



Wiya Ma - Woman's Medicine

Midwife/Client Duties and Responsibilities

MIDWIFE DUTIES AND RESPONSIBILITIES:

- ❖ *Job Description:* The midwife assumes responsibility for the management and care of the essentially healthy woman and newborn throughout the childbearing period. This includes well woman care, referrals for mammograms and birth control as necessary, prenatal care, labor and birth care, postpartum care through 6 weeks and normal newborn care. She practices within the Midwifery Model of Care, in an ethical and professional manner. She maintains her training, ensuring it is current and evidence based.
- ❖ *Disclosure Statement:* The midwife will provide a disclosure statement, outlining education, training, legal status, designation as a midwife, insurance status and any other pertinent information relevant to the client's care either in person or online, for review at any time and a disclosure statement signature form should be signed in the office at their prenatal visit, for permanent inclusion in their chart. If clients have any questions regarding my training, ability, legal status or anything else pertaining to your care, they should address them quickly either by phone, email or in person at their prenatal visit. The midwife participates in peer review, as required by membership in her state midwifery organization.
- ❖ *Office Hours:* The midwife shall make herself available for prenatal care, either in her office, the client's home or another place as mutually agreed upon, during most week days, from 8am to 8pm. Routine questions or concerns and paperwork issues shall be addressed in the office either in person or by phone during regular office hours. Prenatal visits may be scheduled on weekends as a convenience to clients, but not as a regular practice. The midwife will have a phone number where clients may contact her 24 hours a day, for urgent concerns.
- ❖ *Client Records:* Confidential client records are maintained documenting all care provided to the client including referrals to other healthcare providers. Unless the midwife is involved in filing for health insurance reimbursement the laws pertaining to HIPAA are not a requirement, however the practices suggested in the HIPAA act are upheld and no medical information can be released to any other person except the client without express written consent. A release of information must be signed by the client in order for medical information to be shared with other medical professionals or family. The spouse/partner is included in the contracted care of the family, so information will be shared with the spouse/partner unless the desire for alteration of this policy is indicated by the mother. No personally identifying information is shared during the peer review process.
- ❖ *Informed Consent:* Clients will be provided with education and informed choice options for every aspect of their care, including ultrasound, lab tests, risk factors, fetal development and holistic treatments. If a client chooses to decline any offered service an *informed consent document* will be signed by the client. If a client develops risks that change the status of her care, and she chooses to continue plans for a home birth after full discussion of any risks involved, this too will be documented. Any time this occurs it will be discussed in peer review.

- ❖ *Lab Tests:* The midwife offers testing either in office or by referral, for all usual and customary prenatal diagnostics, unless their religious beliefs prohibit them (i.e. Christian Scientists). Wiyama provides equipment for acquiring blood and urine sampling for screening. There may be additional fees for individual tests done in the office, or additional tests completed by a lab. Referrals for ultrasounds may be acquired, and obtained by the client by a qualified provider, at their own expense.
- ❖ *Birth Team:* The midwife shall make every attempt to attend each birth with another trained assistant or midwife, have 24 hour on-call service for emergencies and back service available. Clients will have the opportunity to meet any potential members of their birth team in advance of their birth, unless emergency circumstances prohibit such activity. Clients have the option to exclude any potential birth team member, unless to do so would jeopardize the safe practice of the midwife.
- ❖ *Equipment and Supplies:* The midwife shall maintain all equipment and supplies in an aseptic manner and kept in good working order. The midwife will provide all equipment and supplies required for safe and effective management of pregnancy, labor, birth and postpartum care. Clients are responsible for certain household supplies and the purchase of any consumables (see Client Responsibilities section for details).
- ❖ *Advance Preparation:* Prior to the onset of labor, arrangements are discussed regarding the transport of the mother and/or infant to a hospital and all clients must be in agreement to transport if the midwife believes it has become necessary. Childbirth education may be suggested or required if the midwife feels the client is not adequately prepared for birth.
- ❖ *Newborn Screening:* The midwife either provides for or provides for referral for the newborn screening to be completed at the day 3 postpartum visit.
- ❖ *Birth Registration:* The midwife provides for all of the state requirements for filing for the birth certificate. In WV the birth certificate worksheet will be completed in the office at the 2 week postpartum visit. In other states the midwife shall provide the parents with all information regarding registration of their babies. It will be their responsibility to file for the birth certificate. I will assist in any manner necessary for 90 days. After that I will assume no responsibility (see Client Responsibilities section).
- ❖ *Risk Status:* An initial risk assessment is done and ongoing risk status is revised as necessary. A signed informed consent document is acquired for any change in risk status or refusal of care or referral.
- ❖ *Referrals:* The midwife practices autonomously and does not have any legally binding collaborative relationship with any physician. There are physicians in the area who will provide care to Wiyama clients, as a courtesy. A referral is required and release of information must be signed by the client at both ends to ensure the physician and the midwife are able to share information.

