



Calendar

May 2015-April 2016

Annual Report 2014



Association of
Ontario **Midwives**
Delivering what matters.

2014-2015 AOM Board of Directors

Front row (left to right): Madeleine Clin (Secretary), Jasmin Tecson (South East), Lisa M. Weston (President), Jackie Whitehead (Treasurer). Back row (left to right): Nicole Roach (West), Anne Wilson (South West), Genia Stephen (East), Tracy Franklin (Member at Large), Elizabeth Brandeis (Vice-president), Kelly Graff (North), Rebecca Carson (Member at Large), Esther Willms (South Central).

Crafting a new vision for midwifery in Ontario

As regulated midwifery in Ontario enters its third decade, there is much to be proud of. There are 740 midwives providing care in 77 communities. Last year, midwives attended approximately 19,000 births in homes, hospitals and the province's three midwifery-led birth centres. Our clients have lower rates of C-sections, episiotomies, forceps and vacuum deliveries than the provincial average and typically have shorter hospital stays. Clients value the informed choice, continuity of care and choice of birthplace that midwifery offers and report high levels of satisfaction.

Midwifery and midwives have made significant gains since the profession became regulated and publicly-funded in 1994. But where do we go from here? Twenty years from now, what role will midwives play in the province's maternal/newborn care system?

The answers to these questions and the impact they will have on the health of women and babies is far too important to be left to chance.

Our health-care system is currently experiencing extreme budget pressures, inefficiencies and high rates of intervention in maternity care. Obstetricians who are highly trained to manage risk are the main workforce for low-risk obstetrics that can be done by family physicians and midwives.

The maternal/newborn care system we have now isn't sustainable. This is an ideal time for midwives to do a re-think. We need to challenge status quo



thinking and figure out how the province can use its scarce resources most effectively and ensure the best clinical outcomes for Ontarians.

We have a vision for midwifery as the normative choice of care for Ontarians. Every woman will have a midwife and some will need a doctor, too. We see a critical role for obstetricians, but one that focuses on caring for women with high-risk pregnancies, not those whose pregnancies are low risk. We are also advocating for a paradigm shift in the provision of maternal newborn care in Aboriginal communities. The resurgence of Aboriginal midwifery is critical to the provision of high-quality, culturally appropriate care for Aboriginal families.

The province is at a crossroads where future decisions regarding health human resource planning must be made. A plan for the provision of low-risk maternal newborn care is needed now so the government can make the right investments for the long-term sustainability of our health-care system. The needs of childbearing women and clients, their newborns and their communities must be at the forefront of this decision-making. We call on the government to support midwives to play the fullest role possible in transforming our health-care system.

Lisa M. Weston
AOM President



Greetings from the Executive Director

It's been another busy and productive year for the AOM and Ontario midwives as we've worked together to advance our strategic objectives for the profession and maternal and newborn health in Ontario.

In collaboration with the National Aboriginal Council of Midwives, and with the support of Aboriginal stakeholders and leaders, including Chiefs of Ontario, the AOM successfully advocated for funding to increase access to Aboriginal midwifery in Aboriginal communities.

We also succeeded in securing government funding to cover lab, ultrasound and physician fees for midwifery clients without health insurance.

Midwives celebrated an important first victory in their pay equity application when they successfully won the right to have the entire application (representing 20 years of evidence) heard by the Human Rights Tribunal of Ontario.

Midwives in their first five years of practice, midwives in late career and midwives trying to balance family responsibilities can face unique challenges. In 2014, midwives led focus groups and peer discussion to gain greater insight into the lives of midwives at all points of the career spectrum. The AOM will be using the recommendations to determine what supports

are needed to ensure all midwives can optimize their contributions in the provision of health care.

I'd like to thank all our members for their hard work and ongoing commitment to midwifery and the clients and families that you care for each and every day (and night). I'd also like to acknowledge the many members who volunteer to support the work of the AOM, who serve either as a Board or committee member. A special thank you, as well, to our hard-working, highly dedicated staff who bring a unique expertise to the work of the association. Our accomplishments this year would not be possible without these member volunteers and staff.

We hope you enjoy this year's annual report - formatted as a calendar. Each month is dedicated to a theme from our strategic plan and highlights accomplishments that showcase the progress that is being made in that area.

Together, midwives are transforming the health-care landscape in Ontario.

