



# OKLAHOMA State Department of Health

## MINUTES OF REGULAR PUBLIC MEETING

PUBLIC BODY:           ADVISORY COMMITTEE ON MIDWIFERY

DATE:                   WEDNESDAY, SEPTEMBER 11, 2024 @ 1:00PM

LOCATION:               OSU CENTER FOR HEALTH SCIENCES  
                          1111 W. 17<sup>TH</sup> STREET, RM. 411, TULSA, OK 74107

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### **1. Call to Order**

Nikki Imes called the meeting to order at 1:18 pm at the OSU Center for Health Sciences.

### **2. Roll Call**

Matt McDonald called roll and a quorum was met.

Members present: Michelle Brunnabend, Shaun Baranowski, Lecye Doolen, Sarah Foster, Sarah Hall, Michelle Hernandez, and Nikki Imes.

Members absent: None.

Staff present: Matt McDonald

Others present: Karis Johnson

### **3. Review and Discuss Meeting Minutes from August 6, 2024**

Nikki Imes made a motion to accept the minutes with changes. Lecye Doolen seconded the motion.

The changes being to correct the spelling of "Sheperd's Law," on page 3 and to clarify the second paragraph on page 3 that substantiated claims will come back to the committee for possible administrative action.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, and Nikki Imes.

Abstain: Sarah Hall.

Motion carries.

### **4. Review and Discuss Executive Session Meeting Minutes from August 6, 2024**

Lecye Doolen made a motion to accept the minutes. Shaun Baranowski seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, and Nikki Imes.

Abstain: Sarah Hall.

Motion carries.

**5. Discussion and Recommendation: Licensure Applications**

- Danielle McGraw – Licensed Midwife Application

Michelle Hernandez made a motion to approve for licensure. Sarah Foster seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, Sarah Hall, and Nikki Imes.

Motion carries.

- Wynter Krisha- Licensed Midwife Application

Nikki Imes made a motion to approve for licensure. Lecye Doolen seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, Sarah Hall, and Nikki Imes.

Motion carries.

**5. Review and Recommendations for Consent Form Updates**

The committee began reviewing the consent form for possible changes and updates to be made to the current form.

Shaun Baranowski made a motion to update the rate of episiotomy from 31% to 25% and update the c-section rate from 25% to 4.6% based off of the Leap Frog study from 2023.

Sarah Hall seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, Sarah Hall, and Nikki Imes.

Motion carries.

Further discussion continued regarding the consent form and adding the statistical data from American College of Obstetricians and Gynecologists (ACOG) that was reaffirmed in 2023. Members want to ensure that statistical data is gathered from various sources to be reflected in the consent form.

Shaun Baranowski made a motion to add the consent form review and discussion to be added to the agenda for the November meeting.

Sarah Hall seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, Sarah Hall, and Nikki Imes.

Motion carries.

Sarah Foster made a motion that all information and statistics in the consent form are referenced at each bullet point and not just at the end of the document.

Shaun Baranowski seconded the motion.

Roll Call

Aye: Shaun Baranowski, Lecye Doolen, Sarah Foster, Michelle Hernandez, Michelle Brunnabend, Sarah Hall, and Nikki Imes.

Motion carries.

The members will gather more information and sources to be reviewed at the next meeting and will submit the information to the OSDH for placement in the meeting packet.

**Meeting Paused:** 2:36 pm

**Meeting Resumed:** 2:47 pm

## **6. Discussion Regarding Rule Modifications**

The committee began reviewing Title 310, Section 395 to discuss and make any recommended modifications. A main reason of the discussion is to determine why midwives are choosing to not become licensed in the state of Oklahoma. Also, to try to determine why consumers are choosing unlicensed an unlicensed midwife over a licensed midwife. Members reached out to the public and other groups to help gather information regarding this topic. Other midwives have also mentioned adjustments needing to be made to the rules.

Licensed midwives support having boundaries, rules, and guidelines. The support accountability and feeling safe. Would like to establish a collaboration with other hospital team members.

Unlicensed midwives report having distrust of the system, lack of autonomy of the clients, and autonomy as a midwife.

Consumers report not wanting electronics, ultrasounds, specific distance to a hospital, do not want any labs, not having autonomy, and do not want to have to transfer care based on the current rules.

A survey completed with Oklahoma midwives identified the cost of licensure and NARM being the only path to licensure as prohibitive reasons to not becoming licensed.

**Meeting Paused:** 4:05 pm

**Meeting Resumed:** 4:15 pm

The committee discussed specific recommendations for further discussion to the current rules.

Title 310:395-5-7. Assessments and care antepartum and intrapartum.

(B) A Client has the option to refuse any test or screening offered by the Licensed Midwife. Any refusal should be documented by the Licensed Midwife and placed in the Client's file. Client refusal of any test or screening that is necessary to determine any condition precluding midwifery care shall require transfer of care.

The committee recommends changing the above section second sentence to read: Client refusal of any test or screening that is necessary to determine any condition precluding midwifery care shall be given the option to transfer of care or co-manage with a Licensed Physician trained in OB/GYN or MFM.

Title 310:395-5-6. Conditions precluding Midwifery care.

(b) The following conditions preclude Midwifery care and the Client must be transferred to a physician, CNM, or Clinician upon diagnosis unless the Client obtains a signed consult note from a medically relevant physician and all recommended treatments can be completed in an out of hospital setting.

The committee recommends removing the word "signed" from the above listed rule. The committee also would like to add the following sentence to this rule: "A Licensed or Unlicensed Midwife shall disclose verbally and in written form (Electronic is acceptable) to a prospective Client at the outset of the professional relationship items 1 through 14 of this section."

The committee discussed modifying the current formulary to include: TXA, IUD/Nexplanon placement, cervical cap/diaphragm, Nitrus Oxide (must provide proof of training), and Benadryl IM/IV (must provide proof of training).

A few points added for further discussion were platelet count at 150,000 or less requiring a consultation, VBAC-c-section times 2, PROM over 18 hours, and a history of cervical insufficiency.

#### **8. New business (Limited to items not reasonably foreseen 24 prior to meeting)**

No new business.

#### **9. Adjournment**

The meeting was adjourned at 4:45 pm.