



**Born**  
Midwives

# Informed Choice Agreement



## Born Midwives

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*Welcome to Born Midwives! We have developed this document to provide you with information about what you can expect from your care with us. We encourage you to read it and discuss with us any questions you may have. We look forward to caring for you and your family at this special time.*

## **Midwifery Care in Ontario**

On January 1, 1994 Midwifery became a fully funded, regulated health profession in Ontario. Since then care from a Registered Midwife has been an option for pregnant women. The philosophy of care emphasizes informed choice, continuity of care and choice of birthplace. Midwifery Care is woman centred and family friendly. The Provincial Government pays for midwifery care for all Ontario residents (even if you don't have OHIP).

## **Our philosophy**

We view pregnancy and birth as normal healthy events in a woman's life. We promote healthy pregnancies and normal birth. We use technology when needed and avoid unnecessary interventions. We believe that skilful care and monitoring during pregnancy empowers women. We also believe that a birthing woman whose emotional and physical needs are met can have a positive birth experience. In an atmosphere of warmth, calm, freedom of movement and nurturing support, women are more relaxed and empowered to work with their bodies and babies for a positive birth experience.

## **Making Choices**

We believe it is important to offer support and experienced guidance to women as they make decisions about their health during pregnancy and birth. We respect that the women we care for are the primary decision makers about their pregnancies and births. Our role is to offer information, support and recommendations to help women make the decisions that are right for them. We will make sure there is time for relaxed discussion, and we will provide information so a woman can make informed choices about prenatal testing, use of technology, birthplace, breastfeeding and baby care. If complications arise, our commitment is to continue to offer complete and honest information so that women can continue to feel empowered, listened to and supported in their informed choices.

## **Your care with Midwives**

Midwives provide primary care and guidance during pregnancy, labour and birth as well as care for mother and baby for six weeks after the birth. Our goal is to support your needs and choices so you can have the birth you choose within the realm of safe care.

You do not need to see a physician about your pregnancy unless something happens that is outside of the scope of midwifery care. If there is a complication your midwife may arrange a



visit with a physician. In some cases, your care will need to be transferred to a doctor. Even if your care is transferred, your midwife will stay involved in your care to offer support. If you have non-pregnancy related health concerns your midwife will advise you to see another health care provider like your family doctor.

Most of your pregnancy care will happen in our clinic. We will meet you at your home, our clinic or the hospital if you have urgent concerns.

### **Our training, standards and guidelines**

Every Registered Midwife in our Province meets all the standards of the College of Midwives of Ontario. The Ontario Midwifery Education Program is a specialized four-year university degree program (available at McMaster, Ryerson and Laurentian), which combines academic courses with hands-on training to create new midwives. Many midwives in Ontario have been trained in other countries, and often have many years of experience. These midwives have completed Canadian examinations through International Midwifery Pre-Registration Program (IMPP) at Ryerson University and have proven to the College of Midwives that they meet Ontario's registration standards.

The College of Midwives of Ontario sets the standards, regulations and guidelines that all midwives must follow. These include when we need to review a case with another midwife or a physician. More details on our scope of practice are provided in your information package. We regularly report our client evaluations and our ongoing training activities to the College as part of our Quality Assurance program.

Ongoing re-certification and training continues to ensure that midwives have all the skills they need for providing great care. Midwives re-certify every year in Neonatal Resuscitation, and every two years in Emergency Skills and Cardiopulmonary Resuscitation. We attend peer review sessions and regular practice meetings. This allows us to regularly discuss new guidelines and research as well as to get input on how to provide woman-centred and safe care in challenging cases.

### **Our practice**

We work in a primary care module through pregnancy, labour, birth, and postpartum. It means a midwife who attends your labour and birth does your prenatal care through pregnancy. However, there are rare times when your midwife may be at another birth or may need to be off-call to rest to ensure safe care. If this happens, another midwife may answer your page. We share information among our practice to ensure that any midwife will be able to provide you with personalized care. While you are in care, the midwives of our practice are on-call for you 24 hours a day, 7 days a week, all year long.

Two midwives attend the birth. A second midwife usually comes when the arrival of the baby is near to assist your primary midwife. The second midwife is one of our midwives who you might have not met.



On rare occasions, your office or home visits will need to be rescheduled if your midwife is busy with a birth or emergency. We ask for your patience in these cases. We will give you the same personalized care when you need it!

