

## MINUTES

### UTAH LICENSED DIRECT ENTRY MIDWIFE BOARD

February 27, 2015

Room 464 (fourth floor) –9:00 a.m.  
Heber Wells Building  
Salt Lake City, UT 84111

**CONVENED:** 9:03 a.m.

**ADJOURNED:** 9:48 a.m.

**Bureau Manager:**

Suzette Farmer

**Conducting:**

Trinette Thompson

**Board Members Present:**

Dyanna Gordon, LDEM  
Trinette Thompson, LDEM  
Sarah Carter, LDEM  
Katie Hansen, Public member

**Guests:**

Suzanne Smith, LDEM

#### TOPICS FOR DISCUSSION

#### DECISIONS AND RECOMMENDATIONS

##### **ADMINISTRATIVE BUSINESS:**

Introduction of Dr. Suzette Farmer, Bureau Manager:

Dr. Farmer introduced herself and provided a brief overview of her professional experience. Board members welcomed Dr. Farmer.

Administer the Oath of Office to Tara Tulley:

Dr. Farmer administered the Oath of Office to Tara Tulley. Board members welcomed Ms. Tulley.

Approval of February 25, 2014 minutes:

The February 25, 2014 minutes were approved as written. The vote in favor was unanimous.

##### **DISCUSSION ITEMS:**

Chair-elect:

Sarah Carter was nominated as chair-elect at the February 25, 2014 meeting. Ms. Carter will take over chair responsibilities July 2015

Discussion regarding management of third stage labor:

Suzanne Smith met with the Board to discuss making a change in the Direct Entry Midwife Practice Act regarding active management of the third stage of labor. Ms. Smith reported:

- The Direct Entry Midwife Practice Act,

section 58-77-102(8)(f)(iv) Definitions, the Direct-entry midwife can administer one dose of intramuscular oxytocin after the delivery of the placenta.

- The standard of care has changed since the Act was initially adopted in 2005.
- In the past it was thought that administering an uterotonic medication prior to delivery of the placenta increased the incidence of trapped placenta requiring manual removal and increased the chance of uterine inversion. Ms. Smith stated this concern is not evidence based.
- The standard of care is now the administration of the medication after the delivery of the baby.
- Active management of the third stage of labor is now considered best practice and is the worldwide standard of care.
- The Direct-entry Midwife Practice Act does not allow administration until after the placenta is delivered.
- She is not proposing that the LDEM provide active management, but if the LDEM chooses to do so, it is important that the LDEM practice under the standard of care.
- She is not proposing to rewrite the whole Practice Act, just section 58-77-102(8)(f)(iv).
- She brought this before the Board to let the Board know her intent to find legislative support to revise the Act.

It was suggested that instead of opening the Act each time there is a change in standard of care, put in place that the standard of care should be followed.

However, Board members indicated there is some concern regarding linking the Act to other organizations, especially if there is conflicting information. Ms. Smith indicated there is a lot of political infighting among ACOG and other national organizations, so it may be best to open up the Act for each change instead of linking it to organizational standard of care. Ms. Gordon questioned whether the change would require additional coursework for the Direct-entry Midwife. Ms. Smith stated she feels the required pharmacology course already covers this

information.

Dr. Farmer stated she discussed the issue with Ray Walker, Compliance officer, who indicated that we must abide by the current law. The Division could not allow the LDEM to provide the medication after delivery of the baby rather than after delivery of the placenta.

Dr. Farmer stated if new legislation is introduced the Board could write a letter of support and say they agree or disagree with the proposed change.

Legislative update:

Dr. Farmer indicated that it appears that H.B. 202 will not pass the Legislature. Board members indicated that Rep. Spackman-Moss and an individual from the Department of Health, without input from the profession, wrote the bill regarding informed consent. When the bill became public, problems were identified and corrections made. However; by the time the corrections were made, rumors were floating around the internet and parents did not agree with the changes.

Determination of issues that need to be discussed at future Board meetings:

Review proposed Statute changes regarding active management.

Open and Public Meetings Act training:

Dr. Farmer provided the annual Open and Public Meetings Act training.

Next meeting:

October 23, 2015 at 9:00 a.m.

*Note: These minutes are not intended to be a verbatim transcript but are intended to record the significant features of the business conducted in this meeting. Discussed items are not necessarily shown in the chronological order they occurred.*

4/22/16  
Date Approved

  
Trinette Thompson, Chair *Sarah Carter*  
Direct Entry Midwife Board

4/22/16  
Date Approved

  
Suzette Farmer, Bureau Manager,  
Division of Occupational & Professional Licensing