

CMM CIRCULAR

Summer 2022



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The College of Midwives of Manitoba is located on original lands of Anishinaabeg, Cree, Oji-Cree, Dakota and Dene peoples, and on the homeland of the Métis Nation.

VIRTUAL OFFICE HOURS

9:00 a.m. to 4:00 p.m. Monday to Friday
(closed on Statutory Holidays)

Due to part-time status of staff and semi-virtual operation, please email admin@midwives.mb.ca or call the office at (204) 783-4520 if you need to arrange an in-person meeting.

OFFICE CLOSURES

August 1 – Terry Fox Day

September 5 – Labour Day

September 30 – National Day for Truth and Reconciliation

October 10 – Thanksgiving Day

November 11, 2022 – Remembrance Day

MOVING HOME OR OFFICE?

Changes to your work or personal address, phone number or email must be reported to the CMM. This can all be done by updating your profile in the Member Portal.

Additionally, please be reminded that Manitoba Health must be informed of changes in employment status or practice location. For more information email practitionerregistry@gov.mb.ca.

CHANGING PRACTICE STATUS?

Changes in practice status must be requested via the Member Portal. If you are planning a change in practice status, please complete the [online request form](#) at least 30 days in advance.

CONTINUING COMPETENCIES

In 2020 and 2021, CMM implemented temporary options for continuing competencies due to the disruptions to available training in neonatal resuscitation (NRP), cardiopulmonary resuscitation (CPR) and emergency skills (ES) due to the COVID-19 pandemic. As most public health restrictions are now lifted, the temporary options have been reviewed and all practicing members must meet the following requirements:

Annually

- NRP, including the online exam and in-person workshop

Every two years

- Emergency Skills, including the online exam and in-person workshop
- FHS, online or in-person
- CPR, online or in-person

Visit the [Quality Assurance](#) section of the CMM website for more information about the continuing competency requirements and approved course providers. The College will continue to monitor the situation with respect to course availability and will notify members should any changes be required. Please contact the Registrar by email at registrar@midwives.mb.ca if you have questions.

ELECTION 2022

On May 16, 2022 CMM put out a call for nominations for one vacancy on the Governing Council of the College of Midwives of Manitoba. In response to this call for nominations, CMM received two nominations from the membership. During this process, a second seat became vacant. The following nominees were therefore considered elected by acclamation.

Miriam Brown, RM

Term: Fall 2022 – Fall 2025

Initial Date of Registration: December 15, 2009

Nominee Statement:

I have been a midwife for 13 years and (still) love being a midwife. During my career I have worked in both rural and urban settings in Manitoba. Currently I am working in Winnipeg where I've been since 2016. I am honoured to have my name put forward to be on the CMM Council.

For the past year I have been working as the float midwife in Winnipeg. This role has allowed me to take a step back from some of the grind of day to day midwifery work and offer me a broader perspective for our program and the midwives working. This has given me greater insight into the challenges that midwives face in our profession and our roles. As Anne of Green Gables would say it has broadened my scope for imagination.

I see myself as a creative problem solver and I am interested in being part of helping midwifery in Manitoba to continue to evolve and meet the changing needs of our professional workforce, the midwives, the clients and the systems we work within.

Laura MacIntosh, RM (Non-Prac.)

Term: Fall 2022 – Fall 2023

Initial Date of Registration: January 2, 2018

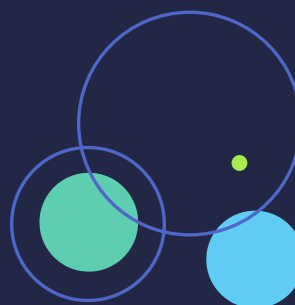
Nominee Statement:

Firstly, thank you for the opportunity to sit on council with the College of Midwives of Manitoba.

I am an Ontario trained midwife graduated in spring of 2013 from McMaster University in Hamilton. I enjoyed a diverse career both in rural and urban settings in the greater Toronto area until 2018 when I returned to my hometown of Winnipeg to settle my life here with my family. I currently work at Access River East in Winnipeg, which has been such a positive experience and offered perspective for how midwives can practice within a larger team of practitioners.

