

COLLEGE OF
MIDWIVES
OF ONTARIO



ORDRE DES
SAGES-FEMMES
DE L'ONTARIO

College of Midwives of Ontario

Entry to Practice Review

for submission to

The Office of the Fairness Commissioner

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Executive Summary

The College of Midwives of Ontario includes *“protecting, promoting and advancing midwifery and its core tenets”* and *“striving for regulatory excellence”* among its strategic priorities. Effective registration practices are critical to achieving the goals that support these two priorities.

In carrying out the mandatory review required by the Office of the Fairness Commissioner, the CMO used its staff resources to:

- review, in detail, the clinical experience requirements of all other jurisdictions in which midwifery is regulated in Canada;
- conduct a consult with educators about the clinical experience requirements in international jurisdictions;
- review the results of a survey of 2009 and 2010 International Midwifery Preregistration Program graduates with a view to understanding their perspective on the clinical CMO’s experience requirements;
- consult with education program directors with a view to understanding their perspective on the CMO’s clinical experience requirements;
- review, in detail, the registration and third-party assessment fees of all other jurisdictions in which midwifery is regulated in Canada;
- consult with the IMPP about their tuition and other fees and the sources of support available to students;
- review the findings of the fiscal 2010 compliance audit of registration practices to ensure that registration decisions continue to happen in a timely manner;
- reviewed current registration timelines to ensure that policies implemented as a result of the audit are being followed;
- consider best practices that are being utilized by the bridging program.

Midwives in Ontario:

- are primary care professionals;
- work within a very specific model that requires they be competent in all aspects of midwifery care across the continuum of care;
- are required to be competent to provide care both in the client’s home and in the hospital;
- work as independent practitioners;
- are privileged members of hospital teams;
- work within a managed program of the Ministry of Health and Long-Term Care that requires they operate within a business framework.

The unique requirements created by the model of care and the managed program mean that clinical experience prior to registration is critical to the success of newly registered midwives. In addition to providing hands-on clinical experience, the CMO’s pre-registration requirements are structured to ensure that students, both those in the baccalaureate and in the bridging program, are exposed to and understand the structure within which they will be required to work.

Registered midwives, while growing in number, are still a small group relative to other regulated health professionals in Ontario. Despite this, they are primary care providers who attend more

than 12,000 women a year. The cost of regulating this profession is not covered by the revenue generated by registration or renewal fees. As the CMO continues to be reliant on the Ministry of Health and Long-Term Care for a percentage of its annual budget, the College is directly accountable to the public for how it uses this funding. The CMO is confident that it is doing so in a manner that is responsible in that it ensures that the standard of midwifery care in the province is high and that regulation of the profession is efficient and effective.

The CMO approach to registration is one that is linked to an expectation that every applicant and registration will receive careful, personal attention to their membership registration or renewal. Staff works with each applicant to ensure that they are informed about the process and best able to advocate for themselves. This approach, coupled with clearly articulated policies and procedures, results in a process that is timely and that takes into account the specific needs of applicants.

Council and staff are continuously monitoring and evaluating the infrastructure that supports this core function, the policies and procedures that direct the work of those involved with registration decisions, and the outcomes of the registration process to ensure that they are meeting the objective of being transparent, objective, impartial, fair and efficient. This mandatory review, along with the comprehensive compliance audit conducted at the end of fiscal 2009 – 2010 and the annual registration practices report confirm that the CMO is meeting these objectives.

As a result, the recommendations arising from this review are largely geared toward maintaining the course established by the CMO's strategic plan to achieve regulatory excellence and to protect, promote and advance midwifery and its primary principles. In general, they include:

- continued work with the IMPP to monitor the success of graduates in integrating into practice in Ontario once registered;
- investigating how the CMO's registration database may be used to enhance support to registration applicants;
- consulting with members and applicants about the proposed increase to the registration fee.

Objectives and Scope

This review was a mandatory review, undertaken at the direction of the Office of the Fairness Commissioner. It builds on the comprehensive compliance audit completed in fiscal 2010, the annual registration practice reports for 2009 and 2010. It also builds on the the CMO's internal reviews of: the registration database that was launched in for the 2009 renewal; the annual financial review; IMPP graduate success; and, registration outcomes.

The objectives for this review were straightforward: meet the requirements set out by the OFC and anchored in the required principles (i.e., helping to ensure fair access; making a difference; adding value; and inviting the participation of interested individuals and groups); and add to the continuous quality improvement efforts of the CMO with regards to the registration function.

The scope of the review was developed to comply with the scope determined by the OFC and to meet the requirements set out in the OFC’s document –“Conducting Entry-to-Practice Reviews: Guide for Regulators of Ontario Professions.” The clinical experience requirements and accompanying best-practices for the registration and integration of internationally trained midwives was given the most in-depth review since this is something that is directly linked to the successful integration of new registrants, particularly those who were internationally educated midwives, into the model of practice in this province. The CMO registration fees, which have been the same for 10 years and that are considered as part of the annual budgeting process are reviewed on an annual basis; this report provided the opportunity for a more in-depth review of the fees and their reasonableness. The timeliness for CMO decision-making were reviewed in relation to the findings of the compliance audit that was completed 11 months ago and the CMO’s response to recommendations of this audit.

