



November 21, 2011

## More About the Random Practice Review

### Project Timeline for Development of the Random Practice Review Process

Nov/Dec 2011	Online survey of members
Feb 2012	Survey results available
Spring 2012	Further consultation with members
Fall 2012	Random Practice Review process planned/confirmed
2013	Training of Reviewers and piloting of the process
2014	Start of Random Practice Reviews

### Online Survey of Members

In late November/early December, the College will be carrying out an anonymous and voluntary survey about members' midwifery practices.

You will receive an email invitation to the survey, and it should take you about 10-15 minutes to fill it out. We appreciate your helping us determine how best to:

- **set up the structure/logistics of the Random Practice Review process** - at this point we need to know more about how BC midwifery practices are organized (e.g. how space and/or care is shared amongst midwives, and where and how records are stored) to set up a system that is the most efficient possible, for both midwives and the College; and
- **support members prior to the implementation of the Random Practice Review process** - specifically we hope to identify potential areas for policy clarifications and/or member educational opportunities so that there are no surprises at the 2014 launch of the process.

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*"The information gathered in the online survey will allow the College to create an efficient and effective Random Practice Review process. The information will help us put supports in place, where and if needed, to assist members well in advance of a potential practice review."*

Joanne Daviau, RM, QA/Clinical Practice Policy Director

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We encourage you to answer the survey questions as fully and accurately as you can, even if you think that your response may not be what is expected or common. Be assured that the College is aware that there are variations in safe practice,

We want to keep you informed and encourage your feedback.

Our goal is to develop a Random Practice Review program that is of benefit to midwives and serves the public interest.

some of which may be in response to the needs and limitations of different regions of the province. If you wish, you can elaborate on your practice context and/or ask questions via the comment boxes placed throughout the survey. Remember, all responses and comments are anonymous, and will contribute to a better picture of midwifery practices in BC, which will thereby improve planning at this stage of the development process and enable us to understand how best to support and benefit members in all types of practices, large and small, rural and urban.

If you have questions or concerns about the survey, please send them to [feedback@cmbc.bc.ca](mailto:feedback@cmbc.bc.ca) or contact QA/Clinical Practice Policy Director, Joanne Daviau, RM.

*continued on page 2*

*Published by the College of Midwives of British Columbia as a means to share information with its members and subscribers. The Newsletter is mailed to all members and purchasers of the CMBC Registrant's Handbook and published on our website. Questions, responses and suggestions regarding the content of the Newsletter are welcome, and should be directed to:*

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## Benefits for members

College members will see a number of direct benefits of the Random Practice Review process:

- **increased information and support** available to members about meeting regulatory requirements;
- **decreased liability risks** through improved charting, adherence to regulatory requirements, and enhanced quality of care;
- **peer-led** evaluation that is provided in a midwifery-centric manner that reinforces good practice and provides supportive feedback.

In addition, the process will enhance the public image of midwifery and provide **increased accountability to the public**. This is critical for supporting the continued self-regulation of the profession since there have been increasing public pressures on self-regulated professions to demonstrate accountability and provide evidence of members' ongoing competence and safe practice.

## Some Basics about Random Practice Reviews

### Random Selection

Random selection in a practice review process means putting each member's name into a pool, and randomly choosing a set number of members from that pool. Those selected then participate in the practice review process. After taking part in a practice review, members are usually exempted from the selection pool for a set number of years (often 5 years).

### Peer Assessment

Practice reviews normally involve an on-site look at client care by peer reviewers. Peer reviewers are registered members of the profession who have

received training in carrying out random practice reviews. It is expected that all CMBC reviewers will have had their practices reviewed prior to taking on the reviewer role.

### Site Walk-through

Often practice reviews include an inspection of the clinical site. Midwifery practice reviews in other provinces have checked home birth and other equipment and supplies, as well as systems for secure records and medications storage.

