

IDAPA 24 – BUREAU OF OCCUPATIONAL LICENSES

24.26.01 – RULES OF THE IDAHO BOARD OF MIDWIFERY

DOCKET NO. 24-2601-1801

NOTICE OF RULEMAKING – PROPOSED RULE

AUTHORITY: In compliance with Section 67-5221(1), Idaho Code, notice is hereby given that this agency has initiated proposed rulemaking procedures. The action is authorized pursuant to Section 54-5504, Idaho Code.

PUBLIC HEARING SCHEDULE: Public hearing(s) concerning this rulemaking will be scheduled if requested in writing by twenty-five (25) persons, a political subdivision, or an agency, not later than October 17, 2018.

The hearing site(s) will be accessible to persons with disabilities. Requests for accommodation must be made not later than five (5) days prior to the hearing, to the agency address below.

DESCRIPTIVE SUMMARY: The following is a nontechnical explanation of the substance and purpose of the proposed rulemaking:

The State Board of Midwifery's proposed rule will update two documents incorporated by reference to reflect the most current publications, delete obsolete waiver language, and clarify current cardiopulmonary resuscitation certification for licensure renewal.

FEE SUMMARY: The following is a specific description of the fee or charge imposed or increased: N/A

FISCAL IMPACT: The following is a specific description, if applicable, of any negative fiscal impact on the state general fund greater than ten thousand dollars (\$10,000) during the fiscal year resulting from this rulemaking: N/A

NEGOTIATED RULEMAKING: Pursuant to Section 67-5220(2), Idaho Code, negotiated rulemaking was not conducted because the proposed changes to these rules were discussed during noticed, open meetings of the Board.

INCORPORATION BY REFERENCE: Pursuant to Section 67-5229(2)(a), Idaho Code, the following is a brief synopsis of why the materials cited are being incorporated by reference into this rule:

The Prevention of Perinatal Group B Streptococcal Disease, published by the Centers for Disease Control and Prevention, dated August 16, 2002, will be updated to incorporate the November 19, 2010 publication. The Analysis of the 2001 Job Analysis Survey published by the North American Registry of Midwives will be updated to incorporate the 2016 Job Analysis Survey. By updating these documents, the Board is ensuring they reflect the most current publications.

ASSISTANCE ON TECHNICAL QUESTIONS, SUBMISSION OF WRITTEN COMMENTS: For assistance on technical questions concerning the proposed rule, contact Jennifer Carr at (208) 334-3233.

Anyone may submit written comments regarding this proposed rulemaking. All written comments must be directed to the undersigned and must be delivered on or before October 24, 2018.

Dated this 29th day of August, 2018.

Tana Cory, Bureau Chief
Bureau of Occupational Licenses
700 W. State Street
P.O. Box 83720
Boise, ID 83720
Phone: (208) 334-3233
Fax: (208) 334-3945

THE FOLLOWING IS THE PROPOSED TEXT OF DOCKET NO. 24-2601-1801
(Only Those Sections With Amendments Are Shown.)

004. INCORPORATION BY REFERENCE (RULE 4).

The following documents are incorporated by reference into these rules, and are available at the Board's office and through the Board's website: (3-29-10)

01. Prevention of Perinatal Group B Streptococcal Disease. Published by the Centers for Disease Control and Prevention, MMWR 20~~02~~¹⁰;5~~7~~⁹ (No. RR 1~~7~~⁰), dated ~~August~~ **November** 1~~6~~⁹, 20~~10~~², referenced in Paragraph 350.01.d. (~~3-29-10~~)()

02. Essential Documents of the National Association of Certified Professional Midwives. Copyright date 2004, referenced in Subsection 356.01. (3-29-10)

03. Analysis of the 20~~01~~¹⁶ Job Analysis Survey. Published by the North American Registry of Midwives (NARM). (~~3-29-10~~)()

(BREAK IN CONTINUITY OF SECTIONS)

100. QUALIFICATIONS FOR LICENSURE (RULE 100).

01. Applications. Applications for licensure must be submitted on Board-approved forms. (3-29-10)

02. Qualifications. Applicants for licensure must submit a completed application, required application and licensing fees, and documentation, acceptable to the Board, establishing that the applicant: (3-29-10)

a. Currently is certified as a CPM by NARM or a successor organization. (3-29-10)

b. Has successfully completed Board-approved, MEAC-accredited courses in pharmacology, the treatment of shock/IV therapy, and suturing specific to midwives. (3-29-10)

~~**03. Waiver of Current CPM Certification Requirement.** The Board may waive the current CPM certification requirement, specified here in Paragraph 100.02.a., for any applicant who has continuously practiced midwifery in Idaho for at least five (5) years prior to July 1, 2009. To qualify for the waiver, the applicant must apply for licensure before July 1, 2010 and submit with the application documentation, acceptable to the Board, of the following:~~ (~~3-29-10~~)

~~**a.** The applicant's primary attendance at seventy five (75) births within the past ten (10) years, ten (10) of which occurred in the two (2) years immediately preceding the applicant's application for licensure;~~ (~~3-29-10~~)

