

Minutes of September 20, 2010 meeting of members of Consumers Supporting Midwifery Care

Chair: Andrienne

Minutes: Margaret C

Attendees: Andrienne, Margaret C., Wendy J, Susan M., Stacey, Melissa F., Andrea K-R, Sheila, Wendy H, Jennifer F-W, Allison, Julia D, Paula, Diane, Leslie

7:30 start at the Kneaded Touch Massage Therapy Clinic in Westboro (389 Danforth Ave)

<http://www.kneadedtouch.ca/>

Our chair, Andrienne, has a quote for people to consider:

"The intuitive mind is a sacred gift and the rational mind is a faithful servant. We have created a society that honours the servant and has forgotten the gift." Albert Einstein

Introductions done.

No one had any comments on the minutes.

Agenda item 1: Continuous Midwifery Care for VBAC clients at the Civic

A letter was sent to the Civic. A single reply was received from Dr. Faught. We have not heard from George yet, which is the reason for not replying. Dr. Faught's reply was read. He will address as the relationship between the hospital and the midwives strengthens (pushing issue back to George, who had not yet responded). Sandra has a meeting on Thursday with Dr. Faught. Consumers have contacted midwives.

Feedback on this issue has been sent via email.

Sheila will scan her letter and make it available (probably through the website).

Robin Guy has offered to write a letter template, if CMSC decides to go that route. Robin to email Sheila if requested.

The Collective will resume VBAC home births if they can also catch at the hospital.

Sandra will get information to Sheila who will get feedback from the meeting back to the group.

The oxytocin issue was bigger.

The SOGC recently issued a statement calling for return to VBAC.

The conference in Toronto was mentioned. Sandra will be attending, with the intent to get feedback to the group and to ask about the atmosphere regarding VBAC and midwifery care.

Email update following the meeting (sent via email November 18, 2010):

Hello Members of the Consumers Supporting Midwifery Care,

The Midwifery Collective is pleased to announce that the Ottawa Hospital has now changed its policy regarding women wanting vaginal birth after cesarean. Midwives are now able to maintain care in labour of women wanting VBAC. As a result of this change, the Midwifery Collective of Ottawa will once again be caring for women wanting a vaginal birth after cesarean.

The Midwives of the Midwifery Collective of Ottawa

Agenda item 2: ICC

Wendy J - The ICC just wanted to introduce ourselves to the CSCM. Everything was said at the last meeting. Andrienne asked that all members, beyond those present at the meeting, be provided with more information about the purpose of ICC.

Email address for ICC requested. Informedchoiceottawa@gmail.com

Mission statement read by Wendy, with goals (included below)

Caution must be exercised when working the client-midwife relationship postpartum when there are concerns about the quality of care provided.

It was questioned whether or not there is overlap between ICC and CSMC. Discussion to date around the formation of a new group has raised strong emotions. ICC website is yet to be created. There is no consensus on a decision to transfer emails of CSMC to ICC. It was agreed that notice of the new group be emailed to all CSMC members to raise awareness of the purpose and goals of the ICC. This one-time communication will include the ICC web address so that people can choose to follow up independently, which will be delayed until the website is up and running.

If CSMCfeedback@gmail.com receives any relevant feedback, it can be forwarded to ICC as well.

ICC Mission Statement

The Informed Choice Coalition (ICC) is a grassroots organization working towards improvement in the informed choice process for interventions offered before, during, and after a birth, from pre-pregnancy to postpartum.

Comprised of concerned citizens, midwives, and various grassroots and professional organizations, we believe that women and their families have a basic right to make the decision for or against any offered intervention in the course of her care, including prenatal testing, hands-on interventions during pregnancy or birth, and postpartum testing or treatment of the mother-baby dyad. In order to make this decision, women rely on their birth-care providers, which puts an enormous burden upon midwives and doctors to provide complete, up to date, unbiased information. ICC seeks to make this information readily available, offering women and their birth care providers clear, accurate, unbiased data on which decisions can be made.

We do not seek to encourage or discourage interventions of any kind, but rather to ensure that the choices regarding interventions are placed firmly in the hands of the birthing family, who lives with the long-term outcome of these decisions.

ICC Goals

Short Term

Create clear definitions of "intervention" and "informed choice" and ensure that professional organizations and birth professionals understand the expectations of informed birthing women regarding both the level and presentation of information when interventions are offered.

