

## PROPOSED CHANGES TO THE MIDWIVES REGULATION

*This guidance document provides general information about the proposed changes to the Midwives Regulation that have been posted for public comment. It is intended to complement the Health Professions Act, and the Midwives Regulation, but it is not a substitute for legal advice. If in any doubt as to how to proceed, please consult the legislation directly or obtain legal advice.*

### CURRENT STATE

Midwives are regulated health professionals under BC's *Health Professions Act* (HPA) and the Midwives Regulation. Midwives work autonomously within a scope of practice as set out in provincial regulation, collaborating with other health care providers as needed. Midwives in British Columbia offer primary care to healthy pregnant women and normal newborn babies from early pregnancy through birth, and up to three months postpartum. Midwifery care from early pregnancy through six weeks postpartum is covered by BC's Medical Services Plan (MSP).

The College of Midwives of BC (the College) has identified that there are currently 244 registered, practicing midwives in BC,<sup>1</sup> and midwives attend approximately 16 per cent of the province's births. Currently, midwives may prescribe certain categories of drugs listed in their regulations (e.g. antibiotics, anti-nauseants, vaccines etc.) and may also conduct activities with certain controlled substances **if the controlled substance has been prescribed by a medical practitioner.**

### WHY CHANGE?

The *Controlled Drugs and Substances Act* (CDSA) prohibits any person from conducting activities with controlled substances unless authority has been given under federal and provincial regulation. Until 2012, only doctors of medicine (physicians), dentists and doctors of veterinary medicine could prescribe controlled drugs and substances. As a result, midwives were required to refer patients to physicians to obtain medications containing controlled drugs and substances. There is significant time and cost associated with midwives having to consult with physicians to prescribe controlled drugs and substances, or patients having to be referred to physicians for pain or anxiety management. These changes are intended to promote better continuity of care, reduce unnecessary referrals/consults with physicians, and ensure safe and timely access to maternity clients for pain management.

On November 1, 2012, the federal government added the New Classes of Practitioners Regulations, which added midwives (as well as nurse practitioners and podiatrists) as practitioners under the CDSA enabling them to prescribe, administer and provide controlled drugs and substances, if they are authorized to do so under their provincial regulations. The proposed changes to the Midwives Regulation in BC are intended to give midwives the ability to prescribe certain classes of controlled drugs and substances, provided they are within their scope of practice.

### WHAT HAS CHANGED?

- In addition to medical practitioners, nurse practitioners will also be able to prescribe certain controlled drugs and substances that a midwife can compound, dispense and administer;
- Midwives may autonomously prescribe, compound, dispense or administer three new categories of drugs, for specific purposes:
  - anti-coagulants, for prophylaxis or treatment of thrombosis;
  - benzodiazepines, for therapeutic rest in prodromal labour or short term management of excessive anxiety in the postpartum period; and
  - narcotics, for pain relief in labour or the postpartum period.
- A Midwife must be certificated by the College before they can prescribe anti-coagulants, benzodiazepines, and narcotics, for the purpose prescribed in the regulation (as described above).

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<sup>1</sup> College of Midwives of British Columbia. (May 16, 2016). *Register of Current & Former Registrants*. Retrieved from <http://www.cmbc.bc.ca/pdf.shtml?List-of-Registrants>