Sincerely,

Kelly Stadelbauer
Executive Director

Celebrating the history & growth of midwifery

At the AOM's 2014 conference, we celebrated the 20th anniversary of regulated and publicly-funded midwifery care in the province, the work of pre-legislation midwives and supporters who paved the way for regulation, and the Indigenous nations and Aboriginal midwives who are bringing birth back to their communities.

Thirty of the 60 midwives who completed the Midwifery Pre-registration Program at the Michener Institute of Applied Health Sciences in 1993 attended the opening ceremony.



May
2015

SUNDAY

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

A new awards program was introduced at the 2014 conference. Midwives Eileen Hutton, PhD, and Vicki Van Wagner, PhD, received Lifetime Achievement Awards. Hospital Integration Awards were presented to Markham Stouffville Hospital and Trillium Health Partners.

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AOM Annual Conference and AGM, Delta Toronto East

International Day of the Midwife

○ (Full moon)

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Mother's Day

Canada Health Day

International Day of Families

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● (New moon) Victoria Day

Aboriginal Awareness Week (to May 22)

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National Multiple Births Awareness Day

2015 June

Increasing access to Aboriginal midwifery

In collaboration with the National Aboriginal Council of Midwives, and with the support of Aboriginal stakeholders and leaders, including Chiefs of Ontario, the AOM successfully advocated for funding to increase access to Aboriginal midwifery in Aboriginal communities. The historical commitment from the Ministry of Health to expand its funding for Aboriginal midwives formed part of the contact ratified by Ontario midwives on December 23, 2014.

Recognizing that the health outcomes for Aboriginal women and newborns are intimately connected to a history of colonialism, the AOM hosted an educational event for midwifery leaders. The event, led by Maya Chacaby of the Ontario Federation of Indigenous Friendship Centres, moved participants to reflect on ways to leverage their leadership to support the renaissance of Aboriginal midwifery.



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1  Global Day of Parents	2 	3 <i>AOM Queen's Park Day</i>	4	5	6
7	8	9	10	11	12	13
14	15	16 	17	18	19	20
21 National Aboriginal Day Father's Day	22	23	24	25	26	27
28	29	30	Two webinars on Aboriginal midwifery were offered in 2014 and can be accessed through the members' only section of aom.on.ca , under the <i>Educational Resources and Archives</i> tab.			

July

2015

The Rural and Remote Committee, led by chair Kelly Graff (pictured), sought input from both clients and providers living in remote and rural communities in developing recommendations on how to optimize and sustain rural, remote and northern practices and improve access to care.



Keeping birth close to home

The committee made some of the following recommendations: women in rural and remote communities should be able to access maternity care as close to home as possible; local level factors such as population, geographic features, resources and health-care providers must be taken into account when planning for maternity services; and the government of Ontario should work with Aboriginal leadership to support culturally safe care and self-determination in Aboriginal communities.



Photo courtesy of Veronique Lalonde

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1 <i>AOM quarterly membership payment deadline</i> Canada Day ○	2 ○	3 ○	4 ○
5 ○	6 ○	7 ○	8 ○	9 ○	10 ○	11 ○
12 ○	13 ○	14 ○	15 ○	16 ●	17 ○	18 ○
19 ○	20 ○	21 ○	22 ○	23 ○	24 ○	25 ○
26 ○	27 ○	28 ○	29 ○	30 ○	31 ○	○


Quality care & clinical excellence

The AOM's educational events equip midwives with the information and resources needed to provide clients with the highest quality of care. Topics in 2014 included: a new quality based procedure (QBP) for hyperbilirubinemia; current evidence and practice for supporting the pelvic floor; ethical considerations with non-invasive prenatal testing; managing pregnancy beyond 41 weeks; late maternal age; human rights in midwifery practice; and working with clients living in poverty.

The AOM's clinical practice guidelines (CPGs) ensure midwives have evidence-based tools that are consistent with the midwifery philosophy of care. In 2014, a new CPG, *Group B Streptococcus: Postpartum Management of the Neonate* was published. An accompanying client handout, *Normal Newborn Behaviour*, was also developed and translated into five languages.