Work towards collaboration with professional organizations in Ontario such as the College of Midwives, the Association of Ontario Midwives, and the midwifery schools at Ryerson and McMaster to ensure that informed choice is a priority both in policy and in teaching new midwives.

Long Term

Create and maintain an online "clearinghouse" of accurate, up-to-date data (peer reviewed papers and white papers) regarding the range of common birth interventions, in order that birth professionals and birthing families have a clear and reliable central resource.

Offer public information sessions which will give opportunities for families to learn about informed choice and how to achieve it.

Agenda item 3: CSMC

Agenda item 3 (i): CSMC email

CMSC is looking for a long term replacement to handle the email, info@midwiferyconsumers.org. Many thanks to Leslie Ashton, who after many years of handling the CSMC email, is stepping down from this role within the group. Erin Shaheen will assist temporarily over the summer.

Leslie has had one volunteer, but is waiting to hear back from her. Andrienne asked for objections. No objections. Providing this volunteer is willing, she will take over the responsibility of the CSMC email. There was concern voiced on how much this person would need to know about CSMC to answer all these questions. Leslie will help with the transfer. Andrienne suggested providing this woman with an attendance list with a list of who to contact. No objections.

Update received via email on September 27, 2010:

Renée Boucher will be assuming the email, beginning in January, 2011. Between now and then, Julie F and Leslie will ensure that the webmail is up and running. Leslie will continue to be available as needed if there are any questions related to the email.

Many thanks to Renée for assuming this position.

Agenda item 3 (ii): process for members to lodge complaints against CSMC

A fair, respectful and impartial process for any member(s) that lodge complaints against CSMC, either with respect to how CSMC functions, or in regard to a particular CSMC volunteer(s).

Diane suggested that midwifery representatives not be present and move this addenda item to the end of the meeting. Andrienne asked if anything has come up in the history of this group where midwives would have to separate themselves from the group. No reason to separate. Discussion proceeded.

Leslie - would like to establish some sort of guidelines. If anyone has any issues with anyone who is taking on active responsibility, we need guidelines for someone to bring forward complaints.

Andrienne suggested putting it in writing, bringing it to a meeting and putting it on the agenda. Sheila suggested that the new email co-ordinator could send email rants up at the next meeting and it would be her responsibility to bring it forward if warranted.

Jennifer F-W - difficult to get tone or intention in email. When complaints are raised, they can be delayed to the next CSMC meeting and raised in person. Specifically when the complaint refers to a specific volunteer.

Leslie - if a volunteer is directly receiving criticism, what is the strategy for this?

Andrienne - It is expected that members conduct themselves with care and respectful communication. No one person need to entertain disrespectful words or actions privately. If a misunderstanding or conflict requires group attention then it would be best outlined in writing. Otherwise, a brief written review/explanation needs to be brought forward onto the agenda for a next meeting.

Agenda item 3 (iii): mandate/scope/mission of CSMC

Review/clarify the mandate/scope/mission of CSMC and its plans for the future, in light of the other groups that are popping up, so that the goals of the group will be maintained with specific attention to everyone's personal safety

Leslie - not sure we need to do this. ICC is operating as a separate group. This issue has been resolved.

Agenda item 4: Midwifery Practices

Agenda item 4 (i): Updates from the practices

MGO - Diane. They have approved and engaged a second new registrant. She will start in October and is presently getting her French up to speed. Leah Hackett Smith.

MCO - Paula. VBAC meeting on Thursday. No other updates.

OVM - no one present. No updates provided.

PR - Wendy. The practice is moving to Blackburn Hamlet, probably before Christmas. They might be changing their name to East Ottawa Midwives.

MVM - no one present. No updates provided.

GBM - no one present. No updates provided. Stacey - Hospital in Winchester is no longer allowing midwives to catch VBACs. Andrienne suggested that the midwifery groups establish some sort of communication to join forces to conquer the VBAC issue. There is willingness at the Group and Collective to discuss this with those who are also working with the problem of continuity of care. This is an ongoing issue with the Civic and they are seeing a resolution. Would like to confirm that this is the case. Heard through the grapevine. Will investigate.

LGM - no updates provided.

Gatineau - Wendy J brings greetings from the Gatineau midwives. Toby Lynn sent list to Wendy that has been included in the minutes below. The head midwife is Parvin.

