

Midwifery Scope of Practice Comments December 12 through 18, 2012 (Updated)

Relative to requiring physician signature of cooperation, that is nearly impossible which is why midwives were seeking a way to obtain essential meds, including Rhogam, vitamin K for newborns, and eye prophylaxis. There was a recent ACOG article published on line in Nov 2012, that outlines a recommendation of no cooperation with home birth and that doctors who do assist should be subject to peer review and fines . I think that this recommendation is more likely to limit consumer birth choices to hospital only. Since the state currently pays nothing to home birth midwives through any plan, all costs from the loss of midwife assisted homebirths will be placed on insurance or medicade systems.

This is an incredibly hasty move for Arizona that I can only foresee harming the Midwives across the state, even more so the upcoming midwives who have struggled and worked so hard only to have the age limit psuhed back without grace towards them. Either a delay in the movement so as to accomadate upcoming midwives seeking to obtain a license or cut it with the bill entirely. Thank you.

I am commenting specifically about the proposed age of licensure change. As As I understand there was a notice given by the AZDHS a few months ago that there would be a move from the state License model to the CPM model that is designed by MANA. That license has no age requirement. Based on the AZDHS giving that information to are midwives/students, plans and timelines were put in to effect. Now, suddenly, they have been told that there will be a drastic change to age 21 as the age of licensure. This could greatly effect some very quality, educated young women. One in particular I know has been fully immersed in being a midwife apprentice for 3 years now. She has been a full time midwife student/apprentice during those years, with more experience than most older students as she was able to give so much time. She planned on doing the remainder of the education studying the next few months and test for her licensure in the fall. She will be 20 in September, and would therefore not qualify under the new age of licensure. This young lady is MORE than qualified and will give excellent care to so many women.

I understand that there is an issue with some new pharmaceuticals being added to midwife care, and that may be an issue. I also understand that EMT's push many, many pharmaceuticals and the age for EMT's is 18. So it seems that particular issue is a non-issue if comparing it with the health field overall.

There are some very passionate, amazingly smart and experienced young women ready to make a very big difference in the healthcare of women in our state. Please don't take that option away from women in our state by changing the age of licensure to 21 so soon. Consider not changing it, OR possibly waiting to make the change for another year or two so as not to interfere with the education/training timeline of the current midwifery students. Thank you.

I am 19 years old, and will be turning 20 in September of 2013. I have been studying with Alison Haasch since I was 16, a junior in high school. I have 24 catches and 38 witnesses. I have been planning to test next year and have been working very, very hard to do so. I would like to inquire about keeping the age for testing at 18, like it has been in the past. If we are following the CPM model, from my understanding, there should be no age requirement. I realize that with the pharmaceutical changes in the future, you would like to raise the age requirement to 21. Either way, this has a great effect on me, seeing as if I can not finish my requirements for Spring 2013 testing, that I will not be able to test for another two and a half years. There are no other students my age in the state of Arizona, and to the best of my knowledge, the youngest licensed midwife here is 24, and she is a wonderful one, at that. I will be the only one hindered by this law change.

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I urge the committee to reject consideration for expanding the Scope of Practice for Midwives that allows midwives to participate in home birth with clients who are at risk specifically VBACs, Multiple Births and Breech deliveries. As a member of the general public and as a Registered Nurse I feel that should the ADHS choose to support this practice the State of Arizona would therefore Sincerely, Julia Olson be accepting liability and accountability for all future adverse outcomes. ADHS is obligated to ensure safe practice and advocate for the general public. Sincerely, Julia Olson RN, BSN (Critical Care OB and Labor Nurse)

Restrictions on midwifery care in Arizona almost killed my daughter on January 4, 2012.

My wife chose an unassisted birth because of previous birth trauma. It seemed safer than submitting to the care of people who didn't actually care what happened to us or how they treated us. We would have used a midwife, but due to the current standards, it would have been illegal for a midwife to help us. My wife's placenta abrupted at home and we didn't know that's what happened but an experienced birth attendant would have recognized the signs and got us to the hospital sooner. Our baby is very blessed to be alive.

Please, please change whatever regulation needs to be changed to let women like my wife, women too scared and too scarred by doctors, receive the care they need to stay safe. To stay alive.

When making the new regulations, please remember the babies like Clara. They need quality healthcare, too.

We actually moved to a different state so for the next pregnancy we can have a provider we feel safe with. Thank you.

Unfortunately we won't be able to attend the meeting but I would love to share a few thoughts.

1. We whole heartedly support the midwifery model of care for any woman who chooses it. Our experience with midwives in Arizona has been, across the board, some of the most stellar healthcare we've witnessed.

2. Laws limiting scope of practice are fairly draconian in Arizona. We'd like to see women in the care of midwives having access to the same treatments and level of care women seeing a physician receive; including access to medication for bleeding in the postpartum period.

3. Women seeking VBAC outside the hospital setting are some of the most educated about birth I've met. Let's trust that their choice of provider is right for them and allow them access to care.

During our last pregnancy we chose to forgo prenatal care rather than seek care from a physician.

Midwifery care was not available to us because I fell out of the scope of practice currently in place. I would love to have had prenatal care but wasn't capable of seeing a physician due to extreme trauma experienced in my previous birth. Our only option was an unassisted birth. I'm not the first person to choose to forgo care altogether because the only safe choice isn't allowed by Arizona law.

As a mother of two and a consumer of midwifery services, I support the changes of rules proposed by the advisory committee. I specifically support the removal from rule all restrictions to pharmaceuticals, equipment and procedures necessary for providing quality care, as well as the removal of the current legal requirement to discontinue providing services to women who exhibit certain conditions during the course of her care with the midwife. It is my choice as a consumer to decide how and where I would like to birth, and with which care provider. Restricting tools and techniques places an undue burden upon me, and may introduce unnecessary dangerous elements into the birth of my child. It is not only in the interest of the state to ensure all women are well cared for, it is the state's responsibility. Stepping out of the way and allowing midwives to do the job for which they are so supremely suited will further these interests.

I had a wonderful home birth with Paula Matthew in Prescott. After two medicated hospital births, giving birth to my third daughter in my own bedroom was the most amazing experience. I NEVER FOR A SINGLE SECOND questioned my safety or that of my baby, or Paula's ability to determine how labor was progressing. Please do not take the beautiful gift of home birth away from us.