CLIENT DUTIES AND RESPONSIBILITIES:

- ❖ *Appointments:* The client agrees to keep all prenatal and postpartum appointments. Cancellations or changes to appointments should be done made in a timely manner, during regular office hours. The client further agrees to continuous honest disclosure regarding symptoms and risks pertinent to their care, and to follow through with any care plan and referrals made. Accommodations for one home visit must be made by 36 weeks of pregnancy.
 - This is the best way for me to be able to provide safe and effective care for you and your baby. Being honest about symptoms and possible risk factors will allow us to come to a workable agreement about the safest possible care for you both. If reasonable accommodations cannot be agreed to with regards to care plans and referrals, there is always the possibility that you may be risked out of a homebirth. The 36-37 week home visit allows me to find your home during the day, and assess the space. It is not a white glove inspection, but rather a chance to orient myself and my team to your home and your household supplies. Your birth kit and supplies should all be assembled by this visit, and anyone attending the birth should be invited, so that we may become acquainted as well.

- ❖ *Financial Obligations:* The client agrees to pay all monies due on time, according to the payment agreement.
 - Payments made on time provide for me to keep my equipment in good working order and up to date, to maintain consistent availability and accessibility (i.e. working vehicle, cell phone and childcare arrangements), and to keep my trainings and certifications current.

- ❖ *Lifestyle:* The client agrees to strive to attain the most holistic and healthy lifestyle within her means.
 - Eating well, using recommended remedies and supplements, adequate hydration, stress management, exercise and fitness as well as other alternative and clinical therapies are all essential in achieving a healthy birth. Minimizing or eliminating any hindrance to a healthy lifestyle can make the difference in a normal pregnancy, a healthy mother and baby and a healthy birth.

- ❖ *Communication:* The client agrees to communication regarding non-urgent matters via voice/phone, text or email, during the office hours as indicated. (Monday – Friday 8am to 8pm). Further, communication regarding urgent matters should be made via voice/phone only during the hours as indicated (24 hour availability)
 - It is best to communicate non-urgent issues (minor discomforts, appointments, paperwork, etc.) with me during regular office hours, as it is easiest for me to be able to document our conversation for your chart. Communication via Facebook should be kept to social issues only, as it is a public social networking site and is not guaranteed to be private or secure. URGENT matters (if you are sick or concerned for yourself or your baby) should be addressed via phone calls, immediately. If you have an urgent problem, call me directly, if you get voice mail, leave a detailed message, and I will call you back. This is not a stringent policy, in that I am usually available, almost any time, but if you have a health issue, it needs to be documented for the chart. Emails received after 8pm will be addressed the following business day.

- ❖ *Supplies and Consumables:* The client agrees to purchase all supplies and consumables (birth kit) in a timely fashion.
 - If there is a financial hardship, please discuss it early so we can explore alternatives for ensuring you have everything you need for your birth. Ask me if you are unsure why a certain item is necessary.

