



Attendance

Committee

Jenna Bly (Chair)
Disha Alam
Ana Maria Barillas
Sylvie Beaudry
Sara (Sadie) Booth
Aiofe Chamberlaine
Emily Eby
Celine Goodrich
Rebecca Hautala
Jenni Huntly
Natalie Kirby
Katie Lyons
Andrea Mills
Melanie Mahrt-Smith
Allison Rigney
Stephanie Zaheer

Staff

Anna Ianovskaia
Rochelle Miller (recorder)

Regrets

Leanne Horvath

Land Acknowledgment/Reconciliation Reflection

J. Bly led the land acknowledgment and reconciliation reflection.

1. Welcome

Anna Ianovskaia introduced Rochelle Miller, Administrator for the Policy & Communications department, who will be assisting the lead Employee Midwives WG policy analyst to support meetings moving forward.

2. Agenda Review and Approval

A. Chamberlaine requested to allot time on the agenda to discuss funding issues in the set-up of their EMCM.



The agenda was approved as amended.

MOVED: J. Huntly

SECONDED: S. Booth

CARRIED.

3. Approval of April 10, 2023 and November 13, 2023 meeting minutes

The minutes were approved as circulated.

MOVED: J. Huntly

SECONDED: S. Booth

CARRIED.

4. Scope/CMO legislation change

J. Bly led discussions regarding ongoing discussions around midwifery scope and legislative change.

The most recent update from the College of Midwives of Ontario (CMO) occurred on December 6th. Deborah Bonser, Quality and Risk Management Specialist at the AOM is the lead for meetings with the College and should be contacted for follow-up questions. Following the Prescribing Powers campaign, during which AOM encouraged midwives to contact the Ministry to urge them to do away with prescribing lists and allow midwives to prescribe to full scope, Ministry provided a summary of the public consultation. Generally feedback was positive – the regulatory changes have been approved and will be administered in the coming months.

The WG discussed the pending changes to the drug regulation. Members noted the importance of mifegymiso being approved for miscarriage management and its priority in this climate. Members shared that often it feels easier to manage medical abortion than miscarriage. Members wondered if the changes would make sending prescriptions directly to the pharmacy easier and shared examples from local communities. The AOM continues to raise awareness and issue of discrepancies in Ministry of Health's direction regarding this issue.

Members discussed ongoing activities in the landscape of midwifery provision of abortion care. R. Hautala and Liz Darling are collecting data on midwives providing abortion in Ontario, to be completed in April 2024. The study focuses on practical application of midwives providing care and what is special about it. The issue and data findings from the study will be brought to MSIC at a future date. As midwives have been working with expanded scope in many areas now, this is not a new thing and is something midwives have been doing. The research will have good data that those collaborating with midwives want midwives to be independent in providing this care.



The AOM has joined a Coalition of regulated healthcare providers who are mobilizing to advocate for regulatory changes regarding scope restrictions. In addition, CAM's CART project is working on a national abortion framework. AOM leadership are part of the group's Steering Committee. National mobilization is occurring as Quebec midwives navigate the recent approval of myfegymiso.

5. Employee Working Group representative to the Midwifery Sustainability Project Steering Committee

J. Bly is acting as official representative for this work group at the MSP-SC. The MSP-SC will undergo additional Terms of Reference changes to include participation from birth centre employee midwives.

6. New South East Grey CHC EMCM

Recorders Note: D. Alam joined the meeting at 10:43 am.

Katie Lyons and Emily Eby are running the new EMCM at the South East Grey Bruce CHC. The program is just getting off the ground and the members took time to share their experiences. The CHC is supportive of this program. Currently members are navigating what protocols are needed and where to start. This is an iterative process.

A. Ianovskaia encouraged members to reflect on which resources would be helpful to develop member support perspective. Members will circulate draft protocols to receive feedback from the group.

Recorders Note: C. Goodrich joined the meeting at 10:57 am.

A. Chamberlaine shared an issue at their EMCM. Because they are an incorporated not-for-profit, EMCM has been asked to do an independent clinical audit to ensure that funds are only going to clinical care. The accounting audit is costly and occurs on an annual basis, and is a significant barrier to operations. The member is navigating a creative solution to navigate the scenario but warned midwifery groups considering to go the not-for-profit route to be independent from CHCs. S. Booth offered to share experiences offline regarding not-for-profit incorporation.

7. Recruiting Midwifery Clients for Client Café

A. Ianovskaia provided an update regarding planning underway for Client Café. Midwives are asked to share information about the CIHR grant-funded event through their networks.

8. Negotiations Update



J. Bly and A. Ianovskaia provided an update regarding Negotiations. There is no substantial update as discussions with Ministry are ongoing, particularly where to land regarding the compensation issue. The Joint Compensation Study is part of the HRTO processes and is an outstanding order that has direct implications for compensatory elements within Negotiations.

9. BORN Integration

J. Bly provided background information about BORN integration issues pertaining to employee midwives for newer WG members. Some groups have integrated, while others have not. The landscape has been challenging as many EMC M programs have made their own internal systems to track their statistics.

AOM perspective is that BORN integration, when done right, can improve accuracy of data and stats and demonstrate midwifery outcomes. Members noted that Indigenous midwifery data is not tracked through BORN, given longstanding historical issues with trust and integrity pertaining to Indigenous data collection. Diane Simon, Indigenous Midwifery policy analyst at the AOM, is working on leading work pertaining to Indigenous Midwifery data governance.

10. Comprehensive tracking of Employee midwives

J. Bly led a discussion regarding resources for the Employee Midwives WG. The AOM will create a landing page on AOM website, where templates and protocols will be stored. Page will be managed by R. Miller, Administrator for P&C. Members discussed concerns around confidentiality, and wanting to manage how much information was shared re: contact information.

ACTION: AOM staff to create a landing page for Employee Midwives WG.

11. JCS Updates

This update was provided earlier by A. Ianovskaia as part of agenda item 8 – Negotiations update.

12. Short-term coverage for EMC Ms

Non-MPG midwives are requesting access to an employee midwives' locum pool in order to see relevant job postings. This should be an opt-in model.

13. Lab Status Change

J. Bly inquired as to whether an update is forthcoming regarding changes to laboratories and diagnostics branch. The issue is being addressed at the Midwifery Services and Integration Committee (MSIC) table and there is no update at this time.



Upcoming meeting:

The next meeting, to be held Spring 2024, will be determined by a poll sent to the WG.

Recorder's note: The meeting concluded at 11:58 am.