2015
August



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>When midwives need individual and immediate advice related to a risk management issue, expert help is just a phone call away. The AOM's PLEASE line operates 24 hours a day, 365 days a year. Between January 1 and December 31, 2014, approximately 176 midwives in 635 separate phone calls received assistance.</p>						1
2	3 <small>Simcoe Day (ON)</small>	4	5	6	7	8
9	10	11	12	13	14 	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

September²⁰¹⁵

Keeping midwives in the profession

All midwives must have the supports needed to contribute to the provision of health care. Midwives in their first five years of practice, late in their careers or trying to balance family responsibilities face unique challenges.



In 2014 midwives Sarilyn Zimmerman and Kerstin Helén (pictured) led focus groups and analysis with midwives in late career.

Midwives Zuzana Betkova, Rajvinder Kaur, Bianca Marlatt, Jill Parsons, Jenna Robertson, Simone Rosenberg, Shezeen Suleman and Natalie Tregaskiss led discussions, focus groups and analysis with midwives in their first five years of practice.

The focus groups provided greater insight into the lives of midwives at both ends of the career spectrum and the background required to build a career spectrum strategy, which is currently underway.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1	2	3	4	5
6	7 <small>Labour Day</small>	8	9	10	11	12
13	14	15	16	17	18	19
●						
20	21	22	23	24	25	26
27	28 <small>○</small>	29	30			

A photograph of two women sitting on a set of stairs. The woman on the left is wearing a black long-sleeved top and has her hair in a bun. She is smiling and looking towards the woman on the right. The woman on the right is wearing a grey blazer over a floral top and is smiling while looking at a laptop. The background shows a modern building interior with a staircase and a window.

The AOM's 2014 conference marked the first time a scientific stream of peer-reviewed presentations was offered. A new midwifery research work group, chaired by midwife Beth-Murray Davis (right), established the peer-review process to showcase midwifery researchers who are leading the way.

Ontario Midwife championed groundbreaking, innovative research in action by highlighting the work of Ontario midwives teaching at Laurentian, McMaster and Ryerson.

Participating in BORN's midwifery advisory committee gave midwives an opportunity to support the midwifery dashboard and the normal birth report.

In 2014, in response to a resolution in support of primary research, funds were committed to Eileen Hutton, PhD, to analyze midwifery outcomes from 2006-2009.

The AOM champions
**midwifery-led
research**

October²⁰¹⁵

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>In October 2014, thousands of Ontarians participated in the AOM's #MidwifeMondays social media days of action in support of leveraging midwifery to transform the health-care system. More than 4,000 tweets and 3,000 e-postcards were sent to Ontario Minister of Health and Long-Term Care Eric Hoskins and Premier Kathleen Wynne.</p>				<p>1</p> <p>World Breastfeeding Week (to October 7)</p> <p>AOM quarterly membership payment deadline</p>	<p>2</p>	<p>3</p>
<p>4</p>	<p>5</p> <p>National Family Week (to October 11)</p>	<p>6</p>	<p>7</p>	<p>8</p>	<p>9</p>	<p>10</p>
<p>11</p>	<p>12</p> <p>Thanksgiving ●</p>	<p>13</p>	<p>14</p>	<p>15</p>	<p>16</p>	<p>17</p>
<p>18</p>	<p>19</p>	<p>20</p>	<p>21</p>	<p>22</p>	<p>23</p>	<p>24</p>
<p>25</p>	<p>26</p> <p>National Patient Safety Week (to October 30) ○</p>	<p>27</p>	<p>28</p>	<p>29</p>	<p>30</p>	<p>31</p>

Midwives are funded to care for Ontario residents, even if they are uninsured. This means that midwives have the unique opportunity to provide care to those who may not otherwise have access. Adequate prenatal care has been proven to significantly increase positive outcomes for both mothers and babies.

Supporting clients in midwifery care without health insurance


Following Interim Federal Health Program cuts in 2012, midwifery practices saw an increase in the number of uninsured women seeking midwifery care. In 2014, the AOM successfully advocated for funds to cover lab, ultrasound and physician fees for midwifery clients without health insurance.

Manavi Handa led midwife volunteers in staffing Access Alliance's Non-Insured Walk-In Clinic and in participating in the Network on Uninsured Clients.



