

## INFORMED CHOICE POLICY

Informed choice is a fundamental principle of midwifery care in British Columbia. Women have the right to receive information and be involved in the decision-making process throughout their midwifery care. In the College of Midwives of British Columbia's *Philosophy of Care* document, the childbearing woman is recognised as the primary decision-maker. The interactive process of informed choice involves the promotion of shared responsibility between the midwife and her client. Midwives encourage and give guidance to clients wishing to seek out resources to assist them in the decision-making process. It is the responsibility of the midwife to facilitate the ongoing exchange of current knowledge in a non-authoritarian and co-operative manner, including sharing what is known and unknown about procedures, tests and medications.

**The College of Midwives of British Columbia requires** that registered midwives provide each client with the following information at the onset of their care, ideally given in writing and followed up in discussion:

- education and experience in midwifery of the midwives in the practice;
- services provided, including:
  - scope of practice
  - philosophy of care
  - choice of birth setting
- contact information, including how the client can reach a midwife known to her 24 hours a day<sup>1</sup>, change of appointment procedure, off-call coverage arrangements, back-up arrangements;
- second attendant arrangements, if applicable;
- standards of practice and protocols, including:
  - continuity of care
  - consultation and transfer of care
  - supportive care
- role and responsibilities of the client;
- confidentiality and access to client records;
- any student and/or supervised practice arrangements.

**The College of Midwives of British Columbia requires** registered midwives to provide each client with the following information throughout the course of care:

- potential benefits and risks of, and alternatives to, procedures, tests and medications;
- relevant research evidence;
- community standards and practices.

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<sup>1</sup> Where a midwife is in solo practice and cannot make arrangements for on-call coverage by another midwife, she must inform her client of how to access an alternate primary caregiver when she is off-call. Ideally that alternate care provider would also be known to the woman.