The review questions for this review were taken directly from section 5 of the OFC’s guide for the three required sections: the necessity and relevance of workplace or clinical experience requirements; the reasonableness of fees; and, the timeliness of decision-making.

Methodology

The work of this review was done by CMO staff, specifically: the Registrar, the Policy Analyst and the Registration Coordinator. The oversight of the review was the responsibility of the Registration Committee and resulting recommendations will be shared with the CMO’s Executive Committee as well as the full Council. Through the Registration Committee, Council will monitor the implementation and impact of work that results from the report.

The types and sources of data obtained for this review include:

TYPE of DATA	SOURCE	NUMBER and CATEGORY OF PARTICIPANTS
Clinical experience requirements in regulations, standards and by-laws	- all other Canadian jurisdictions where midwifery is regulated	- regulatory colleges in British Columbia, Alberta, Saskatchewan, Manitoba, Quebec, Nova Scotia, Nunavut, and the Northwest Territories
Perspective on the necessity and relevance of clinical experience requirements	- International Midwifery Preregistration Program graduate survey - Midwifery Education Program directors and faculty - International Midwifery Preregistration Program	- 15 graduates of the program - 2 program directors; 2 faculty members - 1 program director

TYPE of DATA	SOURCE	NUMBER and CATEGORY OF PARTICIPANTS
	directors	
Registration and third party fees for midwifery regulators in Canada	- all other Canadian jurisdictions where midwifery is regulated	- regulatory colleges in British Columbia, Alberta, Saskatchewan, Manitoba, Quebec, Nova Scotia, Nunavut, and the Northwest Territories
Registration and third party fees for other health professional regulators in Ontario	- Federation of Health Regulatory Colleges of Ontario members	- 8 Ontario health regulatory colleges
Timelines for registration decision-making	- CMO staff - CMO Council - CMO fiscal 2010 compliance audit findings	- 3 staff members - Registration Committee members

This review was conducted over a 6-week period in order to comply with the OFC's report deadline. The review was conducted using:

- midwifery regulatory college websites and consultations with staff from the various colleges
- Ontario health regulatory college websites and consultations with staff from the various colleges
- interviews of IMPP and MEP directors and faculty
- review of IMPP graduate survey results
- review of CMO financial information (i.e., budgets and annual statements)
- review of the CMO's fiscal 2010 compliance audit report
- review of CMO member application and registration files
- interviews of CMO staff

Analysis and Findings

Clinical Experience Requirements

There are currently 3 routes of entry into midwifery practice in Ontario: through labour mobility provisions that recognize the clinical experience of midwives who meet the requirements of other regulated jurisdictions in Canada; through a 4-year baccalaureate Midwifery Education Program offered at 3 university sites in the province; and through the International Midwifery Preregistration Program, a professional bridging program for internationally trained midwives.

The IMPP, offered through Ryerson University, is the third party provider for assessments of internationally trained midwives in Ontario. The program was developed and implemented by the CMO in collaboration with Ryerson University. As the model for Canadian midwifery education, a four-year baccalaureate, is very rare in the international context, a credentialing equivalency is not feasible. Individuals who wish to practise midwifery in Ontario, who were trained outside Canada, must complete the IMPP assessment. Assessment is competency-based and occurs at admission and at six weeks, allowing for individualized learning plans that respond to the educational and practical gaps for the applicant.

Since 23 of the 27 countries that have been represented by IMPP graduates do not provide university programs in midwifery, midwives practise in these countries as auxiliary professionals, with a reduced scope of practice. The vast majority of visible minority participants and participants with first languages other than English do not have university based educations, as this level of midwifery education is unavailable in most countries outside of western industrialized countries and Iran (many Iranian midwives hold either a 2 year or 4 year degree depending on when education occurred).

The IMPP has a mandate that is unique for a health profession bridging program in Canada: it must provide sufficient custom-designed curriculum to facilitate entry to registration and employment in Ontario where the entry requirement is a 4 year university degree, and midwives function (like family physicians) as community based primary care professionals with admitting privileges. This requires intensive accelerated learning of knowledge, skills, communication training and orientation to new competencies. This commitment to bridging the gap through a comprehensive enhancement curriculum over 6 months for those who require it as determined by prior learning assessment is critical to the CMO and IMPP's commitment to diversity.

The IMPP offers two streams allowing internationally trained midwives to receive either one or two 12- week terms of a combination of classroom work, simulator lab work and community training depending on assessment, followed by a 13 week clerkship placement in a midwifery practice; making the program nine months at longest. The shorter option, which utilizes exemptions, referred to as "fast-track bridging" is undertaken by about a third of IMPP applicants. As well, full exemptions in the IMPP also allow for individuals not requiring any bridging to register in Ontario.

