

Midwifery Scope of Practice Comments March 20 through March 26 2013

<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>If the quarterlies are going to be electronic, how about a toggle for normal births so that only one page is needed to be filled out if there is no transfer of care or no meds used or consults- this represents the majority of midwifery clients and would be a significant time saver, filling out additional pages actually represents many more hours of work, which would have a negative impact on midwifery business. Thank you for your consideration</p>	<p>Sat Mar, 23 2013</p> <p>12:14 AM</p>
<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>The same way the EMT's are trained and empowered to provide care in emergent situations in lieu of a physician, midwives should be able to have tools at their disposal (such as oxygen and anti-hemorrhage medications) that allow them to either remedy a minor situation without the need to transfer or stabilize and emergency situation until further help can be obtained. We must trust that the extensive training and licensing process a midwife goes through has prepared her to appropriately handle these tools. After my first homebirth I had difficulty delivering the placenta, it was not easily detaching and I was losing a lot of blood. My midwife was on top of the situation the whole time, monitoring me closely. She knew when it was time to administer pitocin. She remained calm and took all the appropriate steps she needed to in order to ensure I was safe. Because she was able to administer the necessary medication, it was not necessary to call paramedics or to transfer to the hospital. We are asking the AZDHS to continue to empower midwives to take these actions and use these tools.</p>	<p>Fri Mar, 22 2013</p> <p>4:20 PM</p>
<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>The next scheduled committee meeting does not provide time for public comment. Why? Consumers want to be sure our voices are being heard and that we have the opportunity to respond to issues that come up during the meeting. Please consider adding at least some time at the end of the meeting for public comment.</p>	<p>Fri Mar, 22 2013</p> <p>10:46 AM</p>
<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>The two main objectives of HB 2247 were to reduce the regulatory burden on AZ Licensed Midwives and expand the scope of practice to make homebirth services more widely available to women & families who make the EDUCATED decision to have a homebirth. Consumers, like myself, and midwives have spent a tremendous amount of time and energy to see these changes made and we are feeling increasingly disappointed in the direction these proceedings have taken. The current draft rules seem to be doing exactly the OPPOSITE of the intent of HB</p>	<p>Fri Mar, 22 2013</p> <p>10:42 AM</p>

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<p>2247. As it currently stands, the only thing it appears that AZDHS is interested in doing is placing even MORE regulatory burden on midwives and putting restrictions in place that will make it IMPOSSIBLE for midwives to practice AT ALL. Regulations requiring that midwives have formal OB back-up arrangements are absolutely unacceptable and will effectively make having a midwife legally attend a homebirth an impossibility. This will not stop homebirths from occurring, it will simply force midwifery in this state underground and/or result in unattended homebirths. Director Humble needs to ensure that this does not happen!! I have had two homebirths and plan to birth all my future children at home as well. I expect the state to support my choice of birth place and to empower the midwife I choose to have the tools necessary (such as medications to help stabilize in the event of an emergent situation) to care for me and my baby. Consumer Advocate for Homebirth, Rachael Pena</p>	
<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>It is of great concern to me - a homebirth consumer with vested interest in the outcome of these proceedings - that there have been such lengthy delays in posting public comments to the website. I believe the department needs to respond to these questions: What is the process after someone submits a comment? Do members of the committee have immediate access to these comments? How are they disseminated? Why is it taking sometimes SIX weeks for public comments to be posted on the AZDHS website for all to view? Is there a reason they cannot be instantly published to the website? It is hard to have faith in this process, to feel confident that the voice of the public is actually being heard, to believe that ALL comments are being disseminated when there is such an incredibly long lag time. Please publish a response! Thank you, Rachael Pena</p>	<p>Fri Mar, 22 2013 10:28 AM</p>
<p>The Department is soliciting public comment on the Midwifery Scope of Practice. Please be mindful that comments received will be posted in their entirety unless redacted due to inappropriate content. Please provide your comments or concerns below:</p> <p>I would like to continue to have access to home birth midwifery in Arizona. Therefore, the proposed section on requiring a backup physician in the proposed rules/regulations MUST be eliminated. Please do not make midwifery illegal by maintaining that requirement!!! Taking away this right is a huge step in the wrong direction. If I possess the right to choose whether or not I want to birth it is ludicrous to think that I would be unable to choose where and how I birth as well. I have had two amazing home birth experiences with an incredibly qualified and professional midwife who was always looking out for my best interests as well as my babies. Maintaining a requirement such as a back up physician makes midwifery impossible and unsafe!! I want to know that if my children should choose to birth at home they will be able to access the same type of amazing care that saw me through my pregnancies, labors and deliveries. The alternative is unacceptable. Thank you. Kolleen</p>	<p>Fri Mar, 21 2013 10:10 PM</p>

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HB 2247 states that department shall consider adopting rules that "REDUCE the regulatory burden on midwives" There are several examples that show that the opposite is happening. More regulatory burden is now being put on the midwives. For example, the new age of 21 for licensees, new requirements to have formal agreements with hospitals and doctors in licensure, calling hospitals when mothers go into labor, etc. Please consider that every new requirement placed on the midwives in not following the direction of the bill. It is creating more regulation, which in turn, creates more obstacles to overcome.

Fri Mar, 21
2013

9:58 PM