I am forever amazed by the impact midwifery can have on one family's health. I am so very eager to discover ways in which midwives can improve the health of a community overall. My goal is that of a progressive midwifery program in Manitoba, where we, as midwives, have more opportunity to grow in knowledge and skill and widen our scope to reduce barriers to accessing care. I am passionate about midwifery evolving and integrating within the health care system and hope that working with the council will offer opportunities to explore this.

Thank you again for this opportunity.



SELF-REGULATION

In Manitoba, midwifery has been a self-regulating profession since 2000. Self-regulation means the government, on behalf of the public, grants a professional group the privilege and responsibility to regulate themselves. This is a privilege, and regulation must be done in the public interest. For the CMM, this means to protect the public in the provision of midwifery services.

The *Midwifery Act*, Regulation and By-laws set out or 'prescribe' how this self-regulation is to be carried out by the CMM. One such prescription is that midwife members are elected to form the CMM Council, and that members of the public are appointed to Council (by an arm's length committee called the Committee to Select Public Representatives) to ensure that the profession remains accountable to society at large in its decision-making. Public representatives are also appointed to sit on CMM's legislated committees. This participation of both individual midwives and the public is essential for responsible self-regulation.



CMM COMMITTEE RECRUITMENT

Committee to Select Public Representatives (CSPR)

CMM is accepting applications from members of the public for two (2) upcoming vacancies on CSPR, one (1) current vacancy on the Board of Assessors and (1) upcoming vacancy on Governing Council. We are asking midwives to share this information with their clients (past or present) and clients' families, please.

CMM is committed to creating space and access for members of marginalized communities to participate in its work. Those who self-identify as a member of an equity-seeking group are encouraged to apply.

Interested members of the public can find information and the application form at www.midwives.mb.ca/site/volunteer

Board of Assessors

CMM is recruiting for a midwife who has practiced for at least two years to join the **Board of Assessors** for a term beginning in October 2022.