## Communicating with your midwives

### Non-urgent concerns

If you have a non-urgent concern or question, please call the office. If your midwife is available, you may be able to speak to her right away. You can leave a message in person with our administrator or voicemail. If you leave a message, your midwife will answer it as soon as she can. This might be the same day or it may be her next clinic day. We ask you to call the office and not our pagers for non-urgent concerns to allow us to get much needed rest (even during the day). If it can't wait, then please page your midwife.

### Urgent concerns

Your midwife is always reachable by the paging company. That is the best way to reach her if you are in labour or if you have an emergency or urgent concern. When you call the pager number a person will answer. You will need to tell them:

- Who your midwives are (Your primary midwife and your backup midwife who you may not have met yet)
- What the problem is
- A phone number where you are

When you hang up, a message will be sent to your midwife. She will call you back within 10 minutes. Please make sure you keep the line free for her to call back. We are always ready to talk to you about an urgent concern any time of day or night. Call again if your midwife has not called back after 10 minutes to make sure she got the message. We will NEVER IGNORE your call. Keep calling until a midwife answers you.

### Appointments

Our office is usually open Monday to Friday. Our office number is 519-267-7266.

Due to the unpredictable nature of midwifery work, we may not always be able to provide appointment times that are convenient to your schedule. Occasionally we may need to change your appointment on short notice. We apologize for the inconvenience and we will make every effort to inform you of changes as soon as possible. Please make sure we have your up to date home, work and/or cell phone numbers so that we can reach you if we need to change your visit.



## **Student Midwives in Your Care**

Born Midwives is proud to be a teaching practice for learning midwives. Demand for midwives in Canada is ever-growing and exceeds the number of working midwives. We feel that it is important to train new midwives in a supportive environment, and we hope that you will join us in being a very important part of our growing profession.

In Ontario, midwives are trained in a four-year Bachelor of Health Sciences degree program at McMaster University, Ryerson University, or Laurentian University. In their second year of studies, students begin hands-on training while continuing their academic studies. Each year, students increase their skills and assume more of a supervised leadership role as they provide care. Internationally trained midwives also spend time in established practices to become familiar with the Canadian system before they are registered.

When student midwives work with us it is usually for a period of several months. You will have the opportunity to develop a relationship over a number of visits and will provide care appropriate to their level of training. We hope that you will join us in supporting our students as they learn. So much of becoming a midwife comes from working directly with women and babies and we greatly value your participation and feedback. If you have any questions or concerns about how students may be involved in your care, please discuss this with your midwives.

## **Lending Library**

We offer a lending library of pregnancy, birth and parenting books and videos to our clients. You are invited to borrow these at any time in your pregnancy and you can feel free to ask for suggestions or recommendations from your midwives. You can speak to our administrator or your midwife to sign out any materials. The cost of materials, which are damaged or not returned, will be charged to you. We are always grateful for your donations of books or videos you no longer need.

## **Childbirth Classes**

We strongly encourage women expecting their first baby to attend childbirth classes with their partner or a support person. Classes will give you important information about the usual experiences of labour and birth and breastfeeding. Maybe more importantly, you get a chance to connect with other parents. Many families find they develop lasting friendships with the other parents.

## **Prenatal Care**

Regular prenatal visits are important and we aim to make them a comfortable and enjoyable experience. Our routine visits are 30 to 45 minutes long. We find this time allows us to answer your questions and develop a relationship of trust and caring.



Visits are scheduled every month until 28 weeks of pregnancy, at which time we will begin seeing you every 2 weeks. We will begin seeing you every week from 36 weeks until you give birth. One visit will be at your home if you are planning a homebirth.

Your care with us will begin with a detailed health history that includes details of your health as well as your family history. During our visits we assess your health and the well being of your baby. Bloodwork and ultrasounds are ordered when needed.

### **Labour and Birth Care**

We respect women's experiences of labour and birth can be varied and different. We are committed to respecting the individual values and needs of labouring women and their families.

In early labour we will be in telephone contact with you and may visit you at home to assess your progress. When labour becomes active, your midwife will stay with you to monitor your vital signs, the baby's heart rate, your contractions and your progress in labour. A second midwife arrives closer to the time of the birth.

We encourage you to have a labour support person to be present with you through early labour as midwives are only with you in active labour. Usually your support person is a partner, but it may be a close friend, relative or doula (professional labour support person). You may wish to hire a doula even if you have other support. Research shows that labour support reduces the length of labour and the need for interventions as well as increasing women's satisfaction with their birth experience.

Midwives are fully qualified primary care providers who will assist you with every part of your normal birth including catching your baby, giving stitches and caring for your new baby. A doctor is only involved if a complication arises.