We do VBACS at the Birth Centre although we encourage women to birth in hospital. We do not use electric fetal monitoring for VBACS unless there is an additional indication, like an interval of less than 24 months from caesarean to estimated due date. We currently have 8 (9?) midwives on staff and about 5 postpartum doulas. The current obstacle to hiring new midwives is having our funding extended -- the midwifery budget comes from the general health care budget, whereas new doctors are funded through RAMQ. The desire is there (in the administration) to have more midwives, but bureaucracy moves sloooooowly and the budget is a real concern. We do about 200-220 births a year. Roughly 75% planned for the birth centre, 25% for home and under 5% for hospital, mostly at the request of the midwife. We are currently doing about 10% of the births for the region--meeting the provincial goal for 20(12?) in the Politique de périnatalité. Of the first time moms who start labour under our care, roughly 70-75% will birth under our care. Transfers are usually for augmentation of labour with oxytocin, forceps, vacuum, caesarean section and (usually at the suggestion of the midwife) epidurals. Over the last five years, 0.5% of women transfer because they have requested an epidural. Our caesarean section rate has ranged from 5 to 9 percent over the last few years. Our policy for taking clients is "first come, first served." Midwives in Québec do not have hospital privileges, they have hospital access.

Agenda item 4 (ii): Question from member

"I have heard that epidurals at the civic are a transfer of care for midwifery clients. Is this true?"

MGO - no, this is not the case.

Agenda item 4 (iii): request for a French translation of our CSMC flyer/pamphlet

Ongoing, with thanks to Melissa.

Agenda item 5: Finances

Bank Account balance (as of Aug. 31, 2010): \$1150.65 plus \$200 yet to be deposited
Petty Cash - \$32.88

The CSMC requires a volunteer willing to assume the finances. The bank is a TD bank, located in Kanata at 700 Eagleson (corner of Michael Cowpland). Dr. Kelly Norman is the other signature on the account. The account requires 2 signatures for any cheques written.

We may not be getting counters because potential volunteers not sure what responsibilities it entails. Less than 6 transactions a year. Just need to make 1 appointment at the bank to change the ownership. Leslie - very minimal. Sheila - we should have a payola button on the website for the account.

Deposits can be made at any TD Canada Trust branch, by bank machine. There are not many deposits to do. Essentially, the only visit to the Kanata branch needed would be to change the signatory on the account to the person assuming this role

For any cheques written on the account, mailing them to Dr. Kelly Norman for signing is an option, if you are not close to the Westboro area.

No volunteers.

Agenda item 6: Information Sessions

Leslie - booking library in Barrhaven

Andrienne - comment about not using the word "insinuating". Please be mindful of the language.

Agenda item 7: Media volunteer

Jennifer - would like to survey the members to get feedback from the members, to see what has been done. Suggested using survey monkey. \$20 or so. Collect information on any topic. No objections. Jennifer requested set date. Joanne has offered her support to Jennifer (senior communications from AOM). Jennifer will talk to Sheila to get money. Very appreciated. Lots of heads nodding in agreement. Many thanks to Jennifer!

Agenda item 8: Fundraising

Agenda item 8 (i): BACN monthly email

Many thanks to Carine Chalut for her ongoing commitment and fantastic work with co-ordinating the monthly BACN! Many thanks to our supporters!

September welcomed our newest subscriber. Many thanks!

Hautemama

Capturing the Fun and Fashion of Pregnancy & Beyond

www.hautemama.ca

sue@hautemama.ca

Tel: (613)592-3800

Tel: (866)615-3800

Agenda item 8 (ii): Onesies

Sheila - no update. She still has some onesies. Information is on the website. Check the website for purchase information.

Agenda item 9: Future meetings

Agenda item 9 (i): Review

Reasons to call a meeting

Minimum number of attendees to make a meeting worthwhile

Leslie - can we establish as a group what would warrant having a meeting? What are the requirements to have a meeting?

Stacey - suggested once a quarter, skipping the summer.

Sheila - one should be before the picnic. Not right before Christmas. Suggested Jan 17, May 16 (3rd Monday in Sept, Jan and May). Suggested minimum of 7 people required.

Agenda item 9 (ii): Meetings for 2010-2011

January 17, 2011

May 16, 2011

Agenda item 10: Anonymous Feedback.

Just a reminder to consumers. If you have any feedback (positive and/or constructive towards conflict resolution) regarding midwifery care, but would prefer to not contact your midwifery practice with your feedback for whatever reason, you can do so anonymously at:

CSMCfeedback@gmail.com

The email address is operated by Donna, who will pass along feedback to all midwifery practices, anonymously.