The IMPP accepts students from a range of backgrounds, geographic and cultural, as well as different midwifery models and training. To meet the needs of a diverse population, a significant portion of what the program does is related to orientation and integration, giving internationally trained midwives the opportunity to have access to clinical community environments. This is particularly important as English is not a first language for 80% of the population. The clinical component gives internationally trained midwives the opportunity to adapt to a new role and experience the Ontario model of care in a practice setting, as well as experience the business model of Ontario midwifery practices as it is unique. As well, the program gives internationally trained midwives access to professional liability insurance and Neonatal Resuscitation Program (NRP) offered by the Canadian Pediatric Society and Cardiopulmonary Resuscitation for health professionals, which are required for entry to practice, but not available to members of the public, only regulated health professionals and students.

Workplace or clinical experience requirements in Ontario

In the midwifery registration regulations, clinical experience is detailed for prospective applicants. This same information is available in plain language on the CMO's website under "Becoming Registered."

Attendance at births as a primary midwife, in the context of continuity of care and location of birth, are required of registration applicants based on the numbers required in the CMO's Registration Regulation. To be registered with the College, applicants must have attended 60 births - 40 as a primary midwife, 10 home births, 10 hospital births. Continuity of care (pre-natal, intrapartum and post natal care) must have been provided in 30 of the 60 births.

The MEP enables its students to attend 60 births within the clinical experiences built into the four-year program. Upon entering the IMPP, internationally trained midwives are credited with 20 births, in recognition of their previous work experience. The IMPP provides each internationally educated midwife, during a 13 week clerkship placement, with a minimum of 12 primary care births and 10 continuity of care births in Ontario.

All IMPP graduates receive a supervised practice plan on application for registration with the CMO; this supervised practice plan ensures that new registrants attend the remaining required births in their first year of practice, in order to meet clinical midwifery experience requirements for general registration.

The overall reason for this specificity is to support and maintain the model of midwifery care in Ontario by ensuring that entering registrants are familiar with the model and are prepared to provide safe, effective care within that model. These requirements are in place for all registrants in the form of active practice requirements, which require members to demonstrate that they have attended at a minimum of ten births at home and ten births in the hospital annually.

Through the education programs – both the baccalaureate and the bridging program - potential new registrants also have access to the continuing competency certification courses and programs required for registration with the CMO. These requirements are the successful completion of: the Neonatal Resuscitation Program run by the Canadian Paediatric Society; Cardiopulmonary Resuscitation certification for health care professionals; and an obstetrical emergency skills program (i.e., Managing Obstetrical Risk Effectively, Advances in Labour Risk Management, or Emergency Skills Workshop). The costs for these programs are included in the program fees and sessions are offered as part of the programs of study.

Education program directors and faculty note that the CMO's clinical experience registration requirements provide a useful and reasonable framework around which the clinical components of the education programs can be structured. Specifically, the requirements: help educators to set guidelines in developing expectations and objectives for theory and clinical courses; create a heightened level of accountability for practices offering clerkship positions; help to ensure that

students are not being used to fill gaps in practices that are not able to offer full experience; and, support the focus on competence by requiring adequate experience across the competencies.

Providing care to clients throughout pregnancy, labour and the early postpartum as a primary caregiver is an important part of the Ontario model of care that is far from universal. New registrants to Ontario need to have experience in this capacity to be ready for the responsibilities and expectations that come with this role. Being a privileged member of the hospital team, as only doctors, dentists and midwives are, and providing care as a primary caregiver in an interprofessional setting requires skills that can only be gained from clinical experience.

The clinical experience required of all new registrants entering practice in Ontario also provides a base for understanding the complexities of the managed care model. Specifically, it allows new registrants to observe what is expected of midwives in terms of being an independent practitioner directing case load management, administrative work and reporting. This is important to establishing an understanding of the level of accountability required of a midwife working in this province.

In addition to the College of Midwives of Ontario's (CMO) goal of ensuring that all new registrants enter practice with recent experience working in the Ontario health care system, the clinical experience requirements serve two purposes: to provide the experience that hospitals will expect when granting privileges to midwives; and connecting internationally trained midwives to a variety of practices that could potentially offer the midwife a position once she completes the bridging program. This clinical experience within an Ontario hospital and with established practices would not be possible without the infrastructure (i.e., liability insurance, access to experienced preceptors, a framework for evaluation to identify any gaps in clinical expertise or experience) provided by the International Midwifery Pre-registration Program (IMPP).

Midwives are independent practitioners who work in a number of sites – in their clinics, in clients' homes and in hospital. Familiarity with providing care in each place is critical to midwifery care and prior experience with each is necessary to allow all new registrants to begin providing independent care in their own practice. The clinical experience of many applicants with international education has been limited to one setting – typically hospital – and one component of pre, intra or post-partum care. Through the IMPP, internationally trained midwives have the opportunity to learn and experience full scope midwifery care, in a range of settings and while providing continuity of care.

Midwifery has a solid history of recognizing internationally trained midwives, with as high as 25% of practising members coming from this route of entry over the CMO's 15 years of regulating the profession. Given this, the CMO is focused on ensuring that internationally trained midwives receive adequate support that goes beyond the initial registration process.