2015
November

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1	2	3	4	5	6	7
			Canadian Association of Midwives Annual Conference, Montreal			
8	9	10	11	12	13	14
			● Remembrance Day			
15	16	17	18	19	20	21
22	23	24	25	26	27	28
			○			
29	30					

A photograph of two women sitting on a black leather couch in a room with red walls. The woman on the left is wearing a white patterned top and blue jeans, looking towards the woman on the right. The woman on the right is wearing a dark long-sleeved top and purple pants, smiling and holding a baby model. A white baby model is also on the couch between them. There are plants and a framed picture on the wall behind them.

Midwife Liz Darling (right), a member of the Quality Based Procedures Work Group of the Provincial Council for Maternal and Child Health, helped develop quality-based procedure guidelines for hyperbilirubinemia.

Strengthening
maternal &
newborn care

2015
December

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>In 2014 the association participated in Ministry of Health meetings related to drug shortages and the development of a drug shortage monitoring system.</p>		<p>1</p> <p>World AIDS Day</p>	<p>2</p>	<p>3</p>	<p>4</p>	<p>5</p>
<p>6</p> <p>National Day of Remembrance and Action on Violence Against Women</p>	<p>7</p>	<p>8</p>	<p>9</p>	<p>10</p>	<p>11</p> <p>●</p>	<p>12</p>
<p>13</p>	<p>14</p>	<p>15</p>	<p>16</p>	<p>17</p>	<p>18</p>	<p>19</p>
<p>20</p>	<p>21</p>	<p>22</p>	<p>23</p>	<p>24</p>	<p>25</p> <p>○ Christmas Day</p>	<p>26</p> <p>Boxing Day</p>
<p>27</p>	<p>28</p>	<p>29</p>	<p>30</p>	<p>In 2014 the AOM actively participated on the Best Start Prenatal Advisory Committee, the Ontario Public Health Association Reproductive Health Work Group and a number of BORN Ontario committees.</p>		

Ontario's three midwife-led birth centres are making midwifery more accessible, helping more women, clients and their families realize their goal of a normal and healthy childbirth, and keeping birth in the community.

Tsi Non:we lonnakeratstha Ona:grahsta', the Maternal and Child Centre on the Six Nations of the Grand River Territory, will be celebrating its 20th anniversary in May 2016.

The Toronto Birth Centre and the Ottawa Birth and Wellness Centre are both celebrating their second anniversaries this month.



Birth
centres

January
2016

SUNDAY

MONDAY

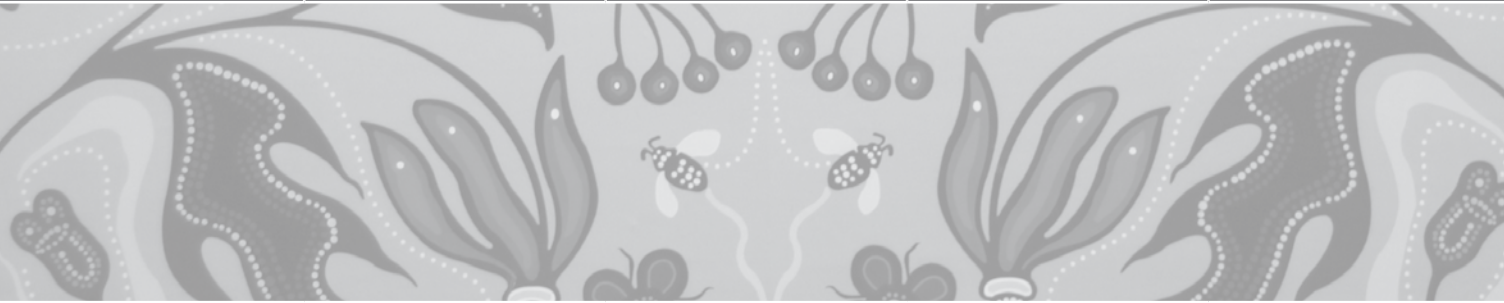
TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY



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New Year's Day

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*Deadline for paying
AOM membership in full*

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*National Non-smoking Week
(to January 23)*