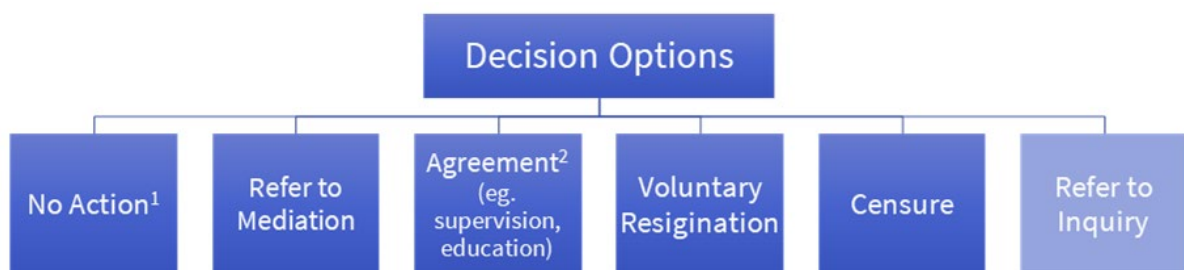
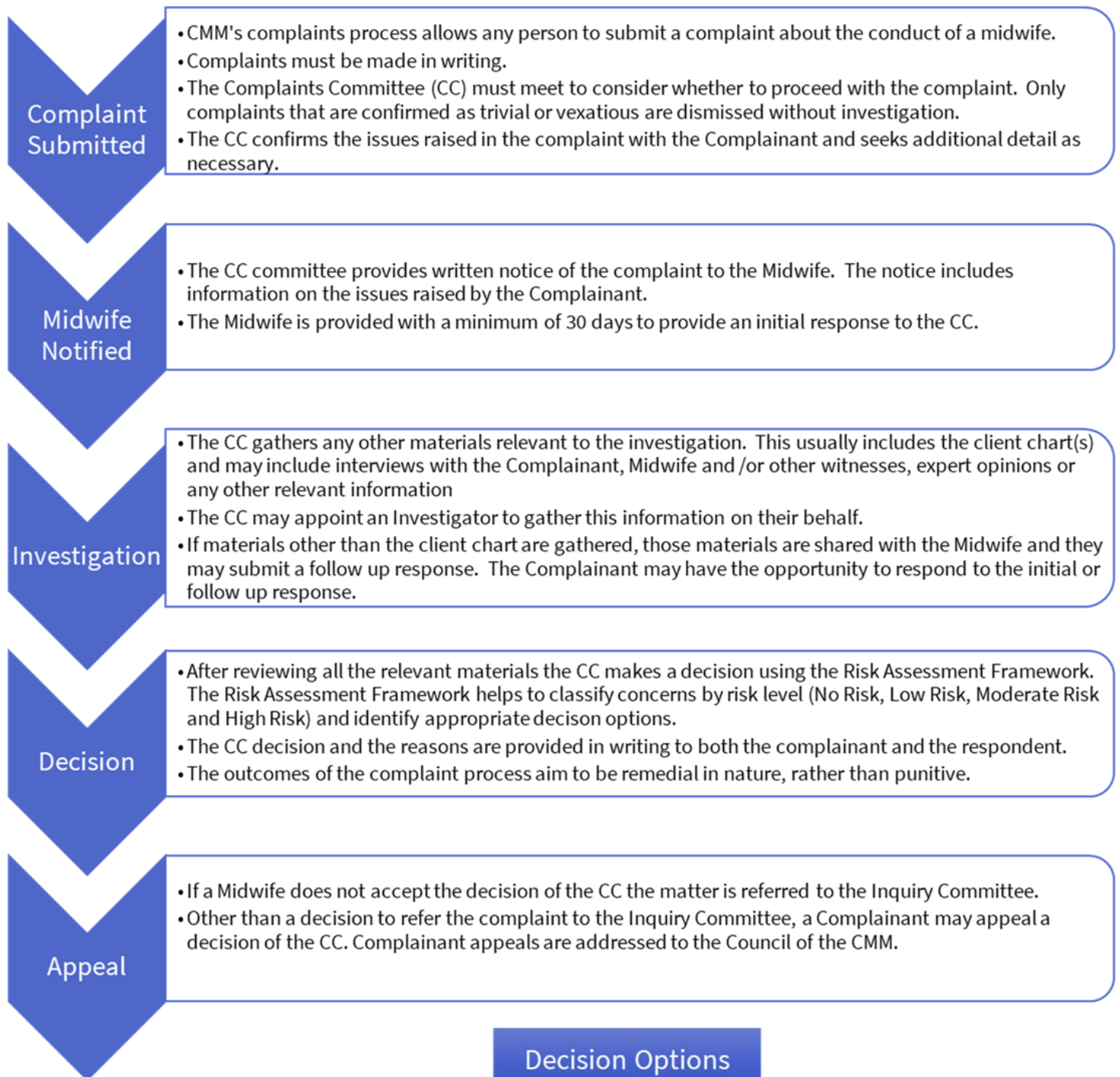
Related links:

★ [Committee Application Form](#)

★ [Board of Assessors Terms of Reference](#)

★ [CMM Policy on Compensation for Council and Committee Members](#)

CMM COMPLAINTS PROCESS



¹If the CC is of the opinion that the Midwife met the standards of practice they can choose to take no further action. A case may have more than one outcome applied.

²The CC is authorized to enter into an agreement with the Midwife that provides for one or more of the following: assessment of the Midwife's capacity or fitness to practice, counseling or treatment, monitoring or supervision, remedial training, conditions on the Midwife's practice.

COMPLAINTS Q&A

1. Who sits on the Complaints Committee?

The Complaints Committee is comprised of two midwives and a public representative. The public representative and one of the midwives must also be a member of Council.

2. How is a complaint investigated?

Before the Complaints Committee makes a decision on a complaint, they must complete an adequate investigation. The first step in any investigation is obtaining the midwifery record of the Client (if the complaint is related to a client). The Committee will determine if further investigation is required. This could include obtaining other health records including hospital records, or other documents relevant to the investigation. It could include interviewing people or witnesses. Sometimes, the Committee may request the appointment of a formal investigator to obtain this information or conduct interviews. The Committee may obtain an expert or legal opinion for some complaints.

3. How long does it take for the Complaints Committee to come a decision on a complaint?

Over the last 10 years the time from receipt of a complaint to a decision being communicated ranged between 5 and 23 months, with the average being 10 months.