Consultation with the IMPP staff confirms that the challenges for internationally trained midwives are multi-layered; adapting to a different role, in a new and different system and within a business model presents a steep learning curve for midwives. Survey responses from all IMPP recent graduates reveal that the components of the program that allow them to meet the clinical experience requirements for registration are useful in preparing internationally trained midwives

for work in Ontario. Respondents found that completing the clinical placement was helpful in providing opportunities to improve communication in clinical settings through access to hospitals, clinics and through ESL workshops. Ninety percent of IMPP graduates report having jobs in 3 months earning approximately \$70,000 a year initially with guaranteed annual increases as they amass experience. Graduates responding to the survey noted that they felt supported by working with experienced midwives in their practices. The survey confirms that integration into the system is challenging and that experience granted through the clinical experience components of the program is helpful for internationally trained midwives in the IMPP.

Promising practice: Support for internationally trained individuals

In preparation for an effective pre-registration clinical experience, the IMPP also offers a number of supplementary services to internationally trained midwives. These include:

Financial support

- Experience demonstrates that many internationally trained midwives who come to Ontario and who wish to re-enter the profession are struggling with significant financial constraints. Since bridging program students are currently not eligible for Ontario Student Assistance Program support, the IMPP has worked to cultivate several funding sources. The IMPP has identified to a number of commercial banks and to the Maytree Foundation that there is a need for funding and so they work together to obtain loans for students. This support makes the time required for the clinical experience component less of an economic burden.
- The IMPP also works to link students to a variety of bursaries that are available through the University. In past years, 75% of students had 50% or more of their tuition covered by bursaries. University staff work with students to ensure that they are aware of these funding sources and that they submit complete applications within the deadlines. Again, this support makes the time required for the clinical experience component less of an economic burden.

Support with integration

- The IMPP also connects students to programs and services such as Skills for Change. These programs are designed to help fully integrate newcomers into the Canadian work environment. This support can be used to help prepare internationally trained individuals for the clinical experience they must obtain prior to registering. It is also a useful resource for them once they are registered and entering the workforce.

Health Care and Social Services

- The IMPP also works to ensure that its students are aware of and make use of the full complement health care services that the University offers. This is a useful support for students and helps to ensure that they are receiving any care that they may need as they begin their clinical experience.
- Issues specific to political refugees – These individuals are often without communities so the IMPP creates links for them with other agencies or organisations (e.g., appropriate faith communities). They also raise the issue of and offer support (e.g., counseling, academic accommodation) for individuals who may be experiencing post traumatic stress disorder.

- Issues of domestic violence – The IMPP has found that this problem is, unfortunately, not uncommon and have involved social work to assist students who are experiencing domestic violence.

In short, the IMPP does a great deal to support internationally trained midwives and help to mitigate their unique challenges, which may include:

- economics – addressed through access to bursaries and other funding
- careful monitoring of financial status – to ensure that students are financially stable through the course of the program and the initial clinical experience
- health and social services for at-risk and vulnerable individuals to support them in all ways as they transition into professional life

Promising practice: Review of workplace experience requirements

Preceptor Partnership

To support the effectiveness of the pre-registration clinical experience that internationally trained graduates receive through the IMPP, the program has a policy of providing placements with practices that have experience working with midwives who have been educated and/or who have worked internationally. Wherever possible, these placements are precepted by a midwife who was herself internationally trained. The IMPP has invested considerable resources in developing a relationship with specific practices that have these resources, using them to assist in the training and integration of internationally educated midwives in the Ontario setting.

Special requirements for internationally trained applicants

Application procedures for College membership for IMPP and MEP applicants are the same in all areas (cost, timelines). It is only in the first year of registration that there are differences to allow for internationally trained midwives access to births through supervised practice. All IMPP graduates receive a supervised practice plan on application for registration from the CMO; this supervised practice plan ensures that new registrants attend the remaining required births in their first year of practice, in order to meet clinical midwifery experience for general registration.

All newly registered midwives in Ontario (except for those entering through the labour mobility provisions) are granted registration with the following conditions:

1. A new registrant will work within an established practice (see definition in Guidelines to the New Registrants Policy) for a period of at least one full year.
2. A new registrant will attend births with a general registrant until she has attended a minimum of 30 births as a primary midwife and 30 births as a second midwife.

The New Registrant's policy is designed to ensure that new registrants receive the support and experience that will benefit them in entering the profession of midwifery in Ontario. The support that can be provided in both clinical and interprofessional situations will be a valuable asset to all newly practicing midwives in Ontario. The requirements of the New Registrant's Policy are intended to assist new registrants to consolidate their prior knowledge and experience and to develop a solid foundation of confidence as a primary caregiver within a supportive environment.

Income for all initial registrants is the same, regardless of point of entry to practice or level of required supervision.