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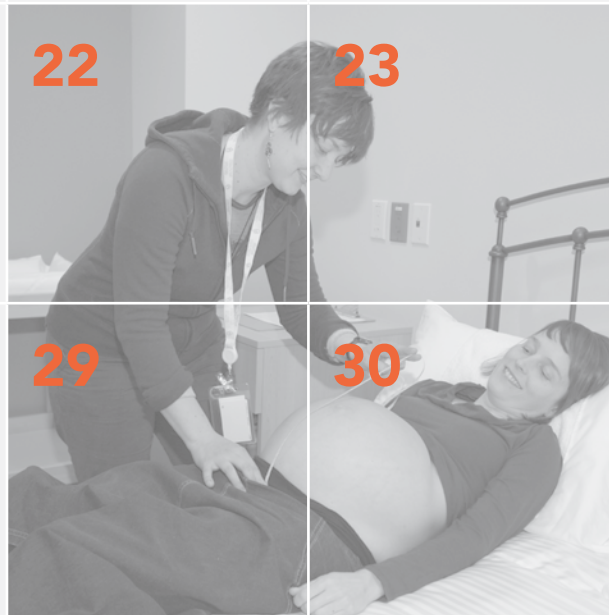
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Strengthening interprofessional collaboration & hospital integration


Improving hospital integration is an ongoing priority. In 2014, an in-person, all-day head midwives' day gave midwife leaders an opportunity to share strategies.



The relationship that solo midwife Judy Rogers (pictured left) has with the five family physicians in her Parry Sound community is an excellent example of interprofessional collaboration. Rogers and the physicians share on-call rota and together keep birth close to home. During her week on call, Rogers may provide care for a client who doesn't have a physician, assist another provider with a consult, or take over a patient for a physician who is off call.

Rogers is one of a number of midwives who have received support from the AOM to submit proposals for alternate practice and alternate funding.

February 2016

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
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7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	<p>AOM in-services on hospital integration were held at four hospitals across the province in 2014 and featured presentations by AOM Board members, the Insurance and Risk Management Committee and the Canadian Medical Protective Association.</p>				



Sexual and Reproductive
Health Awareness Day

Family Day

National & international initiatives


Sharing resources and expertise with midwives in other provinces and countries is a priority for Ontario midwives. In 2014, the AOM provided funding to the Canadian Association of Midwives (CAM) to increase CAM's capacity to assist unregulated provinces in their efforts to have midwifery recognized.

The AOM also provided direct support to midwives by meeting with delegations from midwifery associations in Quebec, Alberta, British Columbia and Manitoba.

Globally, the AOM supported CAM to modify the AOM's ESW manual so it would be suitable for midwives practicing in Tanzania. Esther Willms is pictured leading ESW training in Tanzania.

2016
March



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<p>The countdown is on! Excitement is building as Ontario looks forward to hosting midwives from around the world when the 31st ICM Triennial Congress is held in Toronto in June 2017.</p>		1	2	3	4	5
6	7	<p>8</p> <p>International Women's Day United Nations Day for Women's Rights and International Peace</p>	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	<p>Good Friday</p> 	
				<p>PD fund submission deadline Deadline for liability insurance renewal</p>		

2016 April

Advocating for pay equity

The most recent independent report confirms that when the skills, effort, responsibility and working conditions of midwives are analyzed, midwives are currently only compensated 52% of what their work is worth.

In November 2013, the AOM filed an application with the Human Rights Tribunal of Ontario (HRTO) over the government's refusal to comply with pay equity for midwives. Midwives are represented in the legal action by Mary Cornish (below) of Cavalluzzo Shilton McIntyre & Cornish LLP, an expert in pay equity and human rights law.

In 2014, numerous preliminary hearings were held. In August 2014, midwives celebrated an important first victory in their pay equity application when they successfully won the right to have the entire application (representing 20 years of evidence) heard by the HRTO.

Midwives experience a gender penalty in their compensation because they are a female-dominated workforce, providing care to women, for a woman's health experience of labour and birth.



SUNDAY

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

The AOM is a member of the Equal Pay Coalition. Equal Pay Day is used to demonstrate that women—who generally earn less than men—must work longer to earn the same amount that men earned in the previous year.

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*AOM quarterly membership
payment deadline*

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● World Health Day

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Administrative Professionals' Day

The AOM is pleased to present the winners
of this year's awards.

**AOM Lifetime
Achievement Award**

Karyn J. Kaufman DrPH, LLD (hc).

**AOM Hospital
Integration Award**



Hôpital Montfort

AOM Media Award

Dr. Brian Goldman

Producers: Dawna Dingwall and Jeff Goodes

CBC Radio: White Coat, Black Art

Congratulations!