

POLICY ON HOSPITAL PRIVILEGES

The College of Midwives' Standards of Practice require that all midwives respect the right of each woman to make an informed choice about the setting in which she gives birth. Midwives must be competent and willing to provide care to their clients in a variety of settings, including homes, hospitals and birth centers, where available. The ability to attend the woman in her chosen place of birth is an essential aspect of continuity of care and informed choice. Midwives also have a responsibility to provide the information required to make an informed choice about appropriate settings in which to give birth. The birth setting is chosen by the woman in consultation with the midwife.¹

In order to provide midwifery care functioning within their full scope of practice in all settings, midwives must have hospital privileges.

Once registered with the CMBC, a midwife must apply for hospital privileges and make every reasonable effort to obtain privileges in the geographic area in which she intends to provide midwifery services. This is also supported by BC Midwives Contract for Services with MSP.²

The College encourages all newly registered midwives, locum midwives, midwives relocating, and non-practicing midwives returning to practice to contact their local hospital and apply for hospital privileges as soon as possible. The College recognizes that the time it takes for an application for hospital privileges to be considered and for privileges to be granted varies from hospital to hospital and community to community.

During the period when a midwife's application for privileges is being considered, including during any appeals process if privileges are initially declined or not renewed, a midwife who is in good standing with the College may continue to engage in clinical practice. The midwife provides care to women and their newborns throughout pregnancy, labour and birth and the postpartum period in out-of-hospital settings as long as she is working collaboratively with at least one other midwife, and ideally a group of up to three other midwives, who have hospital privileges and where one of those midwives is on-call and available to admit and provide care in hospital to women or their newborns, whether chosen by the woman or clinically required.

Any period of midwifery practice prior to obtaining hospital privileges is intended to be temporary. The CMBC Standards of Practice require all midwives to "respect the client's right to make informed choices about the setting for birth and provide care in all appropriate settings"³. The College expects the midwife to be actively engaging with the hospital to obtain privileges during this time. College Standards do not support midwives in having either a "home birth only" or "hospital birth only" practice.

If the other midwives in the practice are unable to provide full coverage for hospital care while the midwife without hospital privileges is on-call, that midwife will need to shift her practice to providing only prenatal and postpartum care to the practice's clients until her hospital privileges have been granted and she can provide intrapartum care in all appropriate settings.

Midwives are asked to notify the CMBC of any change in the status of their hospital privileges.

¹ CMBC Midwifery Model of Practice, Choice of Birth Setting

² MSP Preamble and Payment Schedule: Midwifery Services (April 1, 2012)
<http://www.health.gov.bc.ca/msp/infoprac/midbylling/indexhtml>

³ Bylaws for the College of Midwives of BC, Part VIII: Standards of Practice, Standard Seven