Reasons for more lengthy timelines can include:

- Delays in receiving medical records from hospitals or other health care providers
- Delays in receiving coroner reports or other documentation
- Delays experienced in scheduling and conducting interviews
- Providing extensions submission deadlines to parties involved
- Providing the midwife with an opportunity to comment on new information
- Obtaining an expert opinion
- Obtaining legal advice on a complaint matter
- Time required for the CC to draft their reasons

4. What decisions can the Complaints Committee make?

After a thorough investigation and deliberation of the complaint, the Committee makes decisions based on clinical and/or practice issues along with the risk of harm they pose to clients and the public interest. The outcomes of the complaints process aim to be remedial in nature, rather than punitive.

The Committee has a number of options available to them and can include:

- **Take no action on the complaint**

This disposition occurs when the Committee is of the view that the midwife's conduct presents no/minimal risk to the public. The Committee would be of the view that the information in the record

does not support taking any regulatory action and there is no impact on client care, safety or the public interest. The Committee may also be of the view that the midwife appears to be in compliance with the standards of the profession. As part of this decision the Committee may offer advice and recommendations on an issue raised in the complaint. The Committee may do this when they are of the view that the midwife's conduct is low risk to the public and are unlikely to have an impact on client care, safety or the public interest. The Committee would be of the view that the midwife could benefit from advice or recommendations that improve practice.

- **Refer the matter to mediation**

This option is available if Committee determines that the complaint is strictly a matter of concern to the complainant and the investigated person and both parties agree to mediation. If a matter cannot be resolved by mediation, then it is referred back to the Committee for decision.

- **Enter into an agreement with the midwife that provides for one or more of the following:**

- **Assessing the midwife's capacity or fitness to practise midwifery**

The Committee may make this decision where the matter involves an allegation regarding the physical or mental capacity of the midwife

- **Counselling or treatment of the midwife**

The Committee may make this decision if the midwife has illness and/or capacity issues which will adversely affect their practise and there is a risk posed to either the member and the public.

- **The midwife's completion of a specified course of studies by way of remedial training**

This disposition can occur when the Committee is of the view that the midwife's conduct may have a direct impact on client care, safety or the public interest. The Committee would be of the view that the issues raised in the complaint require improvement or remediation. The specific requirements ordered by the Committee can include that the member must engage in activities such as educational courses, mentoring, reflective papers and/or undergo chart reviews. This disposition is generally utilized by the Committee for moderate to high risk matters.

- **Monitoring or supervision of the midwife's practice of midwifery, and/or placing conditions on the midwife's right to practise midwifery**

The Committee may decide to engage in a voluntary agreement between the midwife and CMM to place certain monitoring, supervision or restrictions on the member's practise in order to address moderate risk issues that are likely to have an impact on client care, safety, or the public interest.

- **Censure the Member**

A censure is issued when the Committee has a significant concern that the midwife's conduct may have a direct impact on client care, safety or the public interest if not addressed. This disposition requires the midwife to appear before a panel of the Committee and the Committee will communicate a clear message to the midwife that the conduct is unacceptable and must be changed in order to avoid similar

incidents from happening in the future. This disposition is utilized by the Committee for moderate to high risk matters and may only be used when the committee has determined that no action is to be taken against the midwife other than the censure.

- **Accept the voluntary surrender of the midwife's registration**

The Committee may accept the voluntary surrender of the midwife's registration for high-risk matters. Acceptance of voluntary surrender is usually accompanied by an agreement of if, when, and under what conditions a midwife may re-apply for registration at future date.

- **Direct that the matter be referred, in whole or in part, to the inquiry committee**

This outcome is reflective of high-risk conduct or practise that is likely to have an impact on client care, safety or the public interest. The Committee would be of the view that the issue is serious enough and there is enough evidence to refer and that the concerns cannot be adequately addressed through other dispositions, or previous dispositions have been unsuccessful in remediating concerns.

5. Do I need legal representation to respond to a complaint?

A midwife may consult a lawyer at any point in the complaints process to assist them in navigating the process and their communication with the CMM, but it is not a requirement. Many midwives complete the complaints process without legal representation. The choice rests with the individual midwife. Midwives may have access to legal support for the complaints process through their membership with the Midwives Association of Manitoba.

6. Can the Complaints Committee impose financial penalties?

The Committee has no authority to assess injury or award compensation to the complainant. That is the subject of civil court proceedings.