### **Choice of Birthplace**

Whether you have your baby at home or in the hospital is a choice for women and families in the care of midwives. Your midwives will discuss your options with you, taking into consideration your specific situation including risk factors for mother and baby, distance to the hospital and where you feel most confident and secure.

### **Home birth**

There is a lot of good evidence showing that home birth is safe for low-risk healthy women with midwives in attendance. This is a choice for women and families in the care of midwives. Midwives bring portable versions of emergency equipment and supplies such as suction, oxygen, intravenous fluids, tools and equipment to suture tears and medications for the prevention and treatment of postpartum hemorrhage (heavy bleeding). Our training includes management of the rare sudden emergencies that might arise at a home birth. Two midwives



attend the birth. A second midwife usually comes when the arrival of the baby is near to assist your primary midwife. The second midwife is one of our midwives who you might have not met.

Some women are more comfortable and relaxed at home. As a result they will have better progress in labour and will enjoy the experience of giving birth much more at home than in the hospital. Home birth is also a great experience for partners and other family members. The watchful guidance of the midwife will ensure early recognition of potential complications and the hospital continues to be an option at any time. Most transfers to the hospital from planned homebirths are not emergencies, and are for slow progress or pain relief. We work with ambulance crews and coordinate with the hospital for emergency transport if that is necessary.

Waterbirth is a good choice of pain relief. You might choose to labour in the water or give birth in the water. For both purposes, you do need a special pool, which can be rented (for more information ask your midwife).

When you plan a home birth, we will come to your home when you are in labour. We will set up our equipment and monitor you and your baby's health. We will work with you to find what helps you cope with your labour. When the birth is close a second midwife will come to assist your primary midwife. After the birth we will give you stitches if you need them, help you to breastfeed, do a head-to-toe exam of your baby and complete paperwork. We will make sure that you are well, that you eat something and have help to get to the washroom/shower. We will stay with you for about 3 hours. Usually we leave after we have cleaned up from the birth and tucked you into your own warm, clean bed.

## **Hospital Birth**

We have privileges at Cambridge Memorial Hospital (CMH) and we will ask you to pre-register at CMH even if you plan to give birth at home. For your convenience, your midwife would take care of your hospital pre-registration.

Your midwife may offer to meet you at home to assess your labour or you and your midwife may decide to meet at the hospital. Some women choose to stay at home for a significant portion of their labour. When we will advise you to move to the hospital depends on many factors.

You can expect that your midwife will be with you throughout your active labour, the birth and for about 3 hours after. A second midwife will be called when you are close to delivery to assist your primary midwife. At the hospital you may take a shower, go in the Jacuzzi tub, sit on an exercise ball, walk in the hallways, etc.... Your midwife will work with you to find what helps you through your labour. Midwives use the technologies available in the hospital when needed. Two midwives attend the birth. Doctors and nurses are not present at a normal hospital birth with midwives.

After the birth, your midwives will give stitches if you need them, help you breastfeed, and do a head-to-toe exam of your baby and complete paperwork. We will ensure you eat something



and have help to get to the washroom/shower and move you to a post-partum room. If everything has been normal, you will be offered early discharge or a 24-hour hospital stay. Women often go home a few hours after the birth, and our experience tells us that in many cases, going home and settling into a known environment helps to establish confidence and effective breastfeeding. Your midwife is still available to you 24 hours a day after you have your baby.

Parents care for their babies in the hospital room. Nurses are available for emergencies and to give breastfeeding help. Your midwife will check on you every day you are in hospital. Nurses and a paediatrician in the special care nursery will care for babies who need more care. Babies who need even more specialized care may be transported to a different hospital.

### **Children at Your Birth**

Children cannot attend births at the hospital. Some families choose for siblings to witness the births of a new baby at home.

If you are planning to have children present at your birth, you will need to invite someone you trust to be present during your labour and birth. This person should be someone you feel comfortable with and he or she needs to be comfortable being present at the type of birth you are planning. The primary role of this person should be to meet the needs of the child/children and not to be a support person to you.

### **Postpartum (After Birth) Care**

After the baby is born the midwife will stay with you until you and the baby are stable and our paperwork is done. This usually takes 2 to 4 hours. Your midwife will visit you and your baby within 24 hours of the birth and at least 2 other times in the first week to check that you are recovering well and your baby remains healthy. These visits happen where you are: at home or in the hospital. If you wish to breastfeed a big focus during this time will be on breastfeeding. Additional breastfeeding support is available in the community and we may recommend this for you. Clinic visits for mother and baby happen at 2, 4 and 6 weeks after the birth. Support for parents continues throughout this time with a midwife available by pager for urgent concerns and our office for non-urgent issues. After 6 weeks your care is transferred back to your family doctor.