Entry to practice requirements in all regulated jurisdictions in Canada

The pre-registration clinical experience required in Ontario is similar to that required in the other regulated jurisdictions in Canada. This consistency supports the maintenance of national competencies. It also facilitates in labour mobility for any midwife who may wish to work in another regulated province or territory. The requirements are summarized below for each Canadian jurisdiction with regulated midwifery:

British Columbia

HEALTH PROFESSIONS ACT, S.B.C. 1990, c. 50 AND THE MIDWIVES REGULATION,
B.C. Reg. 103/95
BYLAWS FOR THE COLLEGE OF MIDWIVES OF BRITISH COLUMBIA

Has clinical experience consisting of attendance at a minimum of sixty (60) births within the last five years, of which at least forty (40) births have been as the principal midwife, and of those forty (40) births:

- (i) thirty (30) births were conducted in accordance with the principles of continuity of care,
- (ii) five (5) births were in a hospital setting, and
- (iii) five (5) births were in an out-of-hospital setting;

Alberta

ALBERTA REGULATION 328/94
Health Disciplines Act
MIDWIFERY REGULATION

2(1) For the purposes of section 22(a) of the Act, a person is eligible to be registered as a midwife if that person

- (a) has satisfactorily completed a program of studies approved by the Board,

- (b) has satisfactorily completed an examination approved by the Board,
- (c) has
 - (i) within the 2 years immediately preceding the date of application, met the requirements of clause (a),
 - (ii) within the one year immediately preceding the date of application, satisfactorily completed a refresher program approved by the Board, or
 - (iii) maintained competence by actively engaging in the practice of midwifery in accordance with criteria established by the Committee,
- (d) has completed and submitted to the registrar the forms prescribed by the Minister, and
- (e) has paid the application fee and registration fee prescribed by the Minister.

(2) Notwithstanding subsection (1)(a), (b) and (c), a person is eligible to be registered as a midwife

(a) if the Committee is satisfied that the person has attained a level of competence equivalent to that required under subsection 1(a), (b) and (c) because of directly related training, examinations and practice, or

(b) if the person successfully completes any training or examinations, or consents to any terms, conditions or limitations on registration or practice, required by the Committee under section 23(5)(b) of the Act.

Saskatchewan

Excerpt from *The Midwifery Act*:

Registration 20

(1) The council may register as a member, and issue a licence to practise midwifery to, a person who produces evidence establishing to the satisfaction of the council that the person:

(a) meets one of the following requirements:

(i) has successfully completed a midwifery education program that is recognized by the council;

(ii) has successfully completed an assessment process approved by the council that demonstrates the person's ability to perform the entry-level competencies of midwifery;

(iii) is registered as a midwife pursuant to the legislation of another province or territory of Canada that applies standards approved by the council, holds the equivalent of an unrestricted licence and has practised for at least one year in that province or territory;

(b) has successfully passed any examinations set out in the bylaws;

(c) has paid the prescribed fees; and

(d) has complied with the bylaws with respect to registration as a member.

(2) The council may register as a member, and issue a restricted licence to practise midwifery to, a person who:

(a) does not meet the requirements of clauses (1)(a) and (1)(b);

- (b) agrees to practise in accordance with any conditions and restrictions set out in the restricted licence;
- (c) has paid the prescribed fees; and
- (d) has complied with the bylaws with respect to registration as a member.

Manitoba

1. The applicant must have satisfactorily completed one of the following:
 - (a) an acceptable program of studies leading to a degree, diploma or certificate in midwifery.
 - (b) an assessment process approved by the college of the applicant's ability to perform the core competencies of midwifery.
2. conducted at least 40 births and attended at least twenty of them as primary midwife. At least 10 of the births must have been conducted during the two years before the date of application.
3. conducted at least 75 prenatal examinations and 75 postnatal examinations and provided continuity of care to at least three women.
4. The applicant must produce evidence that he or she is competent in neonatal resuscitation and cardiopulmonary resuscitation.
5. The applicant must have completed an introductory session approved by the college about the practice of midwifery in Manitoba
6. professional liability insurance or exclusively employed by a regional health authority and does not practice midwifery outside the scope of the employment.

Quebec

Regulation respecting diploma and training equivalence standards for the issue of permits by the Ordre des sages-femmes du Québec
Midwives Act
(R.S.Q., c. S-0.1, s. 2)

- (2) the diploma was obtained upon completion of practical training comprising a minimum of 1,740 hours including
 - (a) 300 hours in prenatal clinical placement, including a minimum of 250 prenatal consultations;
 - (b) 480 hours in clinical placement in labour and delivery, including labour support and a minimum of 60 deliveries, 40 of which have been performed as primary caregiver;
 - (c) complete physical examination of 15 newborns during their first 24 hours of life;
 - (d) 85 hours in postpartum clinical placement, including breastfeeding support and a minimum of 60 maternal consultations and 60 newborn consultations;
 - (e) 450 hours of internship within a team of midwives during which the candidate independently provided all primary care that is part of the practice of midwifery, including prenatal, intrapartum and postnatal care; and
 - (f) 160 hours spent with professionals other than midwives during which the candidate had exposure to clinical risk situations and obstetrical and neonatal complications.

