised it would have.

Susan recommended doing a word search of the statutes and regulations to confirm there is no conflict otherwise the language proposed by Mila would be specific to as referenced in AS 08.65.140(d).

Mila says she understands the board can narrowly define the term deliver, but she wonders if the board could also accomplish the goal by defining "deliver" means that a certified direct-entry midwife is the primary practitioner managing active labor, second stage, and third stage. In the example Susan had given, that midwife was the "primary" person on the spot; if we said "primary" and then a midwife is collaborating with a physician or a certified nurse midwife in another case the certified-direct entry midwife

would not be the "primary" practitioner. Susan said in Mila's language, it would be applicable to where the term "to deliver" is used.

Cheryl Corrick said she is leery of putting anything in regulation that implies there is going to be collaboration. She said she is thinking about midwives who live in hostile areas where there is no collaboration; the midwife is providing care for a woman who states that she wants to stay home as long as possible. In the situations where the midwife has physician collaboration then you're covered, but if the midwife is in an area where they can't get collaboration then the midwife isn't covered. Cheryl doesn't want collaboration mentioned in regulation.

Susan said if you have someone walking a fine line with regulations, there is no way you are going to prove what they "intended" to do. Intent is extremely difficult to prove. Holly asked can you require that they document that they intend to transport at a certain time and Susan responded "yes".

Susan said if the board goes with Mila's suggested language "'deliver' means that a certified direct-entry midwife is the primary practitioner managing active labor, second stage, and third stage" and the meaning is not tied directly to AS 08.65.140, that she recommends that a word search of statutes and regulations be conducted to ensure the meaning doesn't affect other regulations.

On a motion made by Cosgrove, seconded by Norton, and carried unanimously it was

**RESOLVED TO approve for public notice amendments to 12 AAC 14.990 to read: "'deliver' means that a certified direct-entry midwife is the primary practitioner managing active labor, second stage, and third stage".**

**Agenda Item 9      Discuss Amending 12 AAC 14.550 (Medical Back-Up Arrangements) when Conditions Listed in AS 08.65.140(d)(1)-(6), (11), (15) are Present**

After reconsidering this topic, the board felt it was a nonissue and staff will advise the board investigator to see if topic needs further clarification.

**Agenda Item 10      Peer Review Discussion**

The board wants to have a Memorandum of Agreement that designates the Midwives Association of Alaska (MAA) as the agency to conduct peer review. MAA can choose how they randomly select licensees for review but each chart must be reviewed.

**Agenda Item 11      FY 08 Annual Report**

Mila presented the draft FY 08 Annual Report. The board reviewed the report and the goals and objectives.

On a motion made by Norton, seconded by Cosgrove and carried unanimously it was

**RESOLVED TO APPROVE THE FY 08 ANNUAL REPORT AS WRITTEN.**

**Agenda Item 12                      Budget Report**

The board reviewed the budget report. The board was concerned about dropping the licensing fee from \$2,088 to \$500.00. In addition, other fees were being reduced as well. The board wondered if the reduction in fees would cause problems down the road and result in a fee increase later on. After much discussion the board accepted the fees as proposed.

**Agenda Item 13                      Review the 2009-2010 Draft Renewal Form and Self-Study Examination**

The board amended question 14 on the self-study examination to read:

Amend question 14 to read: What is the maximum amount of IV fluids a certified direct-entry midwife may give to client who would benefit from hydration during labor?

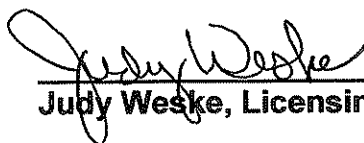
**Agenda Item 14                      Final Comments/Wrap Up/Set Meeting Dates**

The meeting dates will be March 5-6, 2009 in Juneau and August 20-21, 2009 in Anchorage.

Alternate meeting dates: September 10, 2009 one day teleconference.

The board having no other business adjourned the meeting at 3:45 p.m.

**Respectfully Submitted:**



\_\_\_\_\_  
Judy Weske, Licensing Supervisor

**Approved:**

  
\_\_\_\_\_  
Holly Steiner, CDM, Chairperson

May 5, 2009  
\_\_\_\_\_  
Date