### Chart Audit

Practice reviews generally include an audit of a set number of charts, usually randomly selected by the reviewer. They are reviewed for appropriate charting and documentation, as well as for the care provided.

### Chart Stimulated Recall Interviews

Practice reviews frequently include interviews with the member. Sometimes a process called Chart Stimulated Recall is used, wherein a small number of client charts are selected to be discussed with the member in a standardized fashion. This allows the member to provide context and explanation to what she has charted in a client record.

*BC's Health Professions Act requires health regulators to develop quality assurance programs to assess their members' professional performance to ensure competence and public safety.*

**Want more info about the Random Practice Review process?** Go to "QA Development" in the [members' section](#) of the CMBC website.

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## 2012-13 Registration Renewal

Registration renewal package will be sent to all registrants by email and mail in mid-January 2012. Please ensure that the CMBC has your current contact information. Your registration will not be renewed if any of the following requirements are not met:

### Continuing Competency Requirements

Proof of your NRP, CPR and ESW certifications must reach the College office by noon on March 30, 2012. Plan ahead, as these recertifications can be done anytime between now and March 30.

### Requirements for Active Practice

If you have been asked to report, you must either satisfy the requirement for active practice or have an approved active practice plan in place. You must submit the requested active practice reporting form to the CMBC by the required due date.

### Outstanding CMBC Invoices

In addition to the payment for the renewal fee, you must pay all outstanding CMBC invoices in full.

## CMBC Board Election Results

The College received 99 ballots from registrants, of which 10 were declared spoilt ballots and could not be counted. Those spoilt ballots were either received by the CMBC after the deadline or were not contained in an envelope on which the registrant's name and signature appear.

Valid ballots were counted on November 4, 2011. Sylvia Fedyk RM received the most votes in the election and has been elected to the Board for a three-year term of office, beginning on January 1, 2012.

A thank you to those registrants who voted in the election, and a reminder to all registrants that ballots can only be counted if received before the deadline and sent to the College following the stated election procedure.

### Birth Rosters

Midwives are responsible for keeping copies of their birth rosters. The CMBC collects birth rosters from midwives and forwards them to Perinatal Services BC (PSBC). The birth rosters are used solely by PSBC to assist the BC Perinatal Database Registry in cross-checking their data and ensuring that they have a complete data set from all midwifery records entered into their system. The CMBC does not extract or compile data from the birth rosters for any other purposes.

Midwives, in particular those who rely on using the data on a birth roster to complete the Active Practice Record, are reminded to keep copies of the birth rosters before submitting them to CMBC.

### College Holidays Closure

The CMBC offices will be closed from noon, December 23, 2011 through January 2, 2012 inclusive. Midwives who wish to apply to have their registration status changed with an effective date that falls between December 24, 2011 and January 3, 2012 must submit the applicable change of practice status form and fee to the College by December 15, 2011. This deadline also applies to requests for approval of second birth attendant.

### Midwifery Student Preceptorships

Registered midwives may only provide clinical preceptorships to students from CMBC approved midwifery education programs who are registered with the CMBC as student midwives. It is illegal for a student from a midwifery program that is not approved by the College to do a clinical placement with a midwife in BC.

If you are approached by a student who is not from a CMBC approved program for a preceptorship in BC, you need to decline the request. If in doubt, please contact the College.

### Home Birth Transport Plan

Under the Policy for Home Birth Transport Plan, registered midwives are required to have a transport plan in place with the hospital that would be called if transport from a planned home birth to hospital is required in order to ensure a safe, timely and smooth transport of mother and/or newborn. Each midwife is responsible for communicating with the hospitals in the communities where they are practicing, and where they may reasonably expect to need to transfer a mother or newborn, in order to put such a plan in place and must file a copy of the plan with the College. If you have not sent a copy of your transport plan(s) to the College or have updated your transport plan(s), please remember to file a copy of them with the College.

#### CMBC Directory

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