~~**b.** Current certification in adult, infant, and child cardiopulmonary resuscitation and in neonatal resuscitation obtained through completion of American Heart Association approved cardiopulmonary resuscitation courses and American Academy of Pediatrics approved neonatal resuscitation courses; and~~ (~~3-29-10~~)

~~**c.** Complete practice data, as referenced in Subsection 200.04, for the two (2) years preceding the application for licensure. The complete practice data documentation must be submitted on a Board approved form.~~ (~~3-29-10~~)

043. Incomplete or Stalled Applications. The applicant must provide or facilitate the provision of any supplemental third party documents that may be required by the Board. If an applicant fails to respond to a Board

request or an application has lacked activity for twelve (12) consecutive months, the application on file with the Board shall be deemed denied and it shall be terminated upon thirty (30) days written notice, unless good cause is established to the Board. (3-29-10)

(BREAK IN CONTINUITY OF SECTIONS)

200. RENEWAL OF LICENSE (RULE 200).

01. Expiration Date. A licensed midwife's license expires on the licensed midwife's birth date. The license must be annually renewed before the licensed midwife's birth date in accordance with Section 67-2614, Idaho Code. Licenses that are not renewed as required will be cancelled pursuant to Section 67-2614, Idaho Code. (3-29-10)

02. Reinstatement. A license that has been cancelled for failure to renew may be reinstated in accordance with Section 67-2614, Idaho Code. (3-29-10)

03. Application for Renewal. In order to renew a license a licensed midwife must submit a timely, completed, Board-approved renewal application form and pay the required application and renewal fees. (3-29-10)

04. Complete Practice Data. The information submitted by the licensed midwife on the Board-approved application form must include complete practice data for the twelve (12) months immediately preceding the date of the renewal application. Such information shall include: (3-29-10)

- a. The number of clients to whom the licensed midwife has provided care; (3-29-10)
- b. The number of deliveries, including; (3-29-10)
 - i. The number of cesareans; (3-29-10)
 - ii. The number of vaginal births after cesarean (VBACs); (3-29-10)
- c. The average, oldest, and youngest maternal ages; (3-29-10)
- d. The number of primiparae; (3-29-10)
- e. All APGAR scores below five (5) at five (5) minutes; (3-29-10)
- f. The number of prenatal transfers and transfers during labor, delivery and immediately following birth, including; (3-29-10)
 - i. Transfers of mothers; (3-29-10)
 - ii. Transfers of babies; (3-29-10)
 - iii. Reasons for transfers; (3-29-10)
 - iv. Transfers of all newborns being admitted to the neonatal intensive care unit (NICU) for more than twenty four (24) hours. (3-29-10)
- g. Any perinatal deaths occurring up to six weeks post-delivery, broken out by: (3-29-10)
 - i. Weight; (3-29-10)
 - ii. Gestational Age; (3-29-10)

- iii. Age of the baby; (3-29-10)
- iv. Stillbirths, if any; (3-29-10)
- h. Any significant neonatal or perinatal problem, not listed above, during the six (6) weeks following birth. (3-29-10)

05. Current Cardiopulmonary Resuscitation Certification. A licensed midwife to renew their license must certify on their renewal application that they possess a current certification in adult, infant, and child cardiopulmonary resuscitation and in neonatal resuscitation obtained through completion of American Heart Association approved cardiopulmonary resuscitation courses and American Academy of Pediatrics approved neonatal resuscitation courses. ()

056. **Continuing Education Verification.** When a licensed midwife submits a renewal application, the licensed midwife must certify by signed affidavit that the annual continuing education requirements set by the Board have been met. The Board may conduct such continuing education audits and require verification of attendance as deemed necessary to ensure compliance with continuing education requirements. (3-29-10)

(BREAK IN CONTINUITY OF SECTIONS)

325. INFORMED CONSENT (RULE 325).

01. Informed Consent Required. A licensed midwife must obtain and document informed consent from a client before caring for that client. The informed consent must be documented on an informed consent form, signed and dated by the client, in which the client acknowledges, at a minimum, that the following information has been provided to the client by the midwife: (3-29-10)

- a. The licensed midwife's training and experience; (3-29-10)
- b. Instructions for obtaining a copy of the Board's rules; (3-29-10)
- c. Instructions for obtaining a copy of the Essential Documents of the NACPM and Analysis of the 2016 Job Analysis Survey, published by NARM; ~~(3-29-10)~~()
- d. Instructions for filing complaints with the Board; (3-29-10)
- e. Notice that the licensed midwife does or does not have professional liability insurance coverage; (3-29-10)
- f. A written protocol for emergencies, including hospital transport that is specific to each individual client; and (3-29-10)
- g. A description of the procedures, benefits and risks of out-of-hospital birth, primarily those conditions that may arise during delivery. (3-29-10)

02. Record of Informed Consent. All licensed midwives must maintain a record of all signed informed consent forms for each client for a minimum of nine (9) years after the last day of care for such client. (3-29-10)