

<b>TITLE: MIDWIVES AT THE SCENE</b>	<b>SECTION: LAND AMBULANCE</b>
<b>DATE: April 23, 2007</b>	<b>POLICY NO.: KDSB-LAS-VI-14</b>
<b>APPROVED BY: Resolution No. 2001-102</b>	<b>REVISED:</b>

**1. POLICY STATEMENT**

Ambulance staff and Midwives will work cooperatively in making decisions and providing quality patient care to the mother and neonate at an out-of-hospital birth.

**2. DEFINITIONS**

**2.1 Out-of-Hospital Birth**

Any planned birth where the woman's chosen birthing place is not a hospital.

**2.2 Midwife**

Person who is qualified to provide supervision, care and advice to women during pregnancy, labour and the post-partum period, to conduct spontaneous normal vaginal deliveries on her own responsibility and to care for the newborn and the infant.

Midwives are permitted to:

- a) carry out examinations necessary to establish and monitor normal pregnancies.
- b) advise mothers-to-be on securing the examinations necessary for the earliest possible diagnosis of pregnancies at risk.
- c) provide education and preparations of clients for childbirth, including advice on exercise and nutrition.
- d) care for and assist the mother during labour and monitor the condition of the fetus by the appropriate clinical and technical means.
- e) supervise and assist with spontaneous vaginal deliveries.
- f) recognize the warning signs of abnormality in the mother or infant that necessitate referral to a physician.
- g) take necessary emergency measures in the event of a crisis.
- h) examine and care for the newborn infant.
- i) care for the mother in the post-partum period and advice her on infant care and family planning.

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**3. PROCEDURE**

- 3.1 Upon being dispatched on a request for ambulance service to an out-of-hospital birth scene, ambulance staff will obtain from dispatch all pertinent information related to the call and specific instructions.
- 3.2 Upon arrival at the scene of an out-of-hospital birth where a person is assisting the mother, ambulance staff will determine the following:
- a) Confirm the nature of the request for ambulance service and who requested the service.
  - b) The condition of the patient(s) and the progression of the labour and/or delivery.
  - c) The capacity in which the person assisting with the birth is acting (i.e. trained midwife, nurse, person of non-medical background).
- 3.3 When a person assisting with the out-of-hospital birth identifies themselves as a midwife, ambulance staff will:
- a) confirm with the patient that this person has been retained by them to assist with the birth.
  - b) confirm that the midwife has A.O.M. membership (if the midwife is not known to ambulance staff).
- 3.4 Ambulance staff will work cooperatively with the midwife in providing quality care to the patient and/or neonate at the scene and throughout transportation to the hospital.
- 3.5 Should the midwife's care or management of the patient be in contradiction of approved BLS standards, ambulance staff will, with the patient's consent, assume full control of the situation. Where available, consultation will be made with the Base Hospital Physician.
- NOTE:** With the patient's consent to care and transport, ambulance staff are ultimately responsible for the welfare of the patient, regardless of whether or not ambulance staff utilize the midwife's expertise and assistance.
- 3.6 Upon completion of a call to an out-of-hospital birth scene with a midwife present, ambulance staff will note on the A.C.R. the midwife's presence and involvement.