The practical training under subparagraph 2 of the first paragraph must have included a minimum of 10 continuous courses of care. Each course of care must include a minimum of 7 consultations, at least 1 of which is prenatal and 1 is postnatal, in addition to attending the delivery. The complete courses of care may have been performed, in whole or in part, within the scope of subparagraphs a) to e) of subparagraph 2 of the first paragraph.

Nova Scotia

The Registrar must record the name of a member in the active-practising roster who meets all of the following criteria:

(a) the member has 1 of the following pre-requisites:

(i) they graduated from a Canadian university midwifery education program or an equivalent education program in the 2 years immediately before their application for entry in the active-practising roster,

(ii) they completed a competence assessment program and any bridging program required by the Council in the 2 years immediately before their application for entry in the active practising roster,

(iii) they are currently registered or were registered as a midwife in another a province or territory in the 5 years immediately before their application for entry in the active practising roster;

(b) for a member applying for an active-practising (clinical) licence, the member has completed the following continuing competency requirements:

(i) at least the following practice hours or experience:

(A) 1125 hours or attendance at 40 births in the clinical practice of midwifery in the 5 years immediately before their application, or

(B) 450 hours or attendance at 12 births in the clinical practice of midwifery in the year immediately before their application, and

(ii) current certificates in neonatal resuscitation, cardiopulmonary resuscitation and obstetrical emergency skills from programs that are approved by the Council;

(c) the member's ability to practise midwifery is not subject to any conditions and restrictions.

Nunavut

Initial registration shall be granted to an applicant who has proof of:

1. Completion of an approved Midwifery Educational Program
2. Completion of the Canadian Midwifery Registration Examination
3. Completed the following clinical experience requirement:

In the five years proceeding registration the applicant attended a minimum of:

Fifty (50) births as a midwife;

Forty (40) of these births as a primary midwife; and

At least ten (10) of the births attended as a primary midwife should have occurred in the last two (2) years prior to application.

4. Certification in Neonatal Resuscitation:

The midwife must hold valid certification in neonatal resuscitation, including intubation of the newborn and placement of umbilicus catheter.

5. Certification in Emergency Skills in Obstetrics

The midwife must hold valid certification in emergency skills in obstetrics.

6. Certification in Cardiopulmonary Resuscitation

The midwife must hold valid certification in adult and infant cardiopulmonary resuscitation.

7. Traditional Inuit Midwifery knowledge, skill and judgment

Completion of the Nunavut Arctic College module —Traditional Inuit Midwifery Knowledge”.

Northwest Territories

An applicant is only qualified to be a registered midwife if

(a) his or her registration as a midwife in a province is unrestricted; or

(b) he or she is eligible for unrestricted registration as a midwife in a province.

Reasonableness of Fees

Fees for New Midwifery Registrants in Ontario

The CMO’s fees are as follows:

\$50 one time application fee

\$35 annual administrative fee

\$1500 annual registration renewal fee with a proposed increase to \$1550 in 2011

The CMO registration fee is the same for all new applicants, regardless of their route of entry. This fee has been fixed at \$1500 for the past 10 years. For the 2011 renewal year CMO’s council approved a 3.33% increase to reflect the increase in the cost of regulating the profession. This proposed increase will be presented to current members and to the Ontario Midwifery Program of the Ministry of Health and Long-Term Care before it is implemented. Council took this decision because the work of the CMO has expanded considerably (e.g., to include compliance with: the work of the Office of the Fairness Commissioner; the *Ontario Labour Mobility Act*, 2009; changes to scope of practice and the accompanying education and regulatory requirements; the addition of Specified Continuing Education and Remediation Programs through the *Regulated Health Professions Statute Law Amendment Act*, 2009; the requirements that the CMO submit data to the Health Professions Database established by the MOHLTC; etc.) They believe that this minor increase (along with a proposed further 3.33% over the next 2 years for a total of 10% by the 2015 renewal year) is reasonable given the length of time since the last increase.

Registration Fees for New Midwifery Registrants in Canadian Jurisdictions

Jurisdiction	New Registrant	Returning	Third-party fees
British Columbia	One-time fee of \$200 and \$1400 registration fee	\$1800; annual registration renewal fee of \$50	Register as students - \$200/year; \$150 for school year; \$50 for up to 3 months of clinical placement
Alberta	\$150/year	\$150/year	\$400/year for Association fees
Saskatchewan	\$100 application fee and \$1400/year prorated	\$1400 annual licensing fee	
Manitoba	\$200 new application fee and \$1500/year prorated	\$25 renewal fee; \$1500/year	\$100/year for students with \$25 application fee for placements; MMBP application fee (\$300-800); tuition is \$4000 roughly; fees for transcripts etc;
Quebec	\$1102.50/year for permit	\$1102.50/year for permit	
Nova Scotia	Active practice – clinical \$500 Active practice non-clinical \$250 Initial application fee \$50	Active practice – clinical \$500 Active practice non-clinical \$250	
New Brunswick	\$500 (expected – but may include other fees)	\$500 (expected, but may be other fees)	
Nunavut	\$100	\$100	N/A
Northwest Territories	\$150/year	\$150/year	\$250 – Association fees