- ❖ *Waterbirth:* The client agrees to have all of the equipment ready and available by 37 weeks. All connections and hoses will be assessed for functionality prior to the start of labor. The client is responsible for purchasing a pool liner by 37 weeks.
 - Don't wait until labor starts to find out that your connections aren't adequate to get water to your pool. Filling and bailing the pool will then become the responsibility of the client, as it creates a distraction for the birth team. Also, make sure your hot water heater thermostat is turned up to provide adequate hot water, or provide large stock pots for heating water for your pool.

- ❖ *Transport Plan:* The client agrees to create a reasonable transport plan should a transfer of care become necessary. A Homebirth Transport Plan worksheet must be filled out including appropriate hospital and physician's phone numbers. Directions from the home to hospital should be printed and accompany the transport plan. These documents should be posted in a location of easy access in the home (on the refrigerator or some other obvious location), a copy of these documents should be made available for the chart.
 - The information in the transport worksheet make the transfer of care to the hospital or another care provider smooth and require less interaction from you and your partner. It is also advisable that you contact your local rescue squad, let them know you are planning a homebirth, and offer to print off directions from their station to your home. If your transport plan is to go to the closest hospital and transfer care to the physician on call, you must still complete the worksheet with the phone numbers for the labor and delivery unit and the NICU. It is also advisable to create a hospital birth plan to take with you, that includes an outline for care for you and your baby.

- ❖ *Education and Accountability:* The client agrees to either acquire access to a childbirth education class of their choice, or participate in the *Birthing Naturally* class offered by Wiyama, or otherwise ensure that they are properly prepared for birth at home. The client further agrees to make themselves knowledgeable about the benefits and risks of birth in the out of hospital setting, and risks and benefits regarding testing and procedures which may be offered or required for prenatal/labor/birth care or the care of the newborn.
 - This is especially important for first time mothers, or women who have never given birth vaginally (VBAC). If you have given birth vaginally before, and do not feel adequately prepared for natural childbirth at home with no access to medication, a childbirth education class is highly recommend

- ❖ *Family Participation:* The client agrees to arrange appropriate childcare for any siblings who may be in the home during the birth, and adequate care for children in the case of a transport to the hospital. This cannot be your partner or main support person. They further agree to careful consideration of and limiting the number of other people in attendance of the birth.

- It is a good idea to spend some time preparing children for birth, and evaluation of what their emotional requirements may be during this time. It can be potentially stressful for the mother and her support person to have to divide their attention. Also, carefully consider who you invite to your birth. Make sure they are supportive of your choices, not especially worried or nervous, and are willing to help out. It is also a good idea to not invite anyone who would be hurt or angry at being asked to leave. Many women don't know what they will or will not want during birth, and occasionally privacy is essential to the process, or the requirement for rest is necessary.

- ❖ *Postpartum Newborn Care:* The client agrees to have a plan for the newborn to receive care in case of a complication and to have the newborn seen by a healthcare provider within 3 days of the birth, and to either allow for the newborn metabolic screen to be performed by the midwife, make arrangements for it to be provided by your health care provider, or sign an informed consent/declination form. In West Virginia the client must contact their local health department and order a homebirth kit, which contains all of the supplies for newborn treatments. A copy of the initial newborn exam, and any Informed Choice forms will be provided to you at your 24 hour postpartum visit to go with the newborn to the physician.
 - It is best to locate and interview providers prenatally, so you have the opportunity to discuss certain issues with them such as newborn metabolic screening, newborn hearing screening, vaccinations and circumcision. It is also strongly suggested that you discuss your plans for a homebirth with your provider and have a plan in place to have your newborn seen should complications arise. It is much easier to have these conversations prenatally than to have to fight with an unknown on-call provider in a stressful emergency situation. If you run into a wall, make sure you refer to the current AAP statement on collaborative care for homebirths.

- ❖ *Birth Certificates:* The client agrees to provide all of the correct information to prepare the birth certificate worksheet, or make timely effort to acquire your birth certificate from your county Health Department in a timely fashion.
 - It is significantly more difficult to acquire a birth certificate after 90 days, and the documentation requirements for become more difficult as well. In WV I am required by law to submit the form, even if you do not sign it.