

Standard:	Practice Protocols
Approved by:	Council
Date Approved:	May 28, 2014
Date to be Reviewed:	April 2017
Revision date(s):	November 19, 2015
Rescinded:	June 1, 2018
Effective date:	November 19, 2015
Attachments:	none



PRACTICE PROTOCOLS

Purpose

The purpose of this standard is to describe CMO expectations regarding the development of practice protocols.

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

Definition

Practice protocols outline and guide midwifery practice groups' shared approach to clinical practice and administrative processes, where applicable.

Background

Practice protocols are intended to support effective and consistent midwifery practice and care delivery among midwives in a practice group, and contribute to a satisfying client experience.

A consistent approach to care, supported by practice protocols, facilitates orientation for students, new members of the practice group, members returning from leave and administrative staff.

Standard

Midwives, in collaboration with their practice members, shall develop and maintain written practice protocols that are consistent with the *Midwifery Act*, the CMO Regulations and Bylaws, CMO Standards and best available evidence.

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Midwifery practices shall make practice protocols available to all practice members, locums and students. Practice protocols shall be shared with clients upon request.

Midwives, in collaboration with their practice members, shall systematically review and revise practice protocols using best available evidence, relevant community and CMO standards, and client feedback.

Practice protocols must be dated and properly archived for reference in the event that a midwife's care is reviewed at a later date.

Midwifery practices may develop practice protocols for areas of care not listed below in order to support consistency among practice members and administrative staff.

Midwifery practices shall have practice protocols on the following topics.

Ambulance transport from out-of-hospital births¹

Conditions for safe practice²

Late to care clients, including clients with no prenatal care at the time of labour

Management of breastfeeding problems

Management of laboratory and diagnostic imaging results

Management of maternal and perinatal loss (formerly "Death and bereavement")

Management of postterm pregnancy (42+0 weeks and beyond)

Management of prolonged pre-labour rupture of membranes at term

Midwife-led induction of labour³

When midwifery practices offer the following care to clients, they shall have a practice protocol:

Clinic births⁴

Complementary and alternative medicine

Electronic fetal monitoring in clinic or out-of-hospital settings⁵

¹ Excluding birth centre births, which shall refer to the College's Clinical Practice Parameters and the birth centre's related policies and procedures

² Examples include, but are not limited to: sleep deprivation, case load assignment & call schedule, illness, medication use, stress, mental fatigue, personal or family crisis

³ As defined in the CMO Standard on Induction and Augmentation of Labour

⁴ Refer to the College's Clinical Practice Parameters and the birth centre's related policies and procedures

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External cephalic version (ECV)
 Management of planned breech births
 Management of newborn hyperbilirubinemia requiring treatment
 Management of planned twin births
 Nitrous oxide storage, transportation and use at out-of-hospital births ⁶

Elements of a Practice Protocol:

Practice protocols may include, but are not limited to, the following elements:

The date of approval/enactment
 A review date for the protocol
 Background information that briefly defines the topic area
 Midwifery assessments
 Differential diagnoses, as appropriate
 Points to address in an informed choice discussion ⁷
 Clinical management reflecting client choice
 Use of allopathic drugs or complementary and alternative medicine, if applicable
 Communication plan/strategy
 Consultation or transfer of care /management and subsequent role of midwife after consultation or transfer of care ⁸
 Documentation
 Administrative responsibilities, if applicable
 References and additional resources, as appropriate

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⁵ Excluding birth centre births, which shall refer to the College's Clinical Practice Parameters and the birth centre's related policies and procedures

⁶ Excluding birth centre births, which shall refer to the College's Clinical Practice Parameters and the birth centre's related policies and procedures

⁷ As defined in the CMO Standard on Informed Choice

⁸ Refer to CMO Consultation and Transfer of Care Standard