

# Department of Health

## Midwifery Advisory Committee

### Policy/Procedure

The Washington State Department of Health Midwifery Program issues this guideline in accordance with WAC 246-834. A guideline adopted by the Secretary of Health is an official opinion about safe midwifery practice. The guideline is not legally binding and does not have the force and effect of a duly promulgated regulation or a declaratory ruling by the Secretary.

<b>Title:</b>	Guidelines for Licensed Midwives Who Use Birth Assistants	<b>Number:</b>	<b>3.1</b>
<b>Reference:</b>	RCW 18.50, WAC 246-834		
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<b>Supersedes:</b>	June 5, 2019, September 13, 2016		
<b>Approved:</b>	Washington State Department of Health Midwifery Program		

### **Purpose Statement**

According to Washington law, a licensed midwife (LM) may render medical aid for a fee or compensation to a woman during prenatal, intrapartum, and postpartum stages or to her newborn up to two weeks of age.

The purpose of this guideline is to prevent licensed midwives from aiding and abetting the unlicensed practice of midwifery. This guideline was created because of the absence of formal rules identifying appropriate duties and activities for a licensed midwife in contrast with an unlicensed, unpermitted birth assistant. These guidelines address normal, non-emergent midwifery care.

### **Definitions for Terms Used In This Document**

**Assess:** evaluate or estimate the true nature, ability or quality of.

**Assist:** to give help.

**Birth assistant:** any unlicensed, unpermitted individual who attends births with a licensed midwife and acts as a compensated assistant. This definition does not include

midwifery students enrolled in a state-approved program, an individual such as a father or family member participating in a birth event, or any other duly licensed individual who works at a birth.

Compensated: means some form of payment by a licensed midwife or any other individual, and may include non-monetary items.

Direct Supervision: A supervisor must be physically present on site and available to intervene when a birth assistant performs any clinical care task, as outlined below, at a birth and during immediate postpartum care.

Licensed Midwife: an individual who is licensed as a midwife in Washington.

Monitor: to remind, advise or warn; observe and regulate.

Obtain: get, acquire, or secure.

Support: give assistance to; enable to function or act.

### **Background and Analysis**

The midwife is the primary caregiver for the birthing woman and her baby. The birth assistant takes direction from the midwife and, by law, is not allowed to perform duties that require midwifery licensure.

Administering medication in Washington: several credentialed healthcare professions are authorized to administer medications under the direction or supervision of an appropriately licensed profession. For example, the medical assistant certification requires a minimum of 720 hours of training and a clinical externship of at least 160 hours; and licensed practical nurse and registered nurse licensure both require completion of nursing education programs that are a minimum of 60 quarter credits and passage of a national examination.

If a licensed midwife allows their assistants to perform an activity for which they are not licensed, it may be considered aiding and abetting the unlicensed practice of midwifery.

### **Recommendations**

For continuity and consistency statewide for the use of birth assistants, the following duties are broken down into those that require licensed midwife judgment and skill, and those that are appropriate for a birth assistant.

Duties that are appropriate for a licensed midwife, include but are not limited to:

- Pre-natal, intrapartum, post-partum exams, delivery of the infant
- Assessing maternal vital signs, voiding, fluid intake, eating, etcetera
- Assessing fetal heart tones
- Assessment of APGAR scores

- Assessing the newborn transition
- Assessment of fundal height and monitoring of bleeding

Duties that are appropriate for a birth assistant under direct supervision of a licensed midwife:

- Assist with intrapartum and post-partum care
- Provide labor support
- Check layout of supplies for easy access to equipment and medications
- Obtain and report fetal heart tones
- Obtain and report maternal vital signs (blood pressure, temperature, pulse, respirations)
- Ensure warmth and safety of the newborn
- Obtain, report, and record the condition of the newborn
- Check and report on maternal fundus and lochia
- Assist with immediate post-partum care
- Check and report continued activities of mother (bleeding, voiding, fluid intake and eating, maternal adjustment, physical needs, etcetera)
- Monitor and support the newborn as directed by LM
- Assist the mother and newborn establish breastfeeding
- Assist with post-partum care until discharge
- Document findings in the health care records

The birth assistant may assist as instructed by and under direct supervision of the licensed midwife. However, birth assistants may not perform actions within the midwifery scope including but not limited to the following:

- Pelvic or dilation exams, intravaginal procedures
- Urinary catheterization
- Newborn exams
- Suturing
- Administration of medications
- IV placement

### **Conclusion**

Performing assessments, administering medication, and conducting other higher-level clinical functions carries a high risk of harm if not properly trained. The performance of these functions already requires a healthcare credential, and should not be performed by birth assistants. A licensed midwife is ultimately responsible for assigning the duties performed by an assistant during a birth. These guidelines will help credential holders avoid aiding and abetting unlicensed practice.

If you have further questions about appropriate use of birth assistants, please contact the Department of Health Midwifery Program at 360-236-4883.