Credentialing fees for internationally trained midwives

The IMPP fees, which are inclusive of all program components, are as follows:

International Midwifery Pre-registration Program ^[1] (Payable to Ryerson University) Approximately \$5,000

^[1] Plus textbooks and clinical equipment (approximately \$700.00),

Ontario Midwifery Language Proficiency Test \$195.00

There is one other midwifery program for those who have trained outside of Canada other than the program based in Ontario. The Multi-jurisdictional Midwifery Bridging Project (MMBP) is a bridging program for qualified midwives educated outside of Canada. The MMBP assists internationally trained midwives to prepare to meet the requirements for registering and practising as a midwife in British Columbia, Alberta, Saskatchewan, Manitoba, Nova Scotia or the Northwest Territories.

2011 Tuition and MMBP Fees

Regular Application Portfolio fee: \$300
Accelerated Option Portfolio fee: \$500
Regular Stream tuition fees: \$ 4,550
Accelerated Option tuition fees: \$ 2,550

Program fees for the pilot are subsidized by the Foreign Credential Recognition Program, and Health and Human Resource Development Canada. Additional costs for participating in pre-requisite courses may apply (English and Orientation to Canadian Healthcare).

Program fees include:

- In-class instruction, materials, lab supplies
- Distance education on-line instruction
- Advising and tutor support
- Assessments
- Clinical placement
- Initial immunization portfolio review with UBC Student Health Services

Program fees do not include:

- Textbooks (if required)
- Pre-requisite courses (Computer skills and English literacy)
- High speed Internet access
- Telephone charges
- Personal computer
- CPR certification
- Immunization fees
- Assessment re-takes
- Liability insurance
- Membership with jurisdictional regulatory body (ie CMBC)

- Transportation or accommodation for intensives or jurisdictional placements
- Relocation costs

The CMO's registration fees were set by the transitional council and have only been increased once since the college's inception in 1994. The objective bases for the fees include: the cost of regulating the profession and comparison to other midwifery regulators in Canada.

The CMO does not believe that the registration fees discourage potentially qualified applicants. Initial registrants enter practice at a guaranteed rate of compensation as part of the Ministry's managed program. Moreover, the CMO routinely accepts completed application packages and, if directed by the applicant, waits until funding is announced before finalizing the processing of the application and accepting the registration fee payment. Additionally, there are a number of practices that pay the annual fees for their members as an employment benefit.

While the CMO does not have a policy that would see registration fees waived, the initial registration fee and annual renewal fees are payable in full, in two installments or in four installments.

The CMO's registration fees are not higher than the cost of providing service. The CMO regulates a relatively small number of primary care providers and the cost of doing so is not covered by the revenue generated by registration or renewal fees. In fact, the CMO continues to be reliant on the Ontario Midwifery Program for a percentage of its annual budget.

The CMO's fees are comparable to the other established midwifery regulators in Canada: the CMO's fees are lower than the fees charged by the College of Midwives of British Columbia, and the same as those charged by the College of Midwives of Manitoba. The jurisdictions that charge significantly less (i.e., Alberta, Nova Scotia, New Brunswick, Nunavut and the North West Territories) are newly regulated and still staffed by government employees (i.e., they are not fully self-regulated).

Tuition for the IMPP is calculated to make a contribution to the cost of the program at approximately one third the actual cost of running the courses. Ryerson University staff has calculated that it costs approximately \$17,000 per student to operate the program. Since this is a gendered program with all women, most of whom come into the program with mean incomes of less than \$12,000 a year, and who made small incomes by Canadian standards in other countries, Ryerson University has taken the position – which is supported by the CMO - that this group cannot be asked to bear the real cost of tuition. To do so would be to create a barrier that would exclude most non-western international midwives. Accordingly, tuition was set and has remained stable over 9 years at approximately \$5,000 for the full program. More than 50% of IMPP participants are able to have most or all of their tuition met by bursaries, which are facilitated by the IMPP staff. The program is operated with funding from the government of Ontario through the Ministry of Citizenship and Immigration on a cost recovery basis – there is no profit involved for Ryerson University, and in some years, Ryerson has agreed to accept a financial loss as part of its commitment to this program providing a community service to immigrant professional women.

Efficient and Timely Decision-Making

Typical Length of the Registration Process

The typical length of the registration process does not differ based on the route of entry for the applicant. The length of the registration process, if the application is complete, is between two and four weeks. In addition, there is a two-year time limit for the application process for new graduates (i.e., not midwives seeking registration through labour mobility provisions) starting from the completion of the education program. When the registration exam is available, the two-year period will start after exam completion.

Midwifery is a managed program that relies on funding from the Ministry of Health and Long-Term Care. The Association of Midwives relies on this funding and cannot provide liability insurance until budgets are released. Midwifery practices must also wait for funding announcements to determine if they are able to hire new midwives. For these reasons, many midwives newly graduated from the Midwifery Education Program and International Midwifery Pre-registration Program wait to register until they know that they have a position with a practice. To facilitate the processing of applications, the CMO accepts completed application packages and, if directed, waits until funding is announced before finalizing the processing of the application.

