

Standard:	Twin and Breech Births
Reference #:	STCMO_C09252013
Approved by:	Council
Date Approved:	May 28, 2014
Date to be Reviewed:	January 2017
Rescinded:	June 1, 2018
Effective date:	July 1, 2014
Attachments:	none



TWIN AND BREECH BIRTHS

Purpose

The purpose of this Standard is to describe the requirements for midwives managing twin and breech births of midwifery clients in consultation with a physician and to provide guidance to midwives and their hospitals in the development and implementation of a program for midwives to attain these additional skills.

Midwifery standards of practice refer to the minimum standard of professional behaviour and clinical practice expected of midwives in Ontario.

Definition

For the purposes of this document, the CMO refers to twin birth as a planned vaginal delivery of two infants from a single pregnancy.

For the purposes of this document, the CMO refers to breech birth as a planned vaginal delivery of a singleton or twin infant with buttocks presenting, including complete breech presentations.

Background

Midwives must be assessed and certified every two years in emergency skills including the management of emergency twin and breech births and the complications with which they are associated, including abnormal fetal heart rate, cord prolapse, intrapartum hemorrhage and postpartum hemorrhage.

Midwives are required to consult with a physician when clients present with twins in pregnancy or presentation other than cephalic, that is unresponsive to therapy, at or near 38+0 weeks. Midwives who have acquired the appropriate knowledge, skills and judgment, are permitted to manage planned twin and breech births for their clients in consultation with a physician.

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As part of an informed choice discussion, midwives must clearly inform their clients, and document the discussion, regarding their experience and training in managing twin and breech births, as well as the risks and benefits of both delivery procedures.

While midwives are not required to do so, the CMO supports midwives in the attainment of the knowledge and skills required to manage planned twin and breech births for their clients in consultation with a physician, so that primary care can be maintained when no other indication for transfer of care exists.

Standard

Midwives who manage planned twin and breech births for their clients must have the knowledge and skills of theoretical and practical aspects of twin and breech birth, and maintain competence. The College may request demonstration of this acquired knowledge and skill from midwives.

In the management of planned twin and breech births, a midwife must always act in consultation with a physician and in accordance with midwifery standards of practice, the *Midwifery Act*, the *Regulated Health Professions Act*, and the regulations under either of those acts.

At all times it should be clear to the client and to all health professionals involved in her care which health professional is the most responsible for the coordination of care as well as the roles and responsibilities of the midwife and physician. This agreement and plan of care must be articulated to the client and clearly documented in her record.

Midwives shall remain accountable for the care they have provided whether working collaboratively or independently.

Midwives who manage planned twin and breech births must develop practice protocols on planned twin and breech birth, including procedures for initial training and ensuring continuing competency.¹ They should also work with their hospital colleagues to develop and maintain appropriate policies and procedures.

¹ Midwives must be in compliance with the CMO Practice Protocol Standard as of January 1st 2015.

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The College of Midwives requires the following framework, at a minimum, for midwives to acquire and maintain the appropriate knowledge, skill and judgment to manage planned twin and breech births:

Knowledge of all of the following:

1. Risks and contraindications of planned vaginal births of twin and breech infants.
2. Recognition of, response to, and management of immediate complications of twin and breech birth, including:
 - Abnormal fetal heart rate
 - Cord prolapse
 - Head entrapment
 - Uterine rupture
 - Placental abruption
 - Intrapartum hemorrhage
 - Postpartum hemorrhage
 - Neonatal resuscitation
3. Knowledge of community standards and hospital protocols with respect to twin and breech births.

Demonstration of all of the following:

1. Provision of appropriate client care and monitoring during the labour, birth and postpartum.
2. Appropriate documentation according to CMO Standards.
3. Ability to identify problems and implement appropriate interventions.
4. Knowledge of indications to transfer care to the physician.

Continuing Competency

The process for ensuring continued competency should consider the number of twin and breech births managed by the midwife in the previous 24 months, and include a case-review, a review of any relevant continuing education, and a review of relevant hospital policies and practice protocols.