

**CERTIFIED DIRECT ENTRY MIDWIFERY COMMITTEE  
INDIANA GOVERNMENT CENTER SOUTH  
CONFERENCE CENTER ROOM 2  
302 WEST WASHINGTON STREET  
INDIANAPOLIS, INDIANA, 46204**

**MINUTES OF JUNE 17, 2016**

Mary Ann Griffin, Chairman called the meeting to order at 9:47 a.m. and a quorum was declared in accordance with IC § 25-23.4-2-4.

Members Present: Mary Ann Griffin, CPM, Chairman  
Mary Helen Ayres, CPM, Vice Chairman  
Zara Fagen, Ph.D, Secretary (via telephone)  
Diane Holmes, CPM  
Alan Wagoner, M.D (arrived at 10:30 a.m.)  
Timothy Alward, M.D. (via telephone)

Staff Present: Darren Covington, J.D., Board Director  
Professional Licensing Agency  
Kimberly Letko, Assistant Board Director  
Professional Licensing Agency  
Gordon White, Deputy Attorney General  
Office of the Attorney General

The Committee voted to adopt the agenda.

Participating Committee Members: Mary Helen Ayres, C.P.M., Mary Ann Griffin, C.P.M.  
Diane Holmes, C.P.M., Zara Fagen, Alan Wagoner, M.D.

Griffin/Ayres, 5/0/0  
Motion carries

The Committee voted to adopt the minutes of the December 11, 2015 meeting.

Participating Committee Members: Mary Helen Ayres, C.P.M., Mary Ann Griffin, C.P.M.  
Diane Holmes, C.P.M., Zara Fagen, Alan Wagoner, M.D.

Holmes/Ayres, 5/0/0  
Motion carries

## DISCUSSION:

The Committee then held a discussion regarding comments the Committee wanted to make to the Medical Licensing Board regarding LSA 15-448.

Participating Committee Members: Mary Helen Ayres, C.P.M., Mary Ann Griffin, C.P.M., Zara Fagen, Ph.D., Alan Wagoner, M.D., Timothy Alward, M.D., Diane Holmes, C.P.M.

The Committee by consensus requested the following comments be submitted to the Medical Licensing Board regarding LSA 15-448:

### Continuing Education

- The requirement to have at least 50% of continuing education completed in-person is burdensome, especially for solo midwives. A midwife must plan around a client's labor, and requiring attendance at in-person courses may prove challenging.
- There only two courses that offer emergency life support, identification of potential complications, and identification of high risk births. Both courses are full-day courses. Even though the requirement is one hour per year; in practice, this will require the midwife to attend a full-day course on these topics each year. The Committee recommends either elimination of these specific continuing education courses, or only requiring a course each renewal cycle instead of every year.

### Peer Review

- NARM was taken out the list of approved peer review sponsors under the impression they did not sponsor peer review. However, they sponsor peer review at a national conference.

### Application Requirements

- AIM is recommending that every midwife complete the NARM Bridge course. The Committee believes this is unnecessary and too burdensome. This is not required by statute and should not be included.

### Collaboration Requirements – Number of Collaborations


- Limiting the number of collaborations to four is too low. With the shortage of physicians willing to collaborate, it will be very difficult, if not impossible, for every midwife to find a collaborating physician. The Committee originally recommended ten, but proposes seven as a compromise.
- The goal is to license as many midwives as possible to begin collecting data about the practice of midwifery in Indiana, and to use that data to inform future policies.
- Midwives should be treated more like APNs, for which there is no limit on the number of collaborations, instead of PAs.

### Collaboration Requirements – Distance

- The Committee strongly believes that limiting the distance of the collaborating physician to the planned location of delivery to an adjoining county or 50 miles will effectively prohibit the majority of midwives in the State from finding a collaborator.
- Most patients who seek midwifery services and are willing to travel longer distances to meet with a physician as needed.
- In practice, collaborating physicians typically do not provide backup care; this is done by the patient's physician, and no collaborating physicians go to the patient's home to deliver.
- The Committee also believes that the exception process will result in a burdensome process, especially for midwives in rural areas who may need to keep coming back to the Board for permission to exceed the distance requirement.
- There is a shortage of physicians willing to collaborate. For example, 80% of OB/GYNs in Indiana are connected to IU Health, and IU health prohibits them from signing these agreements. Even some certified nurse midwives have had to collaborate with neurosurgeons and anesthesiologists in order to find a collaborating physician.
- There are also 34 counties in Indiana without inpatient obstetrical services. The Committee proposes that the distance requirement take into consideration patients who live in a county without inpatient obstetrical services.

There being no further business, the meeting adjourned at 11:55 a.m.

  
Mary Ann Griffin, Chairman

  
Zara Fagen, Secretary