### **Transfer of Care**

Midwives are specialists in normal and low risk obstetrics. When complications beyond the scope of practice arise, your midwives will ensure you get the right care from the right professional. Depending on the complication, it may be necessary for a physician to take over your care. When care is transferred to a physician, your midwives will stay involved to offer support. Midwives will often take over again after the birth and will provide care for your baby. Your midwife will arrange for a consultation from a paediatrician and a transfer of care if there



are concerns for the baby. We will begin caring for you and your baby again if the problem resolves.

### **Confidentiality and Privacy:**

Our Midwifery Practice Group is bound by law and professional ethics to safeguard your privacy and the confidentiality of your personal information.

This includes:

- Retaining/destroying records in accordance with the law
- Collecting only the information that may be necessary for your care
- Keeping accurate and up-to-date records
- Safeguarding the medical records in our possession
- Sharing information with other health care professionals on a need to know basis where required for your health care
- Disclosing information to third parties only with your express consent or as permitted or required by law; and

You will be asked to sign a consent form that gives your consent for our collection, use and disclosure of your personal information for purposes related to your care.

You have the right to see your records. You may also obtain copies of your records. Simply ask your midwife and they will provide copies to you.

Please speak with your midwife if you have any concerns about the accuracy of your records.

If you would like to discuss our privacy policy in more detail, or if you have specific questions or complaints about how your information has been treated please speak to your midwife. Alternatively, you can advise our administrator that you would like to speak to our **Privacy Officer**. The contact information you provide will be forwarded to the Privacy Officer who will contact you directly to discuss your concerns. This person is a partner in the practice and responsible for addressing any privacy concerns you may have.

For additional information, you may ask for a copy of our full privacy policy from our staff. Our full privacy statement is available on our website at [www.bornmidwives.ca](http://www.bornmidwives.ca)

We do teach other midwives and parents by telling birth stories. While no names are ever mentioned, it may be possible to recognize your birth story. If you provide us with a photo we will usually display it in our office. Please let us know if either of these would be a concern for you.



## **Your Responsibilities**

### **Staying Healthy:**

We ask our clients to take an active role in their health care by taking responsibility for their health. Efforts to make healthy choices about the things you have control over is the best way to grow a healthy baby. This includes good nutrition, not smoking or drinking alcohol, getting adequate rest, regular exercise, relaxation and stress reduction. Please let us know as soon as possible about prescription medication so that we can ensure you are taking the safest drug for the indication. We suggest avoiding over the counter medications unless you have reviewed them with your midwife or the mother risk telephone support line.

Please inform our administrator of any changes in your health card number, phone number or address.

**Mother Risk at 877-439-2744** is a telephone support line through Sick Children's Hospital. They can answer your questions about the safety of prescription and over the counter medications as well as other harmful substances during pregnancy and breastfeeding.

### **Breastfeeding:**

We strongly encourage you to breastfeed your baby. Breastfeeding is normal and offers many lifelong benefits for both of you.

Although breastfeeding is the most natural thing in the world it is not always easy. As midwives we are very dedicated to assisting women to resolve problems such as sore nipples and not enough milk. We have many skills in this area, and we can access other resources such as lactation consultants when this is helpful.

Our postpartum home visits mean that mothers and babies don't have to leave home to be reassured that things are going well or to get help with breastfeeding. We weigh the baby at each visit from day 3 on. We can link you with other resources in the community; community groups are a great way to get ongoing support after you leave our care when your baby is 6 weeks old.

### **Getting Informed:**

We encourage all clients to learn about normal labour and birth as well as possible complications and what we do about them. If you decide not to take Childbirth Education Classes, we suggest you read, watch videos or talk with us about pregnancy and birth. Please let us know how we can help you to find the information you need. Please feel free to ask us questions at any time.



**Trusting Relationship:**

In the interest of providing safe care and enhancing your birth experience, it is important for you to be honest with us during your pregnancy and labour, to share with us any feelings or situations in your life which may affect your pregnancy and birth from valid sources. It is also important that we establish a trusting relationship to communicate freely and openly. Please talk to your midwife if you have concerns or difficulty communicating so that we can address any issues and move forward to create a positive experience.

*We look forward to working with you at this special time.*