The CMO has a straightforward administrative flow:

- 1) confirms receipt of an application in writing within seven days of receiving it;
- 2) informs the applicant in writing within 14 days if the application is incomplete—for example, if any fees or documentation are missing;
- 3) advises the applicant within 14 days if the application is being referred to a Registration Committee panel;
- 4) advises the applicant within 14 days if the application is complete;
- 5) advises the applicant of registration by phone immediately and in writing by fax within 24 hours; and
- 6) issues a certificate of registration by mail.

There is no backlog in the registration process at the CMO.

Within 4 weeks, an applicant with a complete registration application (other than one referred to a Panel of the Registration Committee) is registered. Applicants are advised in writing within 24 hours of their successful registration.

During the past year, as a means of further ensuring that registration happens in a timely manner, the CMO formalised existing registration practices through a number of policies and are appended. These are available on the CMO website and are provided to registration applicants.

The CMO consistently follows its published timelines for decision-making. This was confirmed by the comprehensive compliance audit conducted in 2009. The timeliness of and adherence to

process related to registration decision-making is monitored through regular reports from the CMO's Registration Coordinator to the Deputy Registrar and Registrar as well as to the members of the Registration Committee at their meetings.

Delays in registration decisions are typically associated with incomplete information being provided by the applicant. The CMO staff communicates regularly with all individuals who have made an initial application. In doing so, they ensure that the registration process is not unnecessarily interrupted.

Recommendations

As part of its strategic plan and organisational goals, the CMO has a commitment to achieving regulatory excellence and to promoting and protecting midwifery. What is relevant about this commitment vis-à-vis an entry to practice review is that it includes developing ongoing monitoring and evaluation efforts and developing capacity to meet the needs of a growing number of registrants. As a result, recommendations arising from this review are largely geared toward maintaining the course established by the CMO's strategic plan to achieve the goals of regulatory excellence and protection, promotion and advancement midwifery and its primary principles.

As a profession that has historically been made up of 25% of internationally trained midwives, the CMO is able to look beyond basic registration issues and to further apply itself to supporting the successful integration of these professionals into practice in Ontario.

Following this review, the CMO will:

- continue targeted work with the IMPP to monitor the success of graduates in integrating into practice in Ontario once registered;
- with a view to providing more targeted support for internationally trained midwives, develop a more directive evaluation process for preceptors assessing IMPP graduates during their first year of practice.

The CMO has been able to maintain a track record of timely registration decisions. That said, as a small and relatively new college, the CMO is working hard to build administrative infrastructure to support its work. Part of this capacity building was the development and implementation of a registration database and online member renewal system. While paper-based application materials will continue to be available for any and all applicants who need information in this format, broader on-line application options may be useful to some applicants and will decrease the data entry work required of the CMO's single registration staff person.

Following this review, the CMO will:

- investigating how the CMO's registration database may be used to enhance support to registration applicants.

The CMO believes that it needs to achieve financial independence over the coming years. As part of this process, small fee increases will need to be contemplated. Following this review the CMO will:

- consult with members and applicants about the proposed increases to the registration fee.

Implementation Plan

The measurable goals for each of the recommendations are as follows:

RECOMMENDATION	GOAL
Continued monitoring of the success of graduates in integrating into practice in Ontario once registered	- full analysis of 2010 registrant files for identification of challenge areas for IMPP graduates
More directive evaluation process for preceptors assessing IMPP graduates during their first year of practice.	- review of evaluation strategies of other midwifery programs and regulators - review of preceptor training materials of other midwifery programs and regulators - revised evaluation tools for use by preceptors
Use of CMO's registration database to enhance support to registration applicants.	- assessment of options for on-line initial application - analysis of cost for system enhancements
Consultation with members and applicants about the proposed increases to the registration fee	- obtain member and applicant opinion for presentation to Council

Each of the recommendations will be incorporated into the CMO's fiscal 2012 work plans for committees and operational plans for staff. Staff, with the oversight of committee members, will be responsible for meeting the goals. Reports will be provided to the Registration and Executive Committees at their meetings throughout the fiscal year. A full report on the progress made will be provided to Council at the November 2011 strategic plan review.

Beyond scarcity of human resources, no significant challenges are anticipated to implementing the above recommendations.

As noted, these recommendations are aligned with the CMO's overall strategic priorities. While staff resources are limited, the work required to implement the recommendations has been identified as part of current work plans and will be carried out accordingly.



Statement of Approval

I believe that this report contains the information required by the Office of the Fairness Commissioner as per their document Conducting Entry-to-Practice Reviews: Guide for Regulators of Ontario Professions” and that this information is accurate.

A handwritten signature in black ink that reads "D. Adams". The letters are cursive and fluid.

Deborah Adams, MA, MHSc